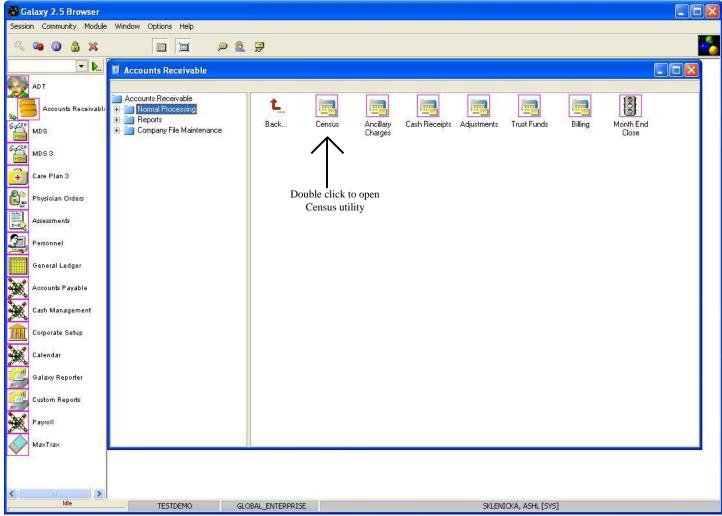
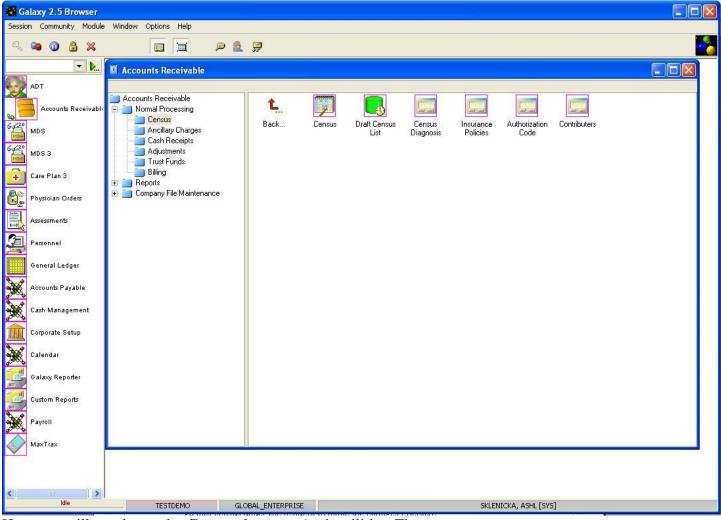
NORMAL PROCESSING CENSUS

Focusing on just the **Census** icon, double click on **census** in the main screen of **Normal Processing** to open the census utility.



After double clicking on **Census**, you should see the screen below.



Here you will see that under **Census** there are 6 sub-utilities. They are:

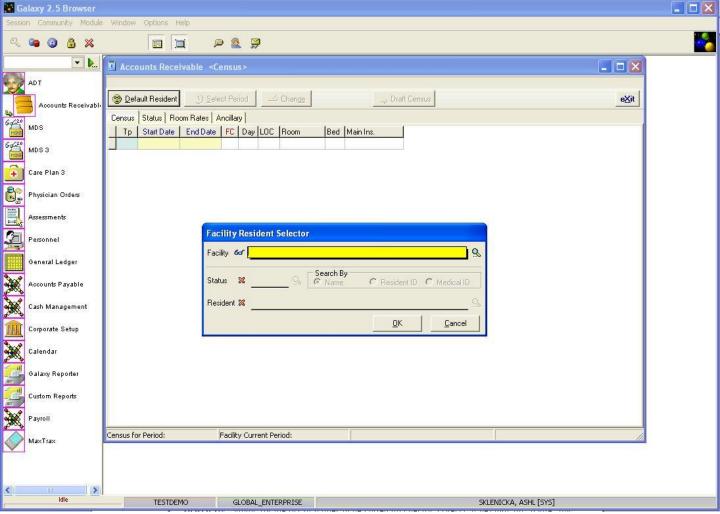
- **Census** where a facility does updates to residents' information that pertains to billing and charges/rates. Items like change in status, financial class, insurance coverage, etc all take place in this section.
- **Draft Census List** where a facility can see a running list of all the suggested census changes the MDS Coordinator is purposing from the ADT/MDS Modules that need the approval or dismissal of the bookkeeper on the A/R side.
- Census Diagnosis where a facility can find, add, or edit resident diagnoses as needed on the
 A/R side without having to go through the steps in Census. NOTE: To make changes effective
 on a resident's Census Diagnosis you will need to reaccept the census record on that resident
 using the Census utility.
- Insurance Policies where a facility can update any changes to a resident's insurance coverage or see all the insurance coverage a resident has on the A/R side. NOTE: To make changes effective on a resident's Insurance Policy you will need to reaccept the census record on that resident using the Census utility.
- Authorization Codes where the system will look to see which authorization codes have been

established for certain covered ancillaries based on the setup in Company File Maintenance.

• **Contributors** – where a facility can see all the record(s) for individuals who are paying for the expenses of a specific resident and the amount or percentage the individual is responsible for.

Select the sub-utility of **Census** you will need to conduct your facility's operations by double clicking on the appropriate icon.

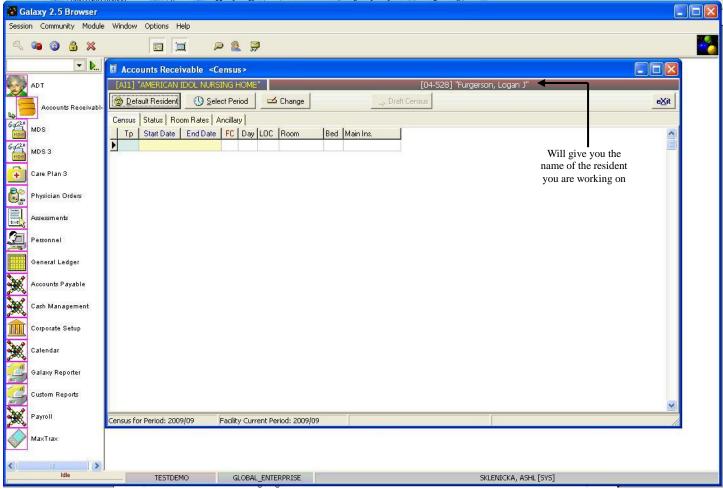
CENSUS



Facility Resident Selector- After double clicking on the Census icon the screen above will load. The **Facility Resident Selector** is where you use the magnifying glass to locate and select the attributes needed to locate the resident whose census you want to work on. Here you see the following fields:

- **Facility-** select your facility by using the magnifying glass. NOTE: Some facility names will default in here automatically; this is used when companies are a part of an enterprise and have more than one facility using the Galaxy software.
- **Status-** select the appropriate status by using the magnifying glass to pull up the list of resident names that will appear under that status. NOTE: if you want to see both admissions and discharges on the list than use the **clear** option which will leave this field blank.
- **Search By-** allows for the list of names to be sorted by specific criteria. It defaults on **name** but you can select the option you are most comfortable working with.
- **Resident-** click the magnifying glass to open up the drop down menu and select the resident whose census you want to work on or create. NOTE: there is a search bar at the bottom of the drop down menu that allows for faster selection of resident names.

Press **ok** after the residents name has been selected to proceed.



Census Main- This is the main screen that will load once you have selected the resident's name from the **Resident Selector**. NOTE: If there are no records on the main screen, it means that a census has never been done on the selected resident. To continue follow the steps below however, if there are records on this screen proceed by pressing the **change** button. Here you see the following buttons:

- **Default Resident-** used to select a different resident name to pull up their census record without having to get out of the **Census** utility.
- Select Period- pulls up a calendar to select a date and year to locate older/closed census records.
 NOTE: when looking at older census records other than current period, if changes need to be made a "RETRO" button will appear replacing the change button, forcing you into retro census mode.
- Change- used to create all records to the current period including creating the very first census
 record on a resident.
- **Draft Census-** this button will activate to let the bookkeeper or A/R side know that there are recommended changes to the census record (*coming from the ADT/MDS modules*) that needs to be approved or dismissed.
- Brownish Red Bar- will display the name of the resident whose census you are currently

working on. Located towards the top of the screen.

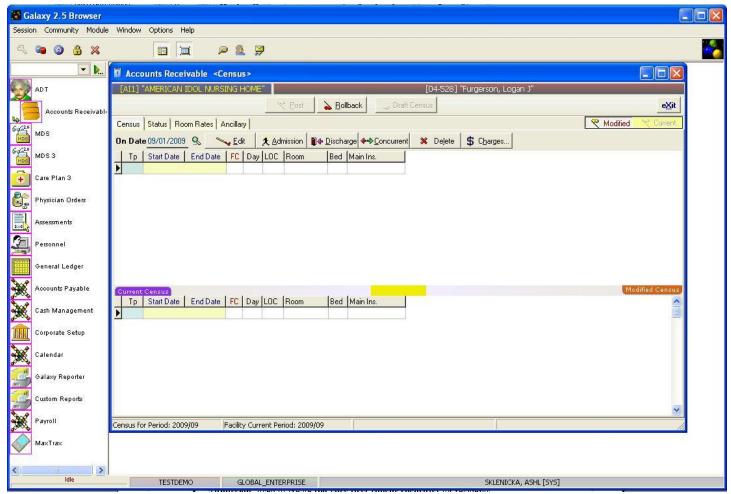
To proceed press the **change** button.



This message is informing you that the resident you are working on might have a new primary and/or admitting diagnosis that could affect their billing and charges.

If you receive this message after pressing the **change** button click **yes**, to go to the **Census Diagnosis** subsection of **Census** and jump to *page 24* in this manual to create the record(s) to move forward.

NOTE: if you know that the diagnoses on the resident has not changed and you still get this message press **no** to move forward.



Census Adjustment- This split screen that will load once the **change** button has been pressed. The top will show records that are used to make changes, while the bottom shows the records from the last census posting (*purple tab that says current census*). NOTE: when creating census records for the very first time you will not see records in any of the two sections. Here you will see the following areas:

Buttons:

- **Post** (**inactivated**) will become activated once changes have been made to records. Once this button is pushed it sends the information to the server and becomes permanent until the month end close is performed or a census change has been posted again.
- **Rollback** in the event you do not want to post, the rollback button is used to reset the census records back to the very last posting (*records under the purple tab*). NOTE: census will not allow you to exit unless the records are posted or rolled back.
- **Draft Census (inactivated)** will become activated to let the bookkeeper know that there are suggested changes from the clinical modules that might affect the resident in regards to billing.
- On Date pulls up the calendar to allow user to select the date that changes have occurred for accurate census records. This is used when there is a change in *Day Type*, *Insurance*, etc.
- **Edit** main button used after census records have been created to make changes or add more records.

- **Admission** used to create **the very first census record(s)** for residents if there are no current records.
- **Discharge** used only when residents are discharged from the facility permanently or in the event of death. NOTE: if a resident leaves your facility but will be coming back, you would do an edit to the records and select the appropriate day type change.
- **Concurrent** used to create a concurrent record which is useful when conducting a room or bed hold. It allows for you to have a set of records with the same start and end date.
- **Delete** used to delete census records that are the by-product of an edited or changed record. Should be used with caution.
- Charges shows the portion of current charges created by the census for the resident selected. This comes in handy for a quick glance to make sure the charges are correct before it comes to the month's end close.

