



THE UNIVERSITY OF NEW MEXICO

# **Financial Interactions – University Hospital & UNM**

Presented by:

Laura Putz

11/9/2009

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## INTERCOMPANY INVOICING

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Just as financial interactions routinely occur between outside vendors and the University of New Mexico (UNM), financial interactions also occur between UNM and University Hospital (UH) and the UNM Medical Group (UNM MG).

These interactions can involve either revenue or expense incurred by the Health Sciences Center (HSC) or the Main Campus.

Because HSC, the Main Campus, the Hospital and the Medical group are considered related entities, these transactions must be tracked and reported differently than similar non related party transactions.

As with any revenue or expense, invoices must be prepared, delivered, reconciled, and paid. These transactions must be reconciled at the department level, and it is particularly important that items invoiced by UH to HSC departments be reconciled promptly.

## UNIVERSITY HOSPITAL BILLS HSC

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UH provides a number of services to HSC departments regularly. Typical transactions would include Salary Agreements, catering charges and facility charges related to Clinical Trials, where the hospital is providing such services as X-rays, blood tests, and lab work.

Once an intercompany agreement has been reached and the documents signed, the UNM Department issues an internal purchase requisition. The Purchase Requisition includes the Banner index and account that is to be billed, and has a contact name at the department level in UH. Frequently the contact person is from the Special Billing/Referral Department (SBD) at UH.

UH cost centers that provide HSC with goods and services generate a monthly report, which is sent to the Special Billing/Referral Department (SBD). The SBD compiles all the billing information for the month and sends this data to Unrestricted Accounting-HSC for processing. The SBD unit creates an invoice for each transaction. The invoices are sent to Unrestricted Accounting-HSC for routing to the UNM department with the supporting documentation attached.

The data file sent by UH is evaluated by Unrestricted Accounting-HSC in order to validate appropriate FOPAL element and account codes and then the file is loaded into Banner Finance. The expense items are directed to the index /account code combination indicated on the internal purchase requisition. The UH invoice file is posted as a journal document, with the document number beginning "HCXXXXXX".

The document is posted as a FUPLOAD, which does not have any additional information contain in FOATEXT; however, the description that posts should provide the department with sufficient information.

The following screen shot of Banner form FGITRND is an example of UH invoices that have been posted into Banner Finance. As mentioned previously, the document number begins with "HC". The description line indicates that the item processed is a UH Invoice. Also provided in the description is the invoice number and internal purchase requisition number.

Oracle Developer Forms Runtime - Web: Open > FGIBDST - FGITRND

File Edit Options Block Item Record Query Tools Help

Detail Transaction Activity Form FGITRND 7.4.0.1 (BANP)

COA Fiscal Year Index Fund Organization Account Program Activity Location Period Query Type Commit Type

U 09 997045 3U0038 99703A 50E0 P177 GNACTV S

Account	Organization	Program	Document	Description	Field	Amount	Increase (+) or Decrease (-)
50E0	99703A	P177	HC000066	UH Invoice 134751 357801	YTD	157.51	+
50E0	99703A	P177	HC000066	UH Invoice 134738 357801	YTD	108.04	+
50E0	99703A	P177	HC000065	UH Invoice 134459 357801	YTD	706.93	+
50E0	99703A	P177	HC000065	UH Invoice 134441 357801	YTD	1,098.91	+
50E0	99703A	P177	HC000064	UH Invoice 134323 357801	YTD	237.28	+
50E0	99703A	P177	HC000064	UH Invoice 134255 357801	YTD	77.14	+
50E0	99703A	P177	HC000063	UH Invoice 134160 357801	YTD	731.97	+
50E0	99703A	P177	HC000063	UH Invoice 133987 357801	YTD	161.23	+
50E0	99703A	P177	HC000062	UH Invoice 133877 357801	YTD	273.15	+
50E0	99703A	P177	HC000062	UH Invoice 133785 357801	YTD	123.76	+
50E0	99703A	P177	HC000061	UH Credit Adj 301685 357801	YTD	-1.31	-
50E0	99703A	P177	HC000061	UH Invoice 133661 357801	YTD	256.06	+
50E0	99703A	P177	HC000061	UH Invoice 133591 357801	YTD	24.23	+
50E0	99703A	P177	HC000060	UH Invoice 133457 357801	YTD	256.06	+
50E0	99703A	P177	HC000060	UH Invoice 133439 357801	YTD	78.02	+
50E0	99703A	P177	HC000059	UH Invoice 133196 357801	YTD	222.68	+
50E0	99703A	P177	HC000059	UH Invoice 133157 357801	YTD	14.93	+
<b>Total:</b>						4,526.59	+

Press Key Dup Item for document query forms; Count Query for encumbrance detail

Record: 1/?

