Common TES edits

TES Edit: Ref Phys req’d for all trans. (This edit is received if a referring phys
Edit is corrected inappropriately.

How to correct: The referring physician’s upin must be entered on the header page of the
transaction (A Screen). Highlight the transaction and press E to edit. Press the page up key
twice. The A screen should now be displayed. Tab to the “Referring Prov:” field and enter the
upin. Press F10. You should see the “Filing encounter” message.
Common TES edits

TES EDIT: Procedure description override is required.

How to correct: Type a "C" in the "desc over:" field. At the bottom of the screen a line will display titled, "Procedure Append/Change:" Type the name of the supply in this field. Press F10.
Common TES edits

TES EDIT: Missing referring physician

How to correct: The referring physician’s upin must be entered on the header page of the transaction (A Screen). Highlight the transaction and press E to edit. Press the page up key twice. The A screen should now be displayed. Tab to the “Referring Prov:” field and enter the upin. Press F10. You should see the “Filing encounter” message.
Common TES edits

TES EDIT: Invalid diagnosis for ###### (the diagnosis code entered is not valid for the procedure code entered.)

HOW TO CORRECT:
This edit is stating the diagnosis does not warrant the service. The user should do the following:

1. Verify with the physician that the diagnosis is accurate.
2. Determine if the diagnosis linked to the procedure is the correct diagnosis.
3. If both items above are accurate, and there is not another diagnosis, complete a "Charge Procedure Addition and/or Correction Form". Indicate "force extract" charge on the bottom of the page.

Remember: when a change is made to a diagnosis, you must page up to the A-screen and link the diagnosis to the procedure.
Common TES edits

TES EDIT: Missing transaction diagnosis. (This edit is received when changes are made to the diagnosis code and the procedure is not linked to the code.

How to correct: Select the transaction and press an E to edit. Press the page up key twice to access the “A screen.” In the “diag” field of the procedure line, enter the field number of the diagnosis that should be linked to the procedure. Press F10 to file the encounter.
Common TES edits

TES EDIT: Diagnosis needs additional digits.

How to correct: Determine which diagnosis requires additional digits. Access the "B screen." Tab to the appropriate diagnosis and enter the corrected data. If the diagnosis is truly only a 3-digit number, the number must be followed by a period (###.). Press F10 to file encounter.

(Remember: when a change is made to a diagnosis, you must page up to the A-screen and link the diagnosis code to the procedure.)
Common TES edits

TES EDIT: Injury Date Missing. (Any diagnosis code that begins with an 8 or 9 will require an injury date)

How to correct: Select transaction and press E to edit. Tab to the “Inj Date” field. Enter the date. Tab to the “Inj Type” field. Enter the code for the injury type. A question mark can be entered in this field to display the dictionary choices. Press F10 to file the encounter.
TES EDIT: Inpatient code w/office or outpatient location

How to correct: Determine if the CPT code is invalid or if the location code is invalid. Select the transaction and press E to edit. Tab to the appropriate field and enter corrected data. Press F10 to file encounter.
TES Edit: Consulting phys = referring physician (this edit is received when the referring physician entered is the same as the physician providing the service.)

How to correct: When a consultation visit is charged, a referring physician must be entered. Since a provider cannot refer a patient to himself, the referring physician must be different than the one providing the services. If the patient was self-referred then a consult code cannot be used. If the service was truly a consultation, then the upin of the referring physician must be entered in the “referring prov” field of the “A-screen”. (Follow the same steps as adding a referring physician.)