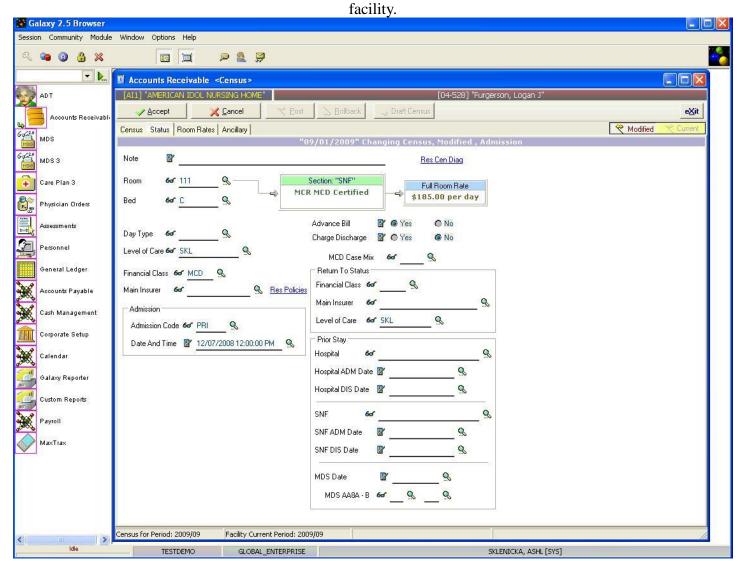
Tabs:

- **Census** shows the running census records for the current period on the selected resident.
- **Status** pulls in information about the resident from the ADT/MDS module (*room*, *bed*, *day type*, *level of care*, *etc*). This is where A/R will select the correct options when changes to certain attributes take place.
- **Room Rates** shows the room charge being paid by the resident and/or insurance coverage.
- **Ancillary** shows which insurance companies are picking up the ancillary charges for the resident.

To make changes to the census records you will press the **edit** button.

NOTE: when creating the very first record for a resident you will use the **admission** button. Select the appropriate button based on what needs to be done to move forward.

Census Status Screen: identifies key information concerning the resident's current status within or outside the



Most of the information on this screen is pulled over from the ADT module (*room*, *bed*, *level of care*, *etc*.). It is up to the A/R department to check for accuracy (*make changes if necessary*) and fill in the following information. Here you see the following fields:

- Day type select the correct option from the drop down menu by clicking the magnifying glass.
- Level of Care specify the resident's "Level of Care" by clicking the magnifying glass for the drop down menu.
- **Financial Class** specify the resident's "Financial Class" by clicking the magnifying glass for the drop down menu.
- **Main Insurer** select the appropriate option from the drop down menu by clicking on the magnifying glass. If this is the very first census record or you do not see the option you need, go to *page 18* in this manual to set up the "**Res Policies**" record(s).

NOTE: If the resident is financially classed as *private* there will be no Primary Insurer.

• Advance Bill – will be selected automatically based on data entered in Primary Insurer. Please

verify this option for accuracy. If there is an error changes will need to be made under **Company File Maintenance** in the **Per Diem Master.**

- Charge for Day of Discharge will be selected automatically based on data entered in Primary Insurer. Please verify this option for accuracy. If there is an error changes will need to be made under Company File Maintenance in the Per Diem Master.
- MCD Case Mix select the appropriate option from the drop down menu by clicking on the magnifying glass. This will also appear as MCR RUG Group for MEDICARE RESIDENTS. If you do not have this information upon admission, you may enter an answer that is most appropriate.

NOTE: If it is discovered at a later date the information entered is incorrect; you may return and edit the existing information. When doing an edit you must enter the information with the SAME date originally used, NOT the date the information was finally received.

Admission – this must be filled in if it did not pull over from the ADT Module

- Code- select the appropriate option from the drop down menu by clicking the magnifying glass
- **Date and Time-** bring up the calendar to select the appropriate option

Return to Status – this must be filled in as well for residents that have a Financial Class of MCD, MCR, INS, or OTH; you will select the financial information the resident would return to if their primary insurance were to expire.

EXAPMLE 1: if a resident is Medicaid and Medicaid no longer covered the resident, the resident would then be marked as a return to a private status (*PVT*).

EXAMPLE 2: if a resident is Medicare and Medicare runs out select the status the resident would return to (MCD, INS, etc.)

- **Financial Class** select the appropriate option from the drop down menu by clicking on the magnifying glass. This is in regards to the classification used on **Return to Status**
- **Main Insurer** select the appropriate option from the drop down menu by clicking on the magnifying glass based on the information in the **Return to Status** section.
- **Level of Care** select the appropriate option from the drop down menu by clicking on the magnifying glass based on the information in the **Return to Status** section.

Prior Stay – gets filled in when a resident enters your facility from a hospital. This can be filled out for all Financial Classes but is really important when it comes to MEDICARE residents since it goes on the bill.

- Hospital select the appropriate option from the drop down menu by clicking on the magnifying glass.
- **Hospital ADM Date** enter the date the resident was admitted to the hospital. This is found on the records given to the individual who takes care of the admissions process.
- **Hospital DIS Date** enter the date that the resident left the prior stay hospital.

SNF – gets filled out if a resident is transferred from anywhere else other than a hospital to your facility.

- SNF ADM Date enter the date the resident was admitted to the prior skilled nursing facility.
- **SNF DIS Date** enter the date that the resident was discharged from the prior skilled nursing facility.

MEDICARE & MEDICAID RESIDENTS ONLY:

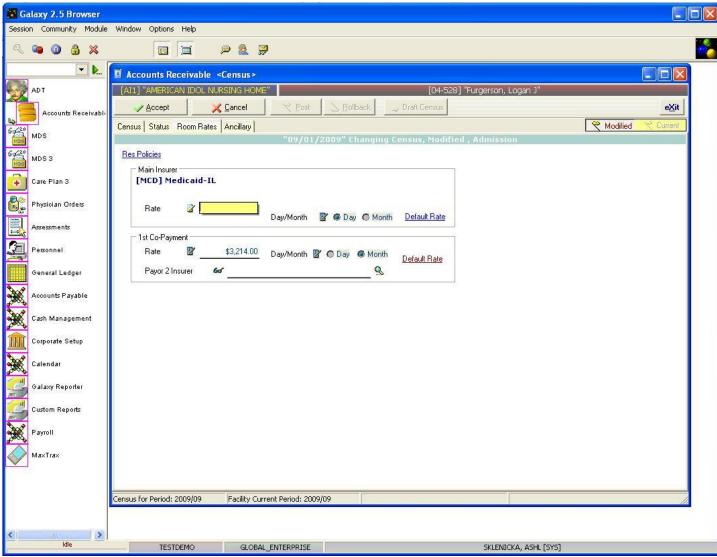
MDS Information – this area gets filled out for all Medicare and Medicaid residents. Consult with the MDS Coordinator for the information to enter into these fields.

- MDS A2300 Date this is the ARD Date from the assessment, it should pull directly from the MDS 3.0 Module, please verify for accuracy.
- MDS AI Code this information should pull from the MDS assessment setup, if the information has not pulled over check with your MDS Coordinator for the correct values.

NOTE: If it is discovered at a later date the information entered in this screen is incorrect; you may return and edit the existing information. When doing an edit you must enter the information with the SAME date originally used (the one posted on the census record), NOT the date the information was finally received.

Once all this information has been entered or reviewed for accuracy on the **Status tab** you will move on to the **Room Rates** tab.

ROOM RATE SCREEN: the information is pulled directly from the original creation of your facility's information within **Company File Maintenance**.



This will be the screen that loads once you have clicked on the **Room Rates** tab. Double check to make sure the correct rate pulled over under **Main Insurer**, if the rate is incorrect it must be changed in this location and also within the **Per Diem Master** located in **Company File Maintenance**; **Census Related**; **Per Diem Related**; **Per Diem Setup**.

1st Co-Payment – the amount of money the resident is responsible for should appear here. If it does not appear, add it and use the appropriate option button to signify if the amount is to be paid daily or monthly. You will also have to check the residents record in **Insurance Polices** located under **Normal Processing**, **Census**.

Payor 2 Insurer – this gets selected for MEDICARE residents so that the system knows on the 21st day who to assign the charges. Select the appropriate option from the drop down menu by clicking on the magnifying glass. NOTE: In the event you do not see the option you need click the blue **Res Policies** link at the top left corner of the screen and refer to *page 18* in this manual on setting up the record(s).

If everything looks correct move on to the Ancillary tab.



If for some reason there is no rate under **Main Insurer** try hitting the **Default Rate** link in blue. If you get the following message it is telling you that the system cannot find the correct record.

Check the set-up under Company File Maintenance; Census Related; Per Diem Related; Per Diem Setup to see if the record exists or needs to be created.

ANCILLARY SCREEN- this is where you will set up the insurance or Part B coverage for the resident. Galaxy 2.5 Browser Session Community Module Window Options Help P 🧸 👺 Accounts Receivable <Census> [04-528] "Furgerson, Logan J [AI1] "AMERICAN IDOL NURSING HOME" 💢 <u>C</u>ancel / Accept e<u>X</u>it Census Stakes Modified MDS Press this button once all information on all tabs has been checked for Res Policies MDS 3 accuracy and completion. Care Plan 3 Part B Ancillaries Physician Orders Insurer B Assessments Co Insurer B J Personnel Other Ancillaries General Ledger Insurer O Accounts Payable Co Insurer O Cash Management Corporate Setup Calendar Used to create insurance record(s) that do not appear on the drop Galaxy Reporter down menu. Payroll Census for Period: 2009/09 Facility Current Period: 2009/09

This is the screen that will load when the **Ancillary** tab is selected.

Part B Ancillaries- select the Part B insurer information

TESTDEMO

• **Part B Insurer** – select the appropriate option from the drop down menu by clicking on the magnifying glass. NOTE: if the record(s) you need are not listed in the drop down menu click the blue **Res Policies** link on the top left side of the screen and refer to *page 18* in this manual for instructions on how to set up the record(s) for part B coverage.

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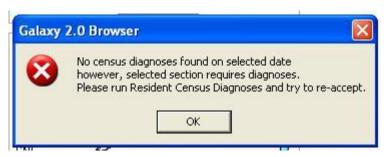
• **Co-Insurer B** – this is who will pick up 20% of the charges. Select the appropriate option from the drop down menu by clicking on the magnifying glass. NOTE: if the resident is responsible for the remaining portion, then Co-Insurer B is left blank.

Other Ancillaries – used when residents have policies with an insurer for other ancillary products/services. To fill in these fields if applicable follow the steps from **Part B Ancillaries**.