Invoice numbers that begin with a “1” are for general services, such as salary agreements, lab supplies or catering. If a credit adjustment is created for general services, the credit invoice number would begin with a “3”.

Invoice numbers that begin with a “5” are related to clinical trials. Credit adjustments that are processed for clinical trials would have an invoice number that begins with an “8”.

## CLINICAL TRIALS BILLING

This type of intercompany transaction routinely occurs between the Hospital and an HSC clinical trial. When subjects are enrolled in a clinical trial, they are frequently expected to have certain medical tests completed. In many cases, these tests are paid for by the clinical trial, not their health insurance provider. The types of medical work frequently included in clinical trials include EKGs, blood tests, chest X-rays, and other imaging studies.

Normally, when a patient has this work done per a physician’s order for their own benefit, the patient or his insurance company is billed. When the same patient is having this work done on behalf of a clinical trial, the clinical trial is billed instead.

To facilitate the invoicing to a clinical trial, the hospital creates a guarantor number that is unique to the clinical trial. A guarantor number tells the hospital who to bill for the services provided. The hospital utilizes the patient guarantor number assigned to the clinical trial when the clerk is notified that the patient is presenting for services related to a clinical trial. The patient's billing is changed to go to the clinical trial instead of the patient's regular provider. Within UH's patient system, all clinical trial guarantor numbers begin with 9999.

A "Referral Billing Questionnaire" needs to be completed before clinical trials can receive UH services. This document specifies exactly what services and supplies can be billed to the clinical trial, identified the guarantor number for the clinical trial, and contact names and numbers at HSC, UH, and the Agency sponsoring the clinical trial. Every HSC department receiving bills for clinical trials from UH should have a copy of the Billing Questionnaire so that each invoice can be audited when received. See Appendix 7 for an example of a "Referral Billing Questionnaire".

The department is responsible for reviewing each invoice received from UH for accuracy. If any errors are found, the department must contact the Accounts Receivable Coordinator (Stacie Hurley [SHurley@salud.unm.edu](mailto:SHurley@salud.unm.edu) / 505-272-5460) in order to request that a credit be issued.

One type of invoicing error occurs when the patient returns to UH for additional services for an injury or illness that is unrelated to the clinical trial. Unless the guarantor number is changed to the individual's health insurance provider the patient's clinical trial guarantor number may be billed.

***Unless the HSC department with the clinical trial reconciles their clinical trial expenditures in a timely fashion, the Hospital may lose all opportunity to bill the patient's insurance company.*** Contractually, a number of insurance providers require invoicing within 90 days from date of service. If the Hospital is not informed by that time that the original bill was in error and is not part of the clinical trial, the revenue may be permanently lost if the notification is beyond the 90 day billing window.

Since the hospital bills reflect charges from the prior month, the 90 day window is frequently only 60 days **or less** when the invoice is received by the HSC department. Rapid reconciliation is essential to prevent loss of UH revenue. For example, a date of service of August 1 may not be posted in Banner until mid to late September.

**SALARY AGREEMENT BILLING – UH BILLS HSC**

When a UH staff member spends time on an HSC project, a Salary Agreement between UH and HSC is created so that UH is reimbursed for the salary expense associated with that employee. The agreement is initiated by UH and provides the terms of the agreement, as in the example below:

*to Wade 11/200*

**RECEIVED**

NOV 24 2008

HSC FINANCIAL SERVICES

**UNM HEALTH SCIENCES CENTER (HSC)**  
**UNM HOSPITAL (UH)**  
**SALARY AGREEMENT FORM**  
**FY-2009**

**RECEIVED**

OCT 13 2008

HSC FINANCIAL SERVICES

DATE PREPARED: 10/01/08 EFFECTIVE DATE: 07/01/08  
 END DATE: 06/30/09

The following information is provided for the purpose of recording salary and benefit arrangements between HSC and UNMH.

