UConn Health
Office of Clinical & Translational Research
Standard Operating Procedures

Title: Creating an ORES Visit in JDH to Split Charges in A Visit	
Relates to Policy: 900-11, 901-11	
SOP#: 1203-17	Version 1.0
Prepared by: P. Olsen	Original date: 10/04/2016
Approved by: J. Kulko	Date approved: 10/04/2016

Purpose and Applicability: The purpose of this document is to describe the procedure to create an ORES visit when it has been determined that the charges included in a JDH visit have to be split and billed to different payors.

Background and Significance: A single JDH visit may contain multiple charges. Upon review, it may be determined that some of the charges must be billed to a different payor. In most cases, the charges are split between insurance and research. Less frequently, when a clinical trial participant is enrolled in a Medicare Advantage plan, charges have to be split between Medicare and the Medicare Advantage plan.

Scope: The JDH charges in a visit must be split and a second visit created when:
1. The visit includes charges that must be billed to insurance and others that should be billed to research.
2. If a clinical trial participant is enrolled in a Medicare Advantage plan and a visit has regular routine care charges as well as clinical trial routine care charges. The routine care costs that are part of the clinical trial must be billed to Medicare and the regular routine care charges are billed to the Medicare Advantage plan.

In both of these situations, an ORES visit has to be created in order to split the charges.

Responsibilities: The Coding Reimbursement Specialist is responsible for reviewing UMG and JDH charges that are associated with an open case number. If it is determined that the charges have to be split so the correct payors are billed, the Coding Reimbursement Specialist creates an ORES visit and contacts JDH Patient Billing to move the appropriate charges to the new visit. Additional processing is detailed in SOP 1201-17, 1202-17, 1205-17.

Procedural Steps to Create an ORES Visit:
To create the ORES visit:
1. Sign into ADT/HPA
2. Enter Function '1'
3. Enter the Patient (by name or MT#)
4. Enter 'AI' in the Action field
5. Choose the visit that has to be split and note the visit information (Date, time, Attending, Referring)
6. Hit F7, Q to exit back to the Patient Action screen
7. Enter 'ZA' in the Action field
8. Select '*New Visit*'

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9. Enter 'ORES' in the Visit Type field, hit Enter
10. Change the Admission Date and Time to the visit information that was previously noted in Step 5.
11. Enter 'G' in the Adm Number field to generate a visit. Note the new admission number
12. Enter the following for charges to be billed to Research:
    Location: 'UNASSIGNED OTHER LOCATION'
    Adm Type: 'ELECTIVE'
    Adm Source: 'UP/UD PHYSICIAN'
    Possible Liability: 'Y'
    Enter the PI's name in the Admitting and Attending Physicians fields
    Hit F10
13. On the next screen, enter Z00.6 as the Admitting DX and the case #
14. Hit F10 to get back to the Patient Action screen
15. Enter 'DP' in the Action field to enter Discharge information
16. Enter Discharge Date: same as Admission Date
    Discharge Time; 'N' (for Now)
    Disposition: '3' (HOME)
17. Hit F10

In the instance of charges being split between Medicare and Medicare Advantage, the Admitting DX is the same as that of the original visit. Z00.6 is a secondary diagnosis.

Once the visit is created, an email must be sent to JDH personnel indicating that the charges that are to be billed to RESEARCH or to Medicare have to be moved to the newly created ORES visit. Copy and paste the charge information to the email and highlight the Research or Medicare charges that are to be moved.
When the charges have been split, the visits can be processed as outlined in SOP 1201-17, 1202-17, and 1205-17.

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