NOTE: If you get an error message, you will need to check your set-up in Company File Maintenance;

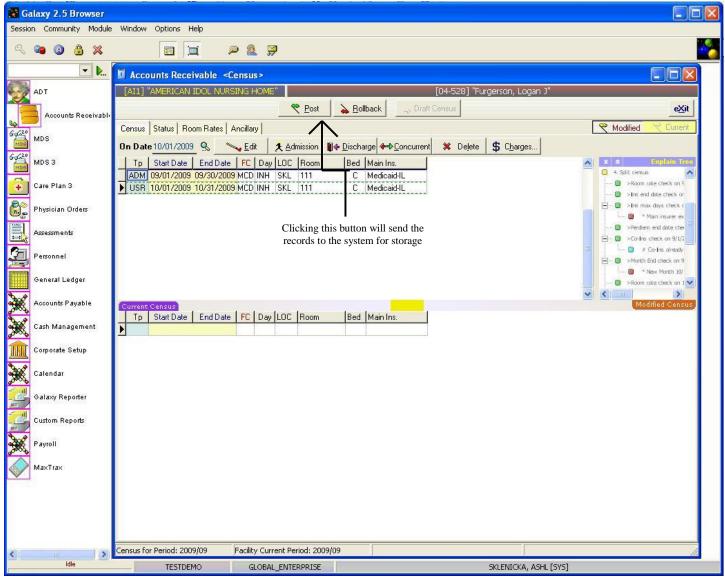
Insurers; Insurer; as well as the set-up in Company File Maintenance; Ancillary Setup.

Once everything has been reviewed and you feel all the information is correct you will click the **accept** button. If you get the message below, it is telling you that the census record is missing the diagnoses for the resident and you will have to select this. To do so click **ok** on the message and go to *page 24* in this manual to set-up the record(s) for **Res Diagnosis**. After you have taken care of setting up the Res Diagnosis you can click the **accept** button at the top.



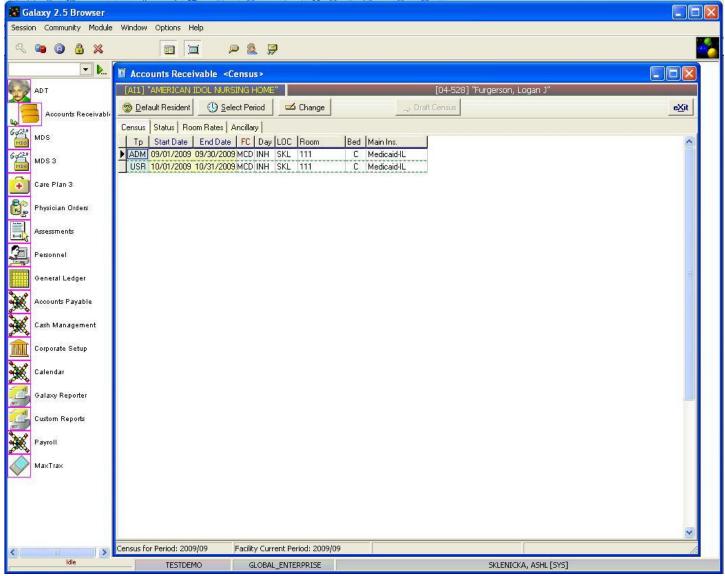
If you get the message below when trying to **accept** a record, it means that the field in the message was not filled in on the **Status** tab and needs to be corrected before proceeding.





Census Adjustment – Once you have successfully clicked the accept button this is the screen that will load.

Here you can see the records at the top were the ones you just were working on. In order for the system to keep these records you will want to press the **Post** button. This will send the records onto the server and the next time you come into the residents name under census you will see these records.

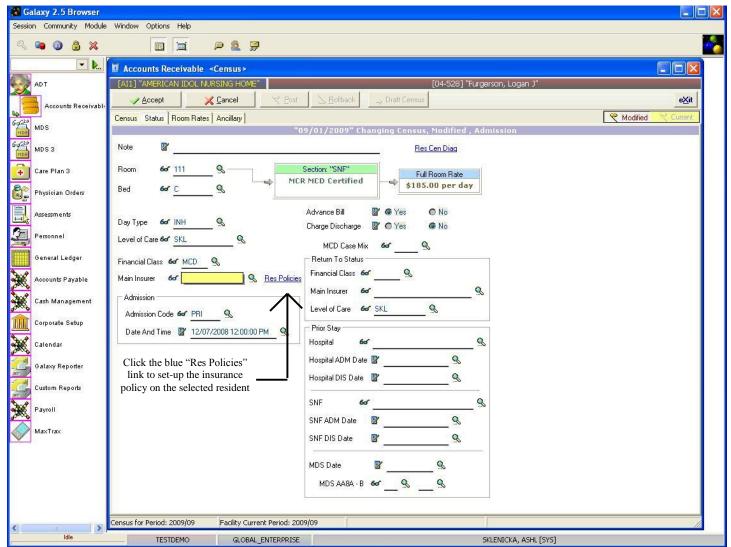


Census Main – After you have pressed the **post** button and the records have been sent to the server you will see this screen.

NOTE: if your facility has just joined the Galaxy System you will need to create a census record for all residents currently in the facility (**using admissions button**) as well as any residents that were discharged or have outstanding balances when you start using the Galaxy system.

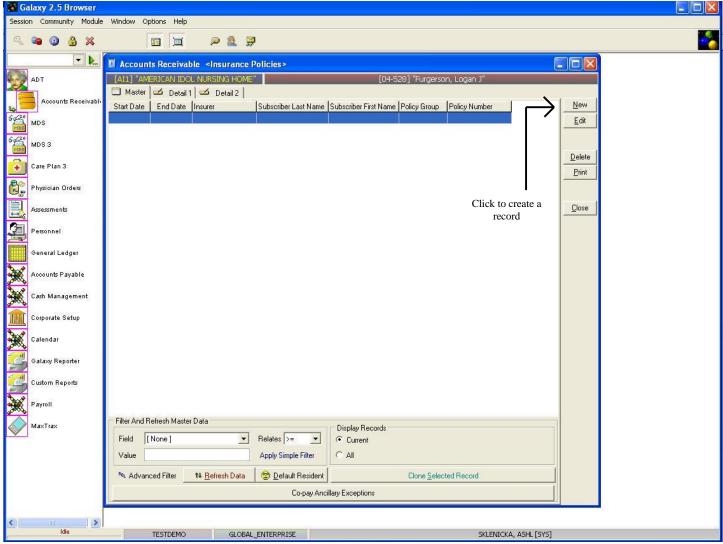
There will be no census records when you select the residents' name, follow the steps outlined above to create the records for all your residents.

RES POLICIS for very FIRST CENSUS RECORD



If by chance you do not see the correct insurance option on the drop down menu when clicking the magnifying glass you will need to create a Resident Policy (insurance). To do so click the blue "**Res Policies**" link next to Main Insurer on the Status tab. After pressing this link, the Galaxy system will take you to the **Insurance Policies** screen (*see below for example*).

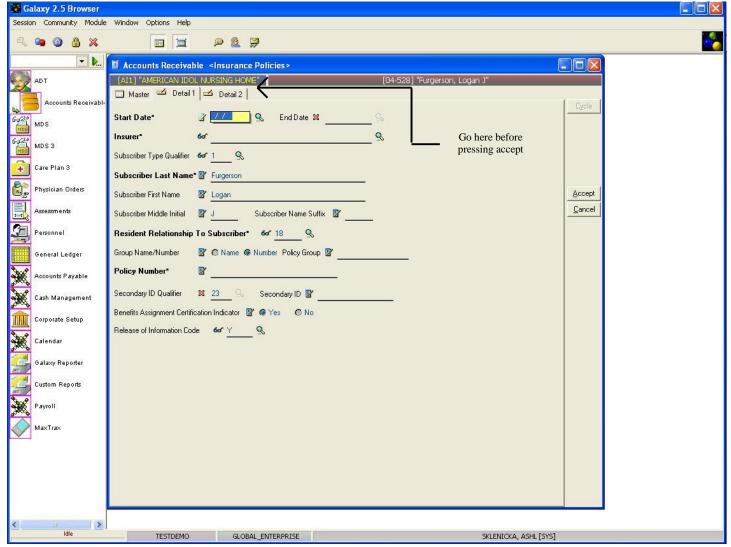
In the event you do not see the insurance record from the drop down menu after clicking on the magnifying glass, press the blue **Res Policies** link to setup the missing record(s).



Insurance Policies Master – After pressing the blue **Res Polices** link this is the **Insurance Policies** screen that will load.

It will hold the record(s) on residents/patients insurance information. Currently there are no records in the master list of our *demo facility* for our example resident *Logan Furgerson*.

To create/add a record press the **new** button to the right; to change the information on an existing record use the **edit** button.

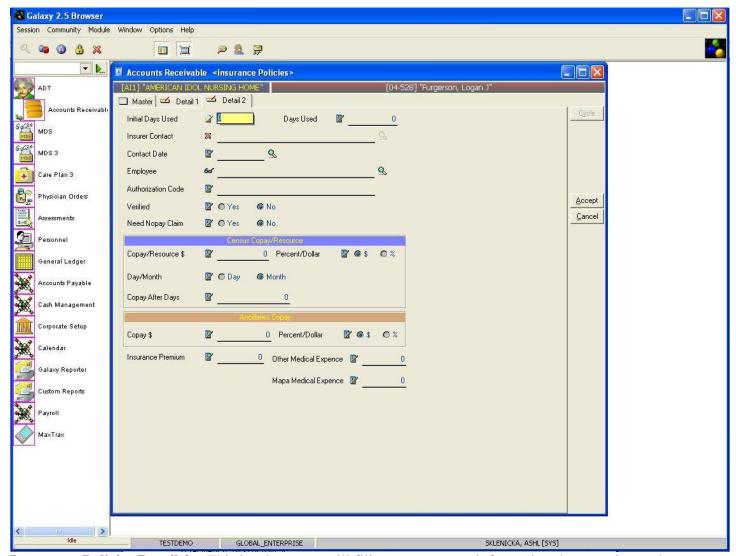


Insurance Policies Detail 1 – This is the input screen that loads once the new button is pressed. Here you will see the following fields:

- Start Date select the most appropriate date by click the magnifying glass to pull up the interactive calendar. The date should match the earliest census record on the resident. In the event this is the first census record for the resident use the date your facility has determined the starting date for the Galaxy system. THIS IS A REQUIRED FIELD.
- **Insurer** click the magnifying glass to pull up the drop down menu of all insurance providers. Select the correct option based on the resident's record. THIS IS A REQUIRED FIELD
- **Subscriber Last Name** this should fill in automatically, in case it does not you will have to enter the information.
- **Resident Relationship to Subscriber** this should fill in automatically, however if it does not select the correct option from the drop down menu by clicking on the magnifying glass.
- **Policy Number** should pull up once the insurer has been selected, however if it does not you will have to enter the policy number for the resident. THIS IS A REQUIRED FIELD.

Please fill in as much information as possible making sure the required fields are entered and then proceed to

the **Detail 2** tab before pressing the **accept** button.



Insurance Policies Detail 2 – This is where you will fill out some more information that pertains to the residents insurance.