**1 Employee and Department Information:**

HSC DEPT: Infectious Disease Clinic UH DEPT: Truman Street Clinic 0101 7186  
 Contact Person: Rosalina Hundley 2-8033 Contact Person: Kathleen Atencio 925-6753

**UH Employee=HSC will pay**

HSC EMPLOYEE: \_\_\_\_\_ UH EMPLOYEE: \_\_\_\_\_  
 SSN: \_\_\_\_\_ ID #: \_\_\_\_\_  
 Faculty or Staff: \_\_\_\_\_

JOB TITLE: RN Infectious Diseases III Truman FTE STATUS: 0.60 ANNUAL SALARY: \$ 39,162.24  
 (This arrangement shall be in effect for only those days specified above.) HOURLY RATE: \$ 31.38

**2 Salary and Benefit Distribution:**

	HSC	UH	TOTAL
*SALARY AMOUNT	\$ 39,162	\$ -	\$ 39,162
UNMH BENEFIT AMOUNT @ 33.0%	\$ 12,924	\$ -	\$ 12,924
HSC FACULTY BENEFIT AMOUNT @ 29.5%	\$ -	\$ -	\$ -
HSC STAFF BENEFIT AMOUNT @ 33.0%	\$ -	\$ -	\$ -
<b>PR/PO NUMBER:</b> _____	<b>TOTAL</b> \$ 52,086	\$ -	\$ 52,086
<b>PERCENT</b>	100.00%	0.00%	100%

BANNER INDEX/ UH ACCOUNT(S) to be charged/credited: \_\_\_\_\_  
 \*This Agreement is based on the employee's current salary and does not include any possible wage increase(s).

**3 This agreement is prepared due to:**  
 Routine fiscal year renewal  
 Change in salary or benefit resulting from routine increase or promotion  
 Replacement for: \_\_\_\_\_  
 New Agreement  
 Other: \_\_\_\_\_

**4 Comments:** HSC will pay 100% of salary and benefits up to a maximum of \$52,085.78 (\$39,162.24 of salary of benefits). Cap rates are disallowed by legislation. HSC will not pay overtime, shift differential, or pay. 3.54

**5 Approvals:**

HEALTH SCIENCES CTR: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Unm. Director/Chair or Administrator)

HEALTH SCIENCES CTR: \_\_\_\_\_ Date: 10/17/08  
 (Associate VP, Finance & Administration or Assistant Dean of Administration for the School of Medicine)

UNM HOSPITAL: \_\_\_\_\_ Date: 10/9/08  
 (Area Administrator)

UNM HOSPITAL: \_\_\_\_\_ Date: 10/9/08  
 (Chief Financial Officer)

**SIGN DATE**

Notice that two contact names are listed on Salary Agreements; one for each department involved. By noting which side of the agreement the employee is listed on, you will know who is paying for the employee's services. If the employee is a UH employee, HSC is entering into an agreement to use the employee's services, and the HSC department will be reimbursing UH for part or all of the employee's salary, as per the agreement.

An internal requisition is also issued as in the example below.

**Requisition** No 353508

The University of New Mexico

SUGGESTED VENDOR: UNM Hospital  
Finance and Payroll  
ATTN: Martha Torress

SHIP TO: UNM Department of Internal Medicine  
Truman St. Clinic  
MSC10 5550  
ATTN: Rosalina Hundley

PLEASE DO NOT WRITE IN BOX BELOW

DATE \_\_\_\_\_  
ORDER TYPE (R/B/O/L/M) \_\_\_\_\_  
START DATE \_\_\_\_\_ END DATE \_\_\_\_\_  
TERMS (NET 30) \_\_\_\_\_  
F.O.B. \_\_\_\_\_  
BID/PROPOSAL/SPD/GSA \_\_\_\_\_  
REFERENCE DATE \_\_\_\_\_  
DELIVERY DATE \_\_\_\_\_  
BUYER APPROVAL/NO. \_\_\_\_\_  
VENDOR NO. \_\_\_\_\_ COMMODITY \_\_\_\_\_  
INSURANCE \_\_\_\_\_ PERF. BOND \_\_\_\_\_  
INS. DATE \_\_\_\_\_ TAXABLE \_\_\_\_\_

ORG NO 851N13 DATE 10/31/2008  
DEPT. NAME Internal Medicine/Truman St. Clinic  
USER CONTACT Rosalina Hundley ext 2-8033  
DATE WANTED \_\_\_\_\_