If resident has **MEDICARE** fill out:

- **Initial Days Used** fill in how many days the resident has used in their Medicare insurance before entering your facility. THIS IS A REQUIRED FIELD.
- **Days Used** this field should not contain a value, the Galaxy system will fill in the appropriate value once the setup of the insurance record(s) has been completed.
- **Copay After Days** make sure a value is entered in this field. This will default to 20 days automatically for Medicare financial classes.

If resident has **MEDICAID** fill out:

• **Copay/Resource** \$ – enter the amount the resident is responsible for paying. This is known as the resident's resource amount.

- **Percent/Dollar** select if this resident resource amount is a percent or dollar charge.
- **Day/Month** select "Day" if the charge is daily or "Month" if it is applied monthly
- Copay After Days this field does not have to be filled out for Medicaid insurance.

If resident has **INSURANCE**:

• This tab will only get filled out in the event that there is a co-pay tied to the insurance provider.

Ancillaries Copay

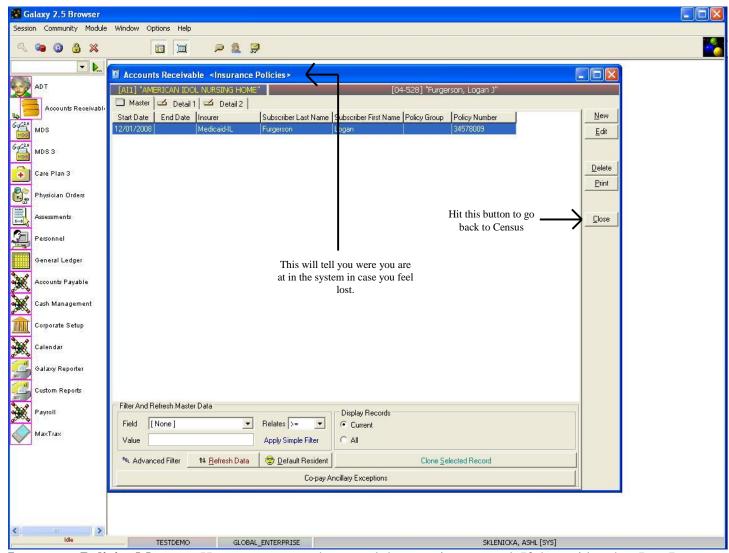
• Copay \$ – this gets filled in for any Part B coverage insurance record(s) that are being created. Enter in the value needed whether it is a dollar or percent amount and mark it accordingly.

Other Fields:

- **Insurance Premium** if the resident has any other insurance premium for the record being created enter that amount here.
- Other Medical Expense if the resident has any other medical expense amount enter that amount here.
- Mapa Medical Expense used for a client in PA.

Please fill in as much information based on the type of insurance record and press the **accept** button. This will pull you back to the master list on **Resident Policies.**

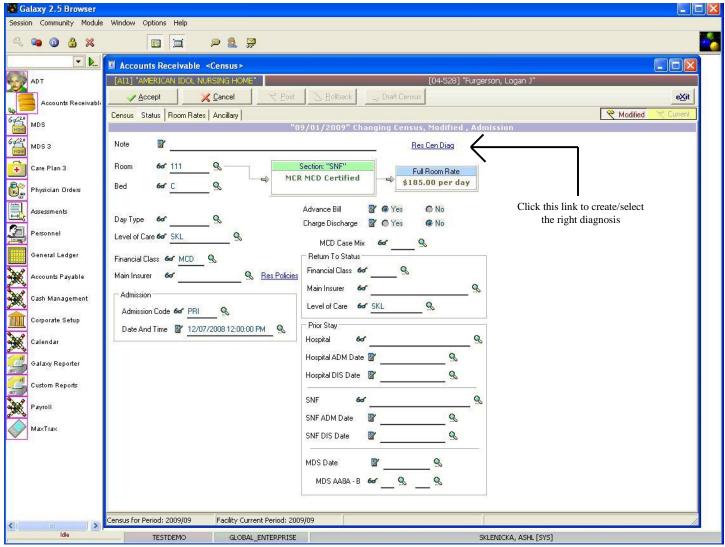
You should now see the record you just created (see screen below as a reference).



Insurance Policies Master – Here you can see the record that was just created. If the resident has Part B coverage or any other form of insurance coverage, records will need to be created.

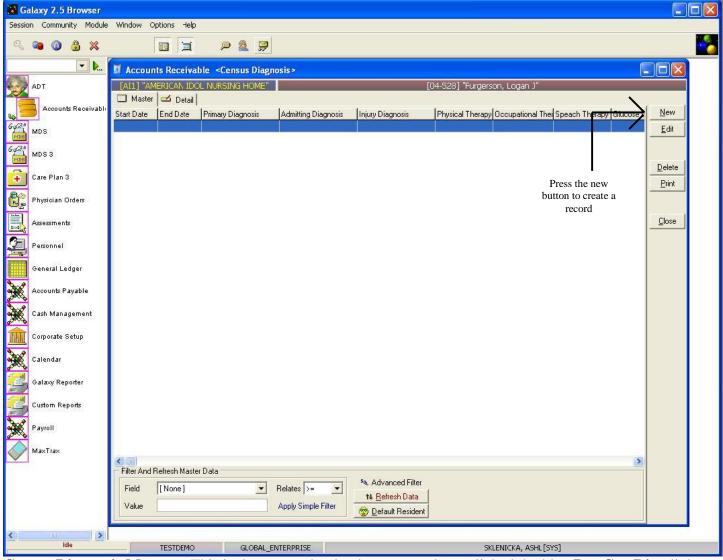
After all records have been entered click the **close** button to go back to **Census**. Go back to *page* 9 in this manual to select the option needed for the **Main Insurer** field and to continue with the **Census** process on the selected resident.

RES DIAGNOSIS for VERY FIRST CENSUS RECORD



When creating the very first census record or if you get an error message referring to Resident Diagnosis you will have to create a record(s) for these situations.

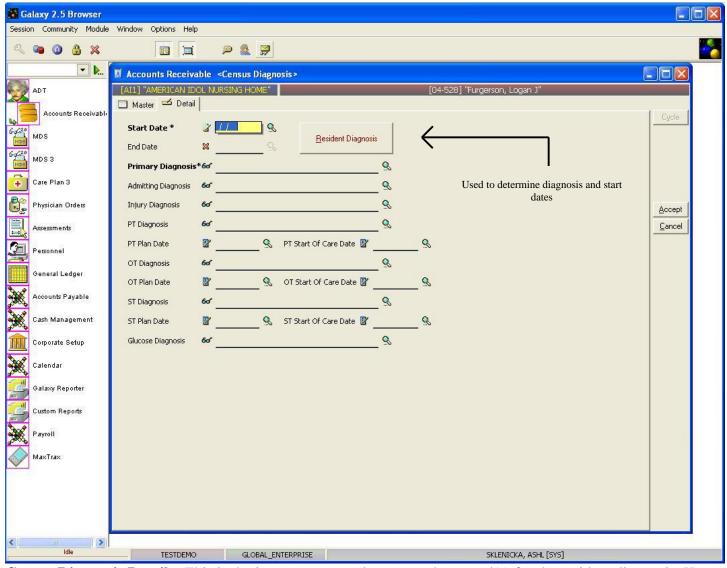
To do so, click on the blue link that says **Res Cen Diag** on the **Status** tab in **Census**.



Census Diagnosis Master – This is the screen that loads once you have clicked the blue Res Cen Diag link.

Currently there are no record(s) in the master screen of our *demo facility* for resident *Logan Furgerson*.

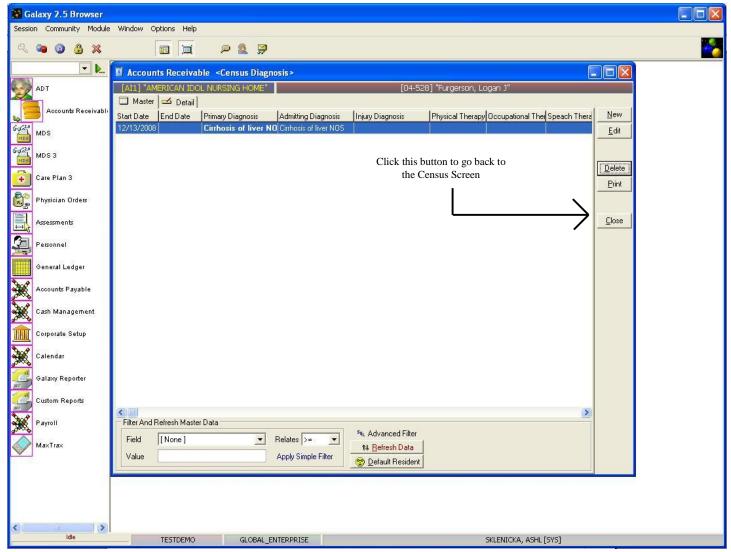
To create a record presses the **new** button.



Census Diagnosis Detail – This is the input screen used to create the record(s) for the resident diagnosis. Here you will see the following fields:

- **Start Date** this should be the date the resident received the primary and admitting diagnosis. Note: if you are unsure what the date is or even the diagnosis press the button that says **Resident Diagnosis** in red letters & go to *page 28* on understanding the **Resident Diagnosis** screen.
- Primary Diagnosis select the appropriate option from the drop down menu by clicking on the
 magnifying glass. NOTE: If you are unsure of the primary diagnosis click the box with red letters that
 says Resident Diagnosis to pull up the diagnosis list on the resident from the ADT module.
- Admitting Diagnosis select the appropriate option from the drop down menu by clicking on the magnifying glass. This field does not have to be filled in but helps when it comes to billing. We at Galaxy recommend that an appropriate diagnosis gets entered here.

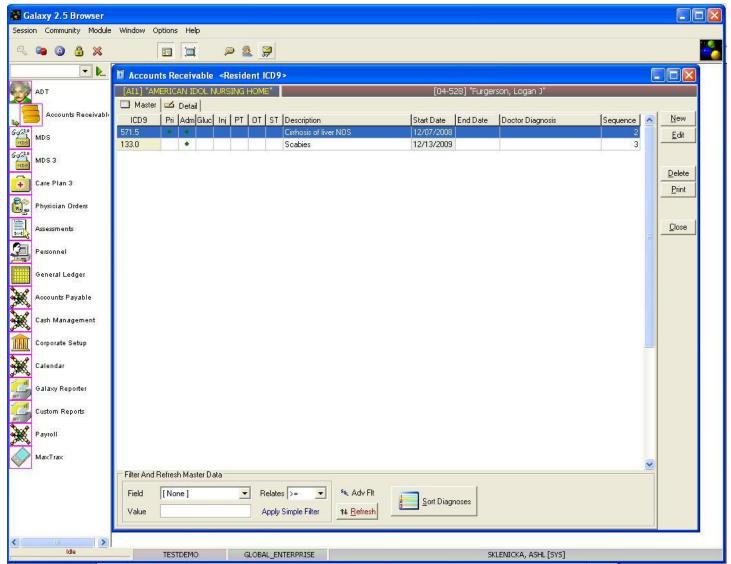
Once you have these fields and any other of the fields filled out click the **accept** button. The screen below is what you will see. Notice that there is now a record under the **Census Diagnosis Master List**.



Census Diagnosis Master – Once you have all the records needed on this master list, press the **close** button on the right to go back to the census screen. Go back to *page 14* in this manual and continue with **Ancillary** setup.

If everything looks accurate on the **Status, Room Rates,** and **Ancillary** tabs press the **accept** button and go to *page 17* in this manual to finish up the **Census** process.

Using the **Resident Diagnosis Screen** in ADT Module



Resident ICD9 Master – If you need to use the **Resident Diagnosis** button to find the primary/admitting diagnosis and start date, for a resident this is the screen that will load once the red button has been pressed from the **Census Diagnosis Detail screen.**

Here you can see there are two records on the **Resident ICD9 Master** screen for our example resident *Logan Furgerson*. Look through the records to find the one that has a diamond under the field **PRI** and has the most current start date. This will be the diagnosis you select from the drop down menu back in the AR Module.

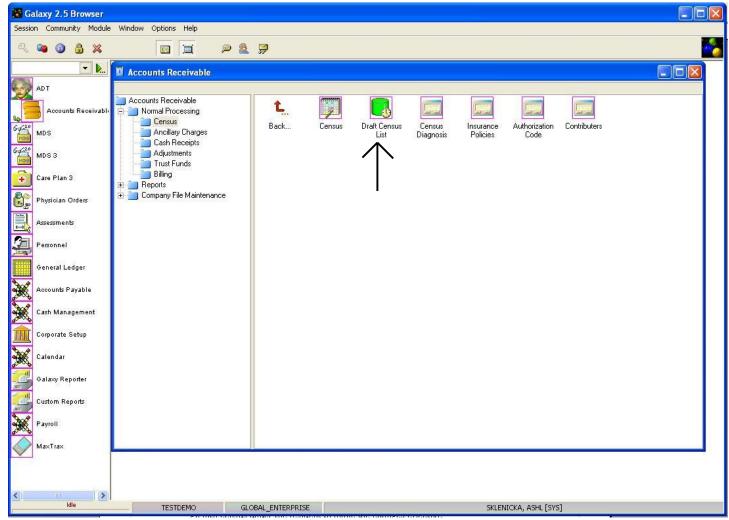
Once you have located the information you need, press the **close** button to go back to the **Census Diagnosis** screen to finish creating the record.

Note: if you see records on the master list that are pink and yellow, it means that the records have not been sorted in proper sequence. Speak with your facility's MDS Coordinator or the Admission department to get the

correct information on primary and admitting diagnosis if you run into an issue.

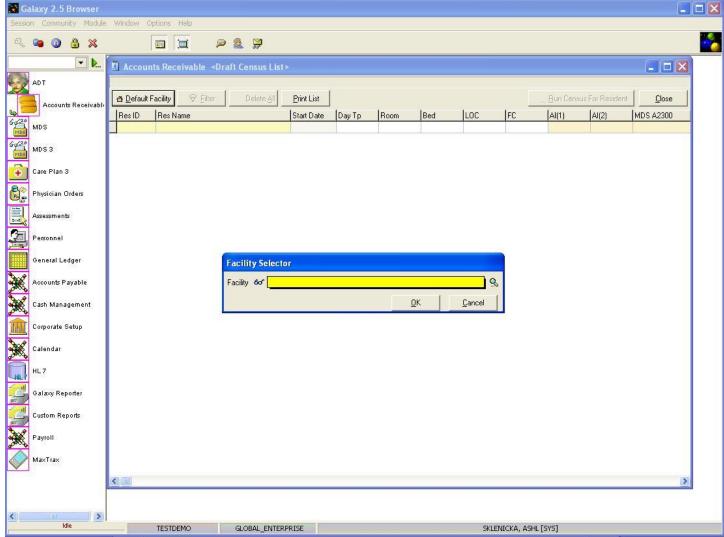
After you have pressed the **close** button on this screen go to *page 26* in this manual to finish the **Census Diagnosis** record setup.

DRAFT CENSUS LIST



Draft Census List – where a facility can see a running list of all the suggested census changes from the clinical modules (MDS ADT).

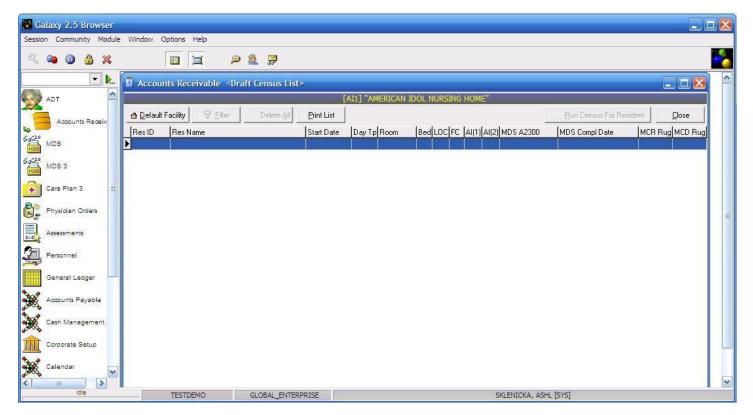
Double click on the **Draft Census List** icon to open up this sub-utility of **Census.**



Facility Selector – You might get this screen after double clicking on the **Draft Census List** icon if your facility is apart of an enterprise that has multiple facilities using the Galaxy system.

Select the appropriate facility from the drop down menu by clicking on the magnifying glass.

NOTE: if your facility is not a part of an enterprise using the Galaxy software, your facility name will automatically default and you will see the screen below.



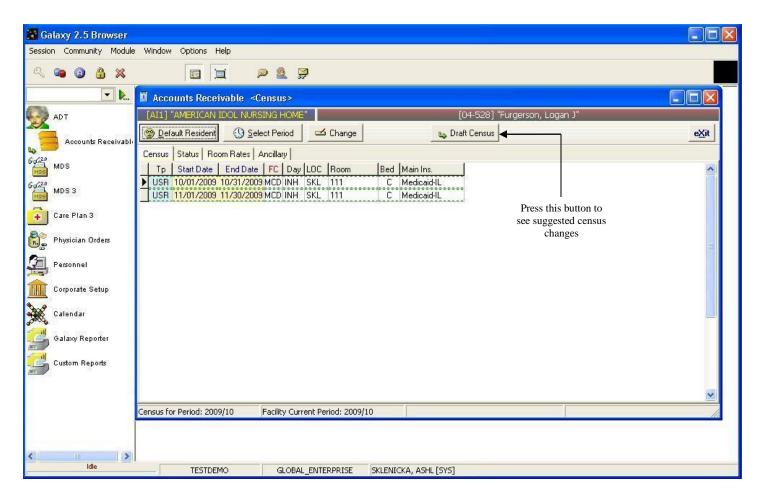
Draft Census Main – this is the main screen of the **Draft Census** sub-utility. Here you can see there are no records of suggested changes to the **Census.** Records will appear automatically once an MDS is completed for a resident that is either Medicare or Medicaid.

Once records are on this list it is up to the bookkeeper, or AR side to approve or dismiss the records on this list. To illustrate this situation see the screen on *page 34* of this manual.



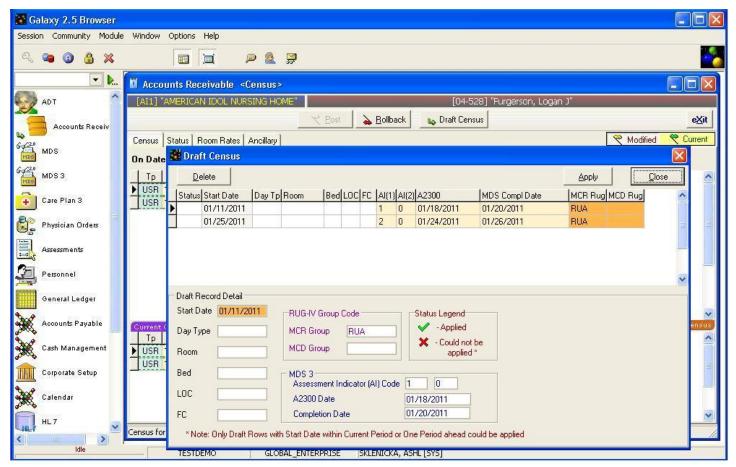
Highlight the record so it is in blue for the resident whose census you want to change using the **Draft Census** sub-utility. We will be using *Logan Furgerson* for our example.

Once you have highlighted the record needed, press the **Run Census for Resident** button located at the top right of the screen.



Census Main (draft) – here you will see you are now in Census and the Draft Census button is now activated.

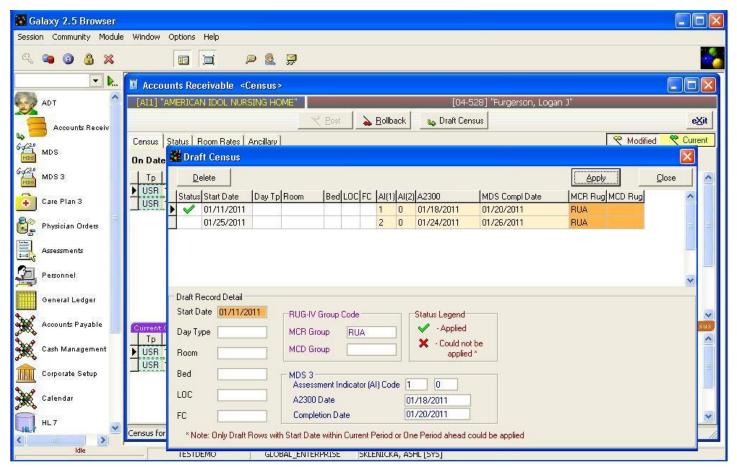
Press the **Change** button first, and then press the **Draft Census** button to move forward in applying or dismissing the census changes. See the screen below for assistance.



Apply Draft Census – after the Draft Census button has been pressed you will see the screen above.

Highlight the record you want to apply and press the **apply** button at the top right of the screen. Wait a few seconds for the Galaxy system to create the census record and a green check mark will appear under the **Status** field. See the screen below.

NOTE: you can apply multiple draft census records before accepting and then posting.

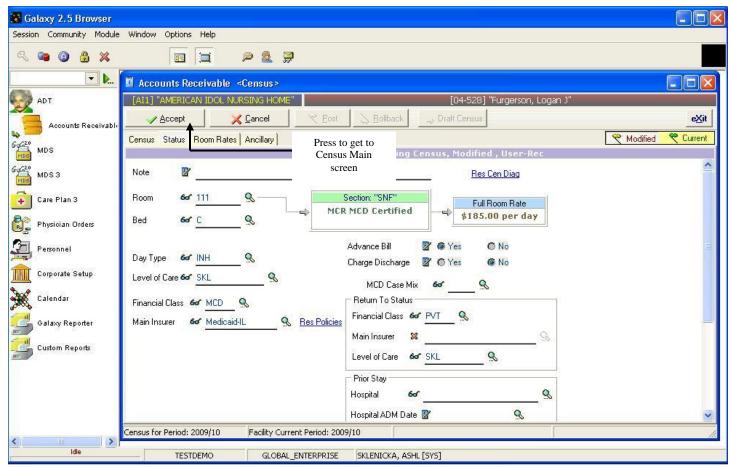


Draft Census Apply Screen – the green check-mark under the **Status** field means the census record has been applied successfully; you will still need to accept and post for the change to take effect. If a record has been applied it then gets removed from the **Draft Census** list.