BLANKET ORDER  
EFFECTIVE DATES 7/1/2008 TO 6/30/2009

ACCOUNT 1 / INDEX CODE 1 851921-6920	%	\$	52,086	ACCOUNT 2 / INDEX CODE 2	%	\$	
ACCOUNT 3 / INDEX CODE 3	%	\$		ACCOUNT 4 / INDEX CODE 4	%	\$	

ITEM	COMM. CODE	QTY.	UNIT	DESCRIPTION	UNIT PRICE	EXTENSION
				Salry and benefits for [redacted] RN, for work performed at Truman Street Clinic for FY2009. Overtime and cap are <u>not</u> included. Invoicing is to be done monthly, and not to exceed \$4,340.50 monthly amount below: Monthly salary for .6 FTE for [redacted] \$3,263.50 Monthly benefits 1,077.00 Monthly TOTAL 4,340.50 Total Salary for FY2009 (.6 FTE) \$39,162.00 Benefits for FY2009 12,924.00 TOTAL \$52,086.00		
				Salary Agreement Attached		

RECEIVED NOV 18 2008 DOIM

AUTHORIZED DEPT SIGNATURE \_\_\_\_\_ ESTIMATED COST \$52,086.00  
SIGNATURE NAME (TYPED) Bruce Williams, MD DATE: \_\_\_\_\_  
Pope Moseley, M.D. DATE: \_\_\_\_\_

CONTACT AND GRANT / ACCOUNTING APPROVAL (SIGNATURE) \_\_\_\_\_ DATE: \_\_\_\_\_  
CONTACT TYPE \_\_\_\_\_ FUNDING TYPE \_\_\_\_\_  
 CONTRACT  FEDERAL  
 GRANT  STATE  
 COOPERATIVE AGREEMENT  PRIVATE  
 OTHER: SPECIFY \_\_\_\_\_  OTHER: SPECIFY \_\_\_\_\_

AGENCY: \_\_\_\_\_ CONTRACT #: \_\_\_\_\_

FEDERAL FLOW DOWN CLAUSES

No 353508

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## SALARY AGREEMENT PROCEDURES- UH EMPLOYEE

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### **Salary Agreement Procedures - UH Employee:**

- 1) UH Salary Agreement Office initiates the Salary Agreement for the UH Finance Department.
- 2) UH Administrator and CFO will sign Salary Agreement before it is sent to HSC Financial Services - Unrestricted Accounting.
- 3) UH Finance Department mails the Salary Agreement to the UNMHSC AR Coordinator.
- 4) UNMHSC AR Coordinator receives original Salary Agreement. The form is reviewed for completeness and forwarded to the Associate Vice President of Administration for signature.
- 5) UNMHSC AR Coordinator submits the Salary Agreement to the appropriate department for processing. The AR Coordinator should allow the department two weeks to process:
  - a) The original Salary Agreement for department signatures
  - b) A manual Purchase Requisition for department signatures
- 6) When the Salary Agreement is returned, the AR Coordinator should check for department changes to the Salary Agreement:
  - a) Compare to original for any changes.
  - b) If UH agrees with changes, print out email for support and attach to the backup.
  - c) If UH does not agree relay disagreement to department
  - d) Department will have to agree with UH and take off changes on SA or negotiations will have to continue with UH and the HSC department, therefore making the SA at hand invalid until agreement is settled on.
- 7) If all information is correct the AR Coordinator:
  - a) Compares the HSC column total amount to the Purchase Requisition amount. The Purchase Requisition amount should either be the same as Salary Agreement or higher.
  - b) Review Purchase Requisition to make sure all information is correct (valid index, appropriate account code)
  - c) Verify signature in section 5 on the "Health Sciences Ctr" of Salary Agreement corresponds to recognized signature authority for index to be charged. If not, return to department.
- 8) The original completed Salary Agreement and Purchase Requisition is mailed to UH Finance.
- 9) UH Finance contacts Special Billing/Referral Department to initiate monthly invoicing.

An example of the actual invoice for a UH employee being charged to an HSC department follows.