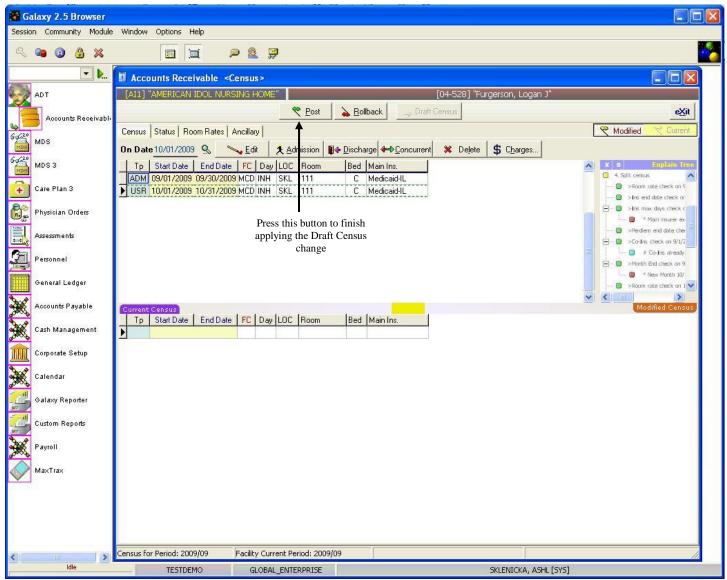
To exit out of this screen press the **close** button and make sure to **Accept** then **Post** so the change takes effect.

If you do not want to apply a record you can highlight it and press the **delete** button to remove the record.

NOTE: once a month end close has been preformed, the records under the **Draft Census** sub-utility will be erased.

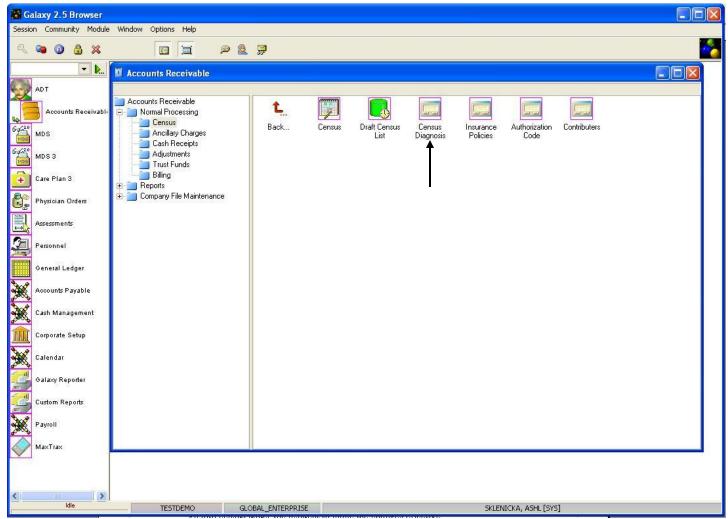


Draft Census Accept – press the **Accept** button to get back to the **Census Main** screen where you can **Post** the census and make the **Draft Census** change permanent.



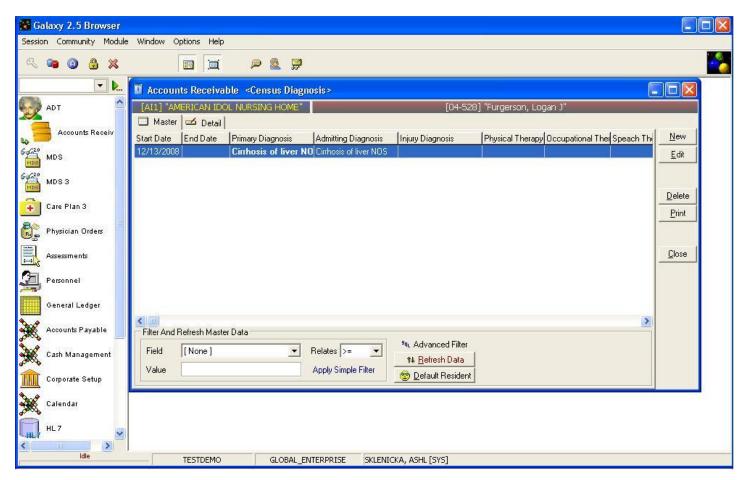
Draft Census Posting – the last step in the process is to press the **Post** button.

CENSUS DIAGNOSIS



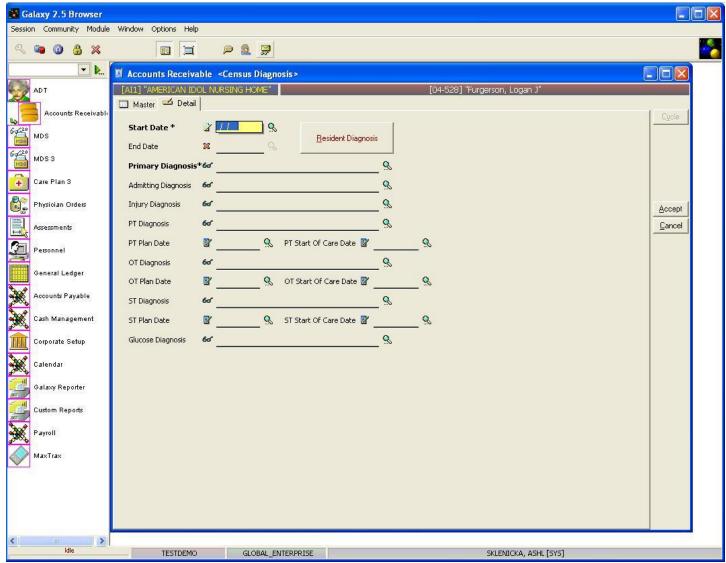
Census Diagnosis – where a facility can find, add, or edit resident diagnoses as needed on the A/R side without having to go through the steps in **Census**. NOTE: To make changes effective on a resident's Census Diagnosis you will need to reaccept the census record on that resident using the **Census** utility.

Double click the Census Diagnosis icon to open up this sub-utility.

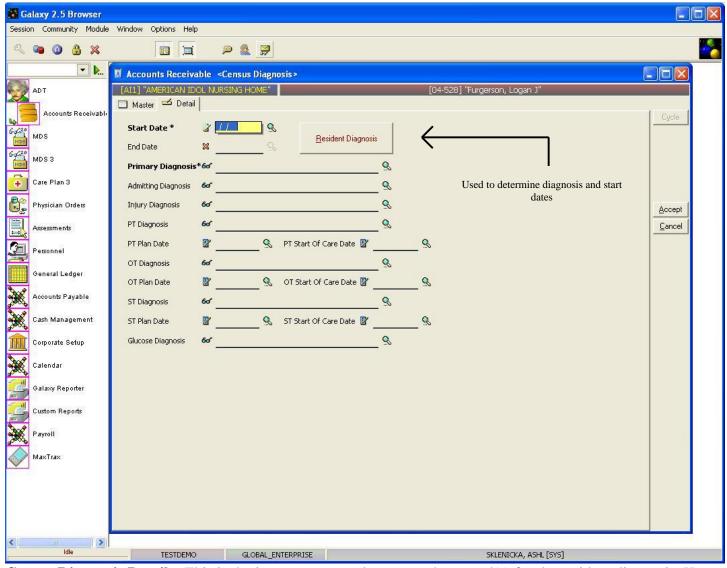


Census Diagnosis Master – you can see there is already a record on the master list.

To create additional records press the **new** button on the right side of the screen.



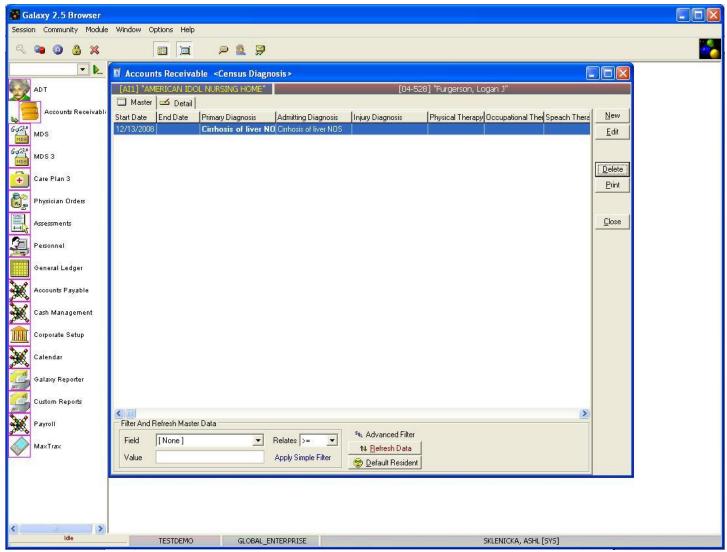
This is the same screen as found on page 23 of this manual. Refer to this page on how to enter in Census Diagnosis.



Census Diagnosis Detail – This is the input screen used to create the record(s) for the resident diagnosis. Here you will see the following fields:

- **Start Date** this should be the date the resident received the primary and admitting diagnosis. Note: if you are unsure what the date is or even the diagnosis press the button that says **Resident Diagnosis** in red letters & go to *page 28* on understanding the **Resident Diagnosis** screen.
- Primary Diagnosis select the appropriate option from the drop down menu by clicking on the
 magnifying glass. NOTE: If you are unsure of the primary diagnosis click the box with red letters that
 says Resident Diagnosis to pull up the diagnosis list on the resident from the ADT module.
- Admitting Diagnosis select the appropriate option from the drop down menu by clicking on the magnifying glass. This field does not have to be filled in but helps when it comes to billing. We at Galaxy recommend that an appropriate diagnosis gets entered here.

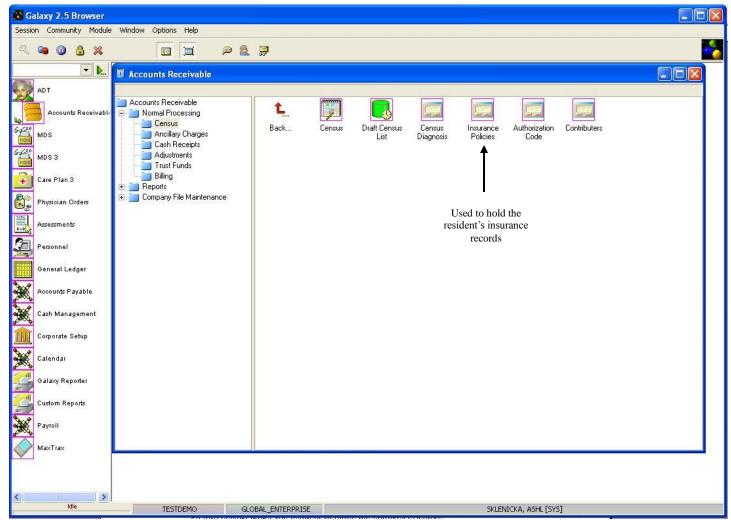
Once you have these fields and any other of the fields filled out click the **accept** button. The screen below is what you will see. Notice that there is now a record under the **Census Diagnosis Master List**.



Census Diagnosis Master – here you can see all the records that have been created.

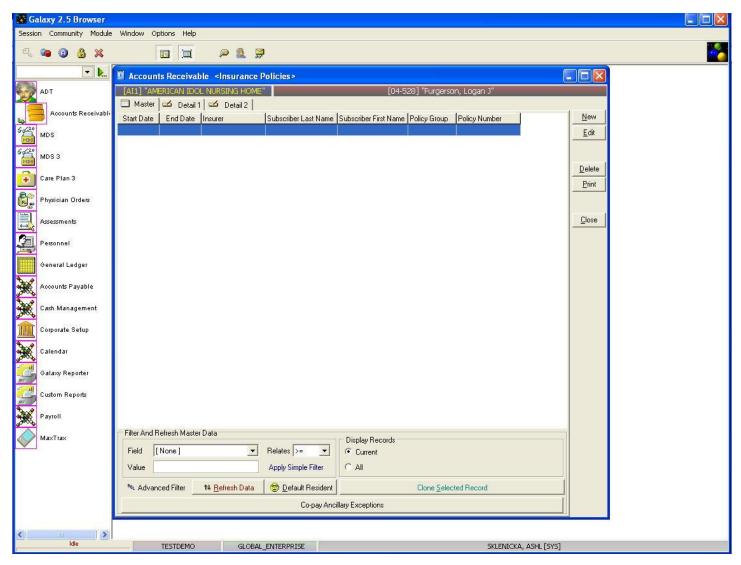
NOTE: you can create all the records needed on this screen without having to use the **Census** sub-utility.

INSURANCE POLICIES



Insurance Policies – where a facility can update any changes to a resident's insurance coverage or see all the insurance coverage a resident has on the A/R side. NOTE: To make changes effective on a resident's Insurance Policy you will need to reaccept the census record on that resident using the **Census** utility.

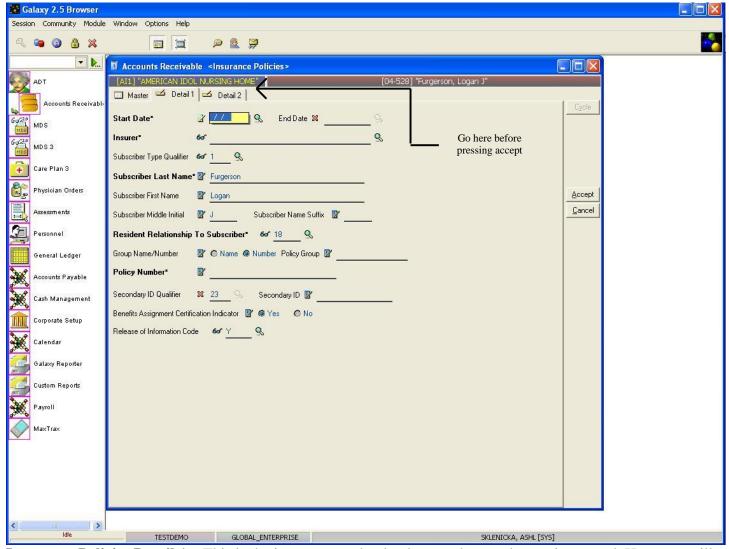
Double click on the **Insurance Policies** icon to open this sub-utility.



Insurance Policies Master – after double clicking the Insurance Policies icon the screen above will load.

It will hold the record(s) on residents/patients insurance information. Currently there are no records in the master list of our *demo facility* for our example resident *Logan Furgerson*.

To create/add a record press the **new** button to the right; to change the information on an existing record use the **edit** button.

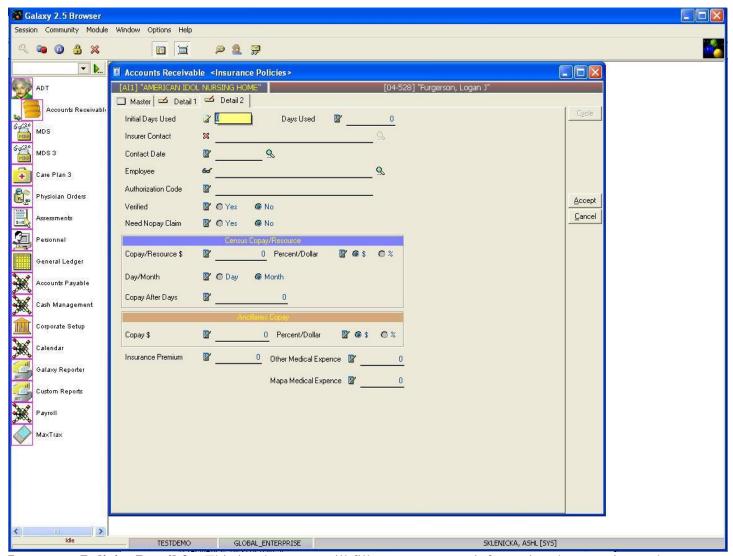


Insurance Policies Detail 1 – This is the input screen that loads once the new button is pressed. Here you will see the following fields:

- Start Date select the most appropriate date by click the magnifying glass to pull up the interactive calendar. The date should match the earliest census record on the resident. In the event this is the first census record for the resident use the date your facility has determined the starting date for the Galaxy system. THIS IS A REQUIRED FIELD.
- **Insurer** click the magnifying glass to pull up the drop down menu of all insurance providers. Select the correct option based on the resident's record. THIS IS A REQUIRED FIELD
- **Subscriber Last Name** this should fill in automatically, in case it does not you will have to enter the information.
- **Resident Relationship to Subscriber** this should fill in automatically, however if it does not select the correct option from the drop down menu by clicking on the magnifying glass.
- **Policy Number** should pull up once the insurer has been selected, however if it does not you will have to enter the policy number for the resident. THIS IS A REQUIRED FIELD.

Please fill in as much information as possible making sure the required fields are entered and then proceed to

the **Detail 2** tab before pressing the **accept** button.



Insurance Policies Detail 2 – This is where you will fill out some more information that pertains to the residents insurance.

If resident has **MEDICARE** fill out:

- **Initial Days Used** fill in how many days the resident has used in their Medicare insurance before entering your facility. THIS IS A REQUIRED FIELD.
- **Days Used** this field should not contain a value, the Galaxy system will fill in the appropriate value once the setup of the insurance record(s) has been completed.
- **Copay After Days** make sure a value is entered in this field. This will default to 20 days automatically for Medicare financial classes.

If resident has **MEDICAID** fill out:

• **Copay/Resource** \$ – enter the amount the resident is responsible for paying. This is known as the resident's resource amount.

- **Percent/Dollar** select if this resident resource amount is a percent or dollar charge.
- **Day/Month** select "Day" if the charge is daily or "Month" if it is applied monthly
- Copay After Days this field does not have to be filled out for Medicaid insurance.

If resident has **INSURANCE**:

• This tab will only get filled out in the event that there is a co-pay tied to the insurance provider.

Ancillaries Copay

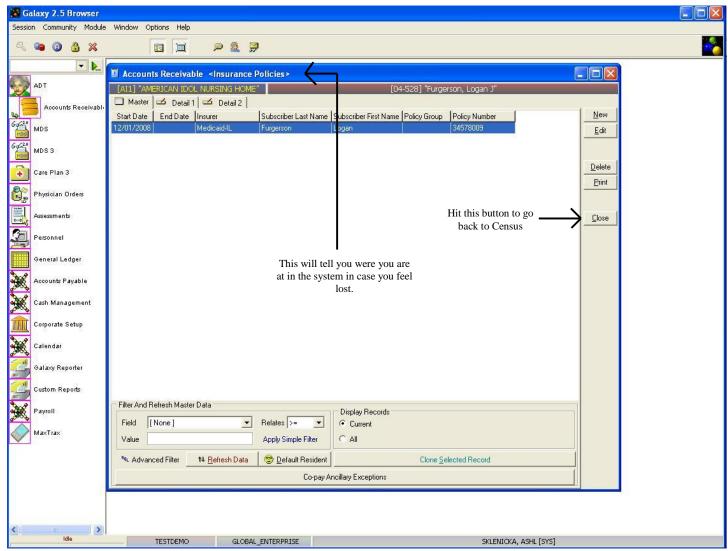
• **Copay** \$ – this gets filled in for any Part B coverage insurance record(s) that are being created. Enter in the value needed whether it is a dollar or percent amount and mark it accordingly.

Other Fields:

- **Insurance Premium** if the resident has any other insurance premium for the record being created enter that amount here.
- Other Medical Expense if the resident has any other medical expense amount enter that amount here.
- Mapa Medical Expense used for a client in PA.

Please fill in as much information based on the type of insurance record and press the **accept** button. This will pull you back to the master list on **Resident Policies.**

You should now see the record you just created (see screen below as a reference).

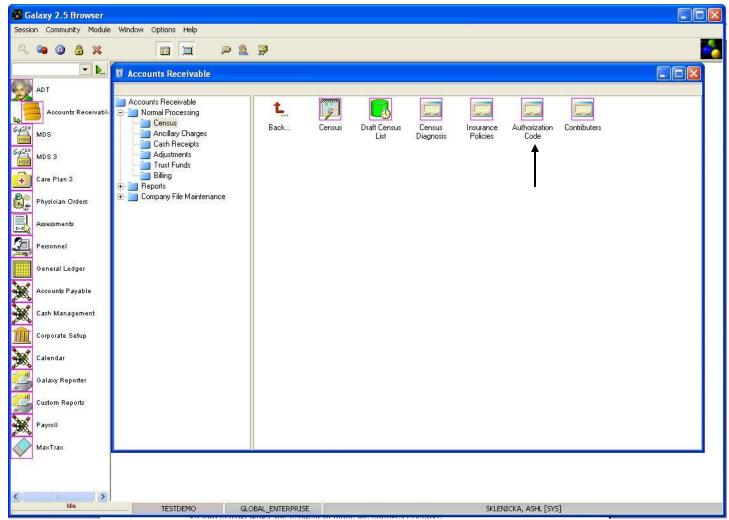


Insurance Policies Master – Here you can see the record that was just created. If the resident has Part B coverage or any other form of insurance coverage, records will need to be created.

Create all insurance records for the selected resident.

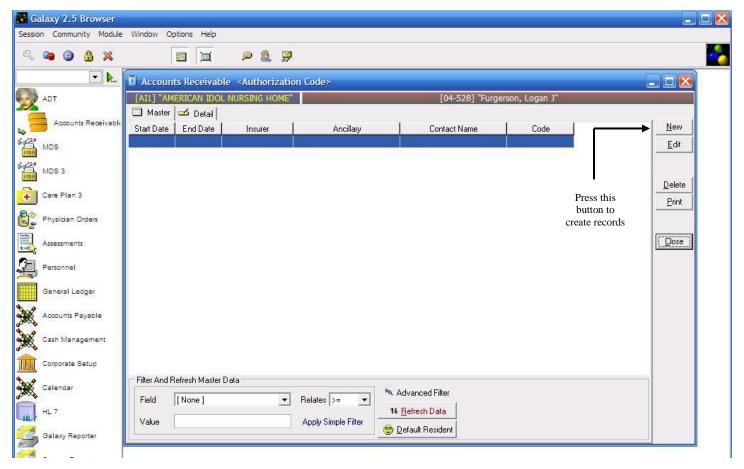
NOTE: if a resident's insurance coverage rate changes you will create that record here and update **Census** as well.