THE UNIVERSITY OF NEW MEXICO • HEALTH SCIENCES CENTER  
UNIVERSITY HOSPITAL

INVOICE

Country UNM Tax Reference Fax Reference Branch 0000 Page 1

Invoice To: BURNS, B TRUMAN ST. CLINIC  
TRUMAN ST. CLINIC  
ATTN: ROSALINA HUNDLEY  
7/1/08 - 6/30/09  
353508  
8519216920  
Phone 2-0033  
Telex  
Fax -

Deliver To: BURNS, B TRUMAN ST. CLINIC  
TRUMAN ST. CLINIC  
ATTN: ROSALINA HUNDLEY  
7/1/08 - 6/30/09  
353508  
8519216920  
2-0033

Invoice-Division 13467-3B  
Invoice Date 2-JUL-09  
Order-Line - 0  
Salesman  
Customer UNMGAL09

Index / Account Code

Internal Purchase Requisition Number

Currency USD Rate 1.000Dollars Customer Reference JUN 09 353508 Customer Contact

Lin S	No. T	Part Code	Description	Order Number	Despat Note	Quantity Uom	Price Uom	Discount
1	N		JUN 09 353508			1.00 EA	3512.0300 EA	1,512.03
							Line Value	3,512.03
							Freight	0.00

Employee Name

Amount Invoiced

Tax Analysis		Line Totals	
Total Tax on Freight	0.00	3,512.03	0.00
Total Tax on Misc.	0.00		3,512.03
Total Line Tax	0.00		0.00
Total Tax	0.00		0.00
		<u>Total Invoice Value</u>	<u>3,512.03</u>

Terms NET30 Net due in 30 days

Fed Tax ID # 85-6003005

State Tax ID # 01-504209-00-0

Remit payment to:  
University Hospital  
ATTN: *Special Billing/Referral Billing*  
Martha Torrez  
P.O. Box 80600

Albuquerque, NM 87198-0600

The attached information is confidential. If you are not the intended recipient you are hereby notified that you must not read, copy, print, distribute or use any of the information contained within the attached document. If you are not the intended recipient of this document, please immediately notify Michelle Geuss via telephone at 272-3767 or via email at [mgeuss@salud.unm.edu](mailto:mgeuss@salud.unm.edu) and destroy the document and any attachments without reading or saving in any manner. Thank you for your cooperation.

The June 2009 invoice for the Salary Agreement and Internal Requisition example is provided on the preceding page. Notice that the internal Purchase Requisition number appears as a reference several times on the invoice. Although the invoice suggests that the department needs to remit payment to UH, the Unrestricted Accounting office is responsible for the creation of the DPI payments to UH. Martha Torrez is the contact person for UH, which is listed on the invoice.

If the amount invoiced does not reconcile to the expense amount that the department is anticipating, it is the department's responsibility to contacting HSC AR Coordinator in order to request processing of a credit adjustment. The amounts on the Salary Agreement are an estimate of an employee's labor and benefit expense. In many situations, the amount paid to the UH employee is different than what is specified on the agreement. Sometimes the difference is attributed to pay or shift differentials that are inherent in the hospital wage scale. The fringe benefits that are invoiced to the department are based on the agreed upon percentage of labor expense, not actual fringe benefits reported by employee.

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### GENERAL GUIDELINES

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When coordinating the procurement of services from any hospital department, the hospital department will require that the UNM/HSC department first **get an internal Purchase Requisition issued**. The Purchase Requisition number is referenced on the invoice sent to Unrestricted Accounting-HSC; which is then sent to the department for reconciliation.

It is important that the appropriate individual be reference on the invoice in order for Unrestricted Accounting-HSC to properly route the invoice to the department. In many situations this information is not included and the invoices are forwarded to the appropriate department administrators for distribution.

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### TRAVEL REIMBURSEMENTS

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An UNM department may agree to reimburse UH for a variety of expense. For example, specialized training for a hospital employee may be requested by a physician that agrees to cover the conference and travel arrangements.

In this situation, the UH traveler must submit the receipts for reimbursement to UH for consideration. Each entity must reimburse according to the policies and procedures that govern their employees. UH will pay the actual travel expenses of the employees for whom an HSC department has agreed to reimburse certain travel expenses. UH will then document those travel expenses and bill the HSC department, recouping their costs from the revenue their bill generates. On the UH financial statement, the travel expense will net to zero as the amount received from UNM will offset the expenditures. This is commonly referred to in the UH financial statements as "pass through" treatment. The travel expense would be reported appropriately in the HSC department.

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## UH CATERING

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Many UNM/HSC departments utilize the UH Catering services to provide food service for various events. As with other types of transactions that involve purchasing from UH, an internal Purchase Requisition must be issued.