AUTORIZATION CODES



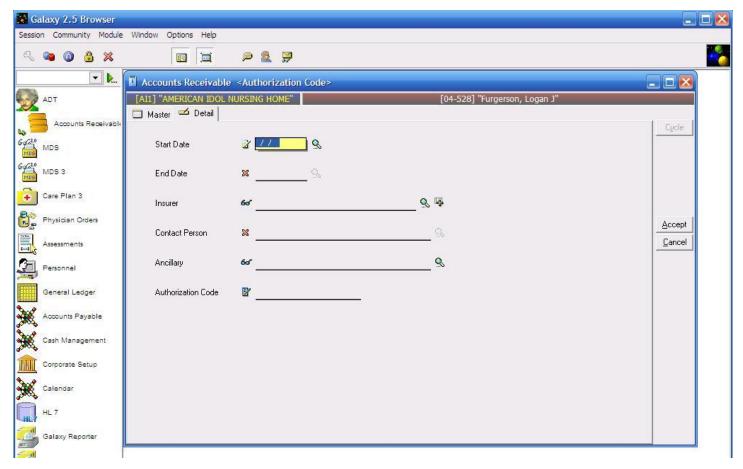
Authorization Code – this sub-utility in Census is used when a resident needs to have prior authorization for insurance coverage on ancillary charges.

Double click the **Authorization Code** icon to open up the sub-utility.



Authorization Code Master – here is the master list of all the records for a selected resident. You can see there currently is no record for our example resident in our *test facility*.

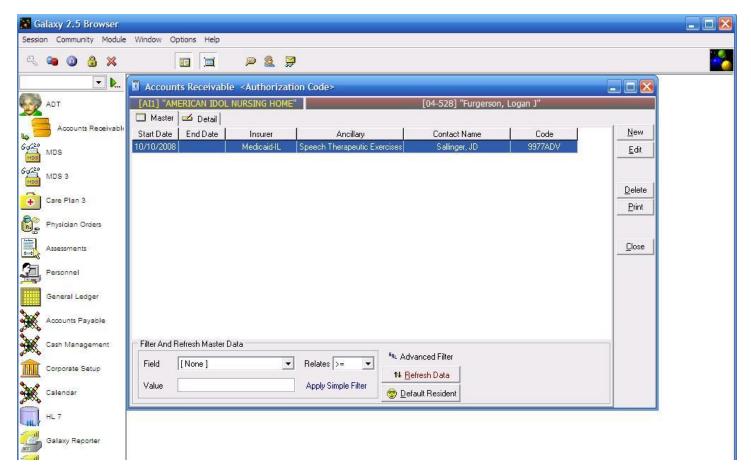
To create records press the **new** button.



Authorization Code Detail – this is the input screen used to create record(s) for the master list. Here you will see the following fields:

- **Start Date** use the magnifying glass to pull up the calendar to select the date the record became effective
- **End Date** used only when an ancillary record is no longer needed. Use the magnifying glass to pull up the calendar to select the end date.
- **Insurer** select the insurer from the drop down list by using the magnifying glass.
- **Contact Person** select the contact from the drop down menu by clicking on the magnifying glass.
- Ancillary select the ancillary from the drop down menu by using the magnifying glass
- **Authorization Code** type in the authorization code needed for the selected ancillary

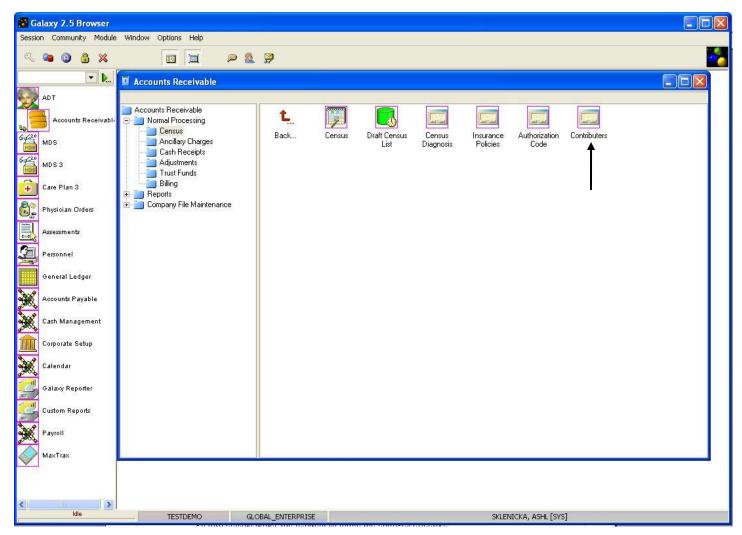
Please fill in as much information as possible and then press the **accept** button.



Authorization Code Master – now you should see the record that was just created for *Logan Furgerson*.

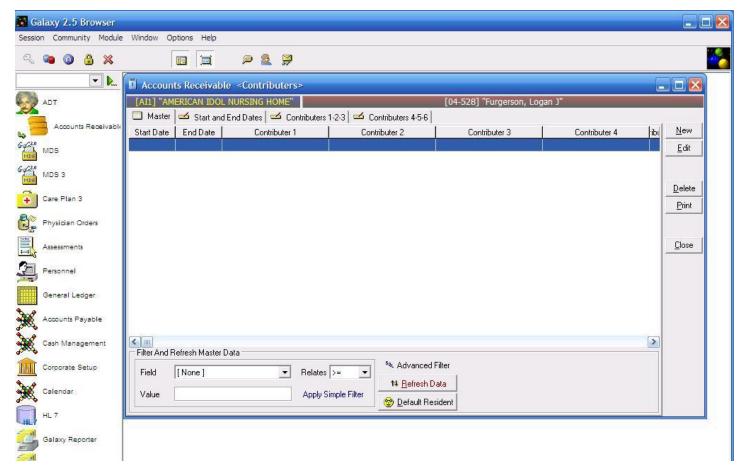
If additional record(s) need to be created do so now, otherwise press the **close** button to exit out of the **Authorization Code** sub-utility.

CONTRIBUTORS



Contributors – this sub-utility is used to set up record(s) of all the individuals responsible for paying the costs incurred by the residents.

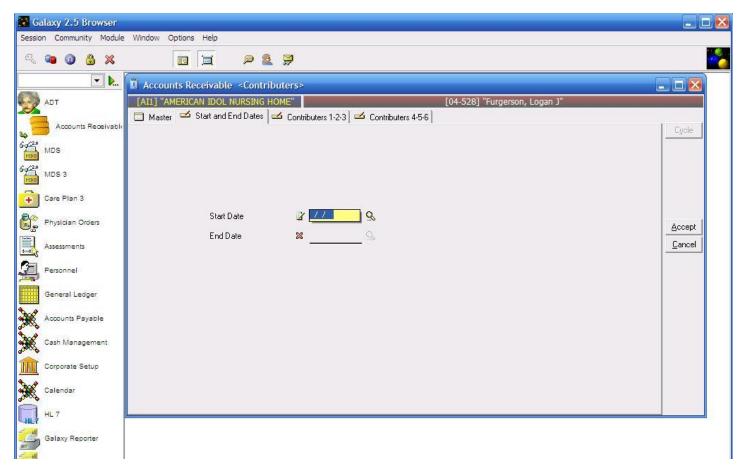
Double click the **Contributors** icon to open this sub-utility.



Contributors Master – here is the master list that holds the record(s) of individuals responsible for helping with the residents costs. The Galaxy software allows for a resident to have up to 6 contributors.

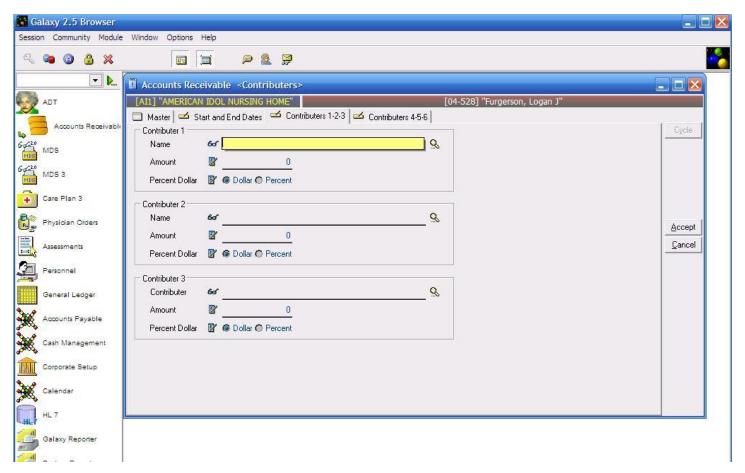
Currently there are no record(s) on the master list for our *demo facility*.

To create a record(s) press the **new** button.



Start and End Dates – use the magnifying glass to pull up the calendar to select the effective date that the contributor will start helping with the financial costs.

Go to **Contributors 1-2-3** tab before pressing the **accept** button.

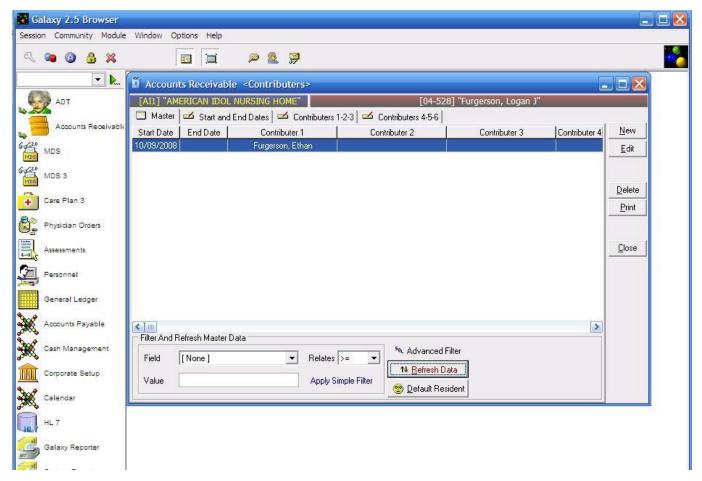


Contributors 1-2-3 – this is the input screen used to create the record(s) for the master list. Here you will see the following fields:

- Name select the name from the drop down menu by using the magnifying glass. NOTE: if there are no
 names on the drop down list you will need to check the contact link in the ADT module for the selected
 resident.
- **Amount** enter the amount the contributor will be responsible for. NOTE: this can be a dollar or percent amount
- **Percent Dollar** select the appropriate option based on dollar or percent amount.

Fill in the fields again if there are additional contributors. NOTE: if there are more than 3 contributors move onto the next tab and repeat the steps listed above.

Press the **accept** button once all contributors have been established.



Contributor Master – now you can see the record that was just created for our example resident *Logan Furgerson*.

Press the **close** button to exit out of the **Contributors** sub-utility.