Unrestricted Accounting-HSC reviews the invoices that direct expenditures to food account codes in order to determine if the information provided is sufficient for audit purposes based on UNM Business Policy. If the information provided is not sufficient, a note is attached to the invoice requesting additional information from the department in order to substantiate business purpose and number/names of attendees.

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## RECONCILIATION ASSISTANCE

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HSC Financial Services has created a reporting database which can provide invoicing summary to assist departments in their reconciliation process. The database contains information on all UH invoicing processed in Banner Finance beginning in July 1, 2004.

UH Invoice Reports can be generated for review by specific index or by Organization Level 5, with sorting provided by index or account code. Appendix 1 provides a sample report by index for September 2009. Appendix 2 shows a sample report with an organization level 5 specified, sorted by index code. Departments can request UH Invoice Reports by contacting the HSC AR Coordinator with the parameters needed for review.

Copies of UH Invoices can also be requested by contacting the HSC AR Coordinator. Appendix 5 identifies what type of information needs to be supplied when requesting a copy of a UH invoice. Generally copies are provided within two business days of the request.

## HSC BILLS UNIVERSITY HOSPITAL

UNM/HSC departments provide services and support to UH departments regularly. The support frequently involves Salary Agreements for HSC employee is providing the hospital with their services, Memorandum of Understanding (MOU) for general support, Occupancy Agreements for space lease or flow through expenditures, such as utilities and insurance.

Once an intercompany agreement has been reached, the signed documentation is sent to the HSC AR Coordinator who prepares monthly invoices on behalf of the HSC departments that have entered into the agreements with UH. At HSC, a Banner module called *Non Student Accounts Receivable* (NSAR) is used to produce and track these invoices. You will frequently hear this type of invoice referred to as a “Non Student AR” invoice.

The UNM/HSC department recognizes the revenue generated by these inter-company transactions when the invoice is created in the NSAR system. UH transactions that creates revenue for UNM post to account code 0340 – University Hospital Revenue Gen. The journal document that is created in the NSAR module is referred to as an “F Document” as the journal document number begins “FXXXXXXX”. The screen shot below shows how the UH revenue is posted in Banner:

File Edit Options Block Item Record Query Tools Help

Detail Transaction Activity Form FGITRND 7.4.0.1 (BANP)

COA	Fiscal Year	Index	Fund	Organization	Account	Program	Activity	Location	Period	Query Type	Commit Type
U	10	99705D	3U0011	331A	0340	P17E	GNACTV			S	

  

Account	Organization	Program	Document	Description	Field	Amount	Increase (+) or Decrease (-)
0340	331A	P17E	F0086348	UH-PEDS-SA-R	YTD	13,859.64	+
0340	331A	P17E	F0086348	UH-PEDS-SA-S	YTD	24,258.80	+
0340	331A	P17E	F0086348	FY10UH-PEDS-SA-He	YTD	24,523.65	+
0340	331A	P17E	F0086348	FY10UH-Peds-SA-Ag	YTD	36,820.86	+
0340	331A	P17E	F0086348	FY10UH-PEDS-SA-He	YTD	29,269.81	+
0340	331A	P17E	F0086348	FY10/UH-PEDS-SA-C	YTD	39,770.58	+
0340	331A	P17E	F0086348	FY10/UH-PEDS-SA-A	YTD	43,635.23	+

Invoices are printed twice a month (15<sup>th</sup> and end of month invoicing cycles) and sent to the UH Special Billing/Referral Department for their consideration and remittance of payment. UH follows their internal processes for purchasing, including the issuance of a purchase order and routing the invoice to be approved for payment.

**SALARY AGREEMENT BILLING – HSC BILLS UH**

When a UNM faculty or staff member is assigned to work at an UH facility (Main Hospital, Carrie Tingley, University Psychiatric Center, etc.) a Salary Agreement between HSC and UH is created so that the HSC department is reimbursed for the salary expense associated with that employee. The agreement is initiated by the HSC department that owns the employee and provides the terms of the agreement, as in the example below:

UNM HEALTH SCIENCES CENTER (HSC) UNM HOSPITAL (UH) SALARY AGREEMENT FORM FY-2010			
DATE PREPARED: <u>05/19/09</u>	EFFECTIVE DATE: <u>07/01/09</u>	RECEIVED MAY 20 2009 HSC FINANCIAL SERVICES	
	END DATE: <u>06/30/10</u>		
The following information is provided for the purpose of recording salary and benefit arrangements between HSC and UNMH. Prepared By: <u>Carla Slezak</u>			
<b>1 Employee and Department Information:</b>			
HSC DEPT: <u>Pediatrics</u>	UH DEPT: <u>1530 YCHC general</u>		
Contact Person: <u>Carla Slezak</u>	Contact Person: <u>Sally Popejoy</u>		
HSC EMPLOYEE: <u>[REDACTED]</u>	UH EMPLOYEE: _____		
ID #: _____	ID #: _____		
Faculty or Staff: <u>Staff</u>			
JOB TITLE: <u>Nurse Practitioner</u>	FTE STATUS: <u>0.50</u>	ANNUAL SALARY: \$ <u>32,773.00</u>	
(This arrangement shall be in effect for only those days specified above.)		HOURLY RATE: \$ <u>31.51</u>	
<b>2 Salary and Benefit Distribution:</b>			
*SALARY AMOUNT	HSC	UH	TOTAL
\$	- \$	32,773	\$ 32,773
UNMH BENEFIT AMOUNT @ <u>33.0%</u>	\$ -	\$ -	\$ 33%
HSC FACULTY BENEFIT AMOUNT @ <u>29.5%</u>	\$ -	\$ -	\$ -
HSC STAFF BENEFIT AMOUNT @ <u>33.0%</u>	\$ -	10,815	\$ 10,815
PR/PO NUMBER: _____	TOTAL	\$ -	\$ 43,588
PERCENT		0.00%	100.00%
CHARGE NUMBER INDEX/ UH ACCOUNT(S) to be charged/credited: <u>99705D</u>			Per 41248
*This Agreement is based on the employee's current salary and does not include any possible wage increase(s).			
<b>3 This agreement is prepared due to:</b>			
<input checked="" type="checkbox"/> Routine fiscal year renewal	Associated MOU: _____		
<input type="checkbox"/> New Agreement	Change in salary or benefit resulting from routine increase or promotion		
<input type="checkbox"/> Replacement for: _____	Other: _____		
<b>4 Comments:</b>			
OCT 21 2009			
<b>5 Approvals:</b>			
HEALTH SCIENCES CTR: <u>Carla Slezak</u>	Dean, Director, Chair or Administrator	Date: <u>5/20/09</u>	
HEALTH SCIENCES CTR: <u>Ray Popejoy</u>	Associate VP Finance & Administration or Assistant Dean of Administration for the School of Medicine	Date: <u>6/24/09</u>	
UNM HOSPITAL: <u>Wendy Timperio</u>	Department Director or Executive Director	Date: <u>9/4/09</u>	
UNM HOSPITAL: <u>Sheena Lynn</u>	Area Administrator	Date: <u>9-4-09</u>	
UNM HOSPITAL: <u>Ellie Watt</u>	Chief Financial Officer	Date: <u>10/6/09</u>	

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## SALARY AGREEMENT PROCEDURES– UNM EMPLOYEE

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### **Salary Agreement Procedures – UNM Employee:**

1. UNM Department initiates the Salary Agreement for the faculty or staff employee.
2. UNM Department will obtain signature on the Salary Agreements from Dean, Director or Department Chair before it is sent to HSC Financial Services – Unrestricted Accounting.
3. UNM HSC AR Coordinator receives original Salary Agreement. The agreement is reviewed for completeness and forwarded to the Associate Vice President of Administration for signature.
4. After the required HSC signatures have been obtained, the Salary Agreement is sent to UH Salary Agreement Office for review and signatures.
5. UH Administrator and CFO will sign Salary Agreements and return the executed agreement to HSC Financial Services – Unrestricted Accounting to initiate invoicing.
6. UNM HSC AR Coordinator provides initiating department with copy of fully executed Salary Agreement and retains the original agreement in the appropriate Master Salary Agreement binder for audit.
7. UNM HSC AR Coordinator prepares monthly invoices based on actual salary and benefit expense recorded in the Banner index specified on the Salary Agreement.
8. Invoicing for Salary Agreements usually occurs at the end of each month, after the monthly payroll has been processed, in order to match period expense postings to revenue postings.

The template to initiate a Salary Agreement is located on the Unrestricted Accounting-HSC's website (<http://hsc.unm.edu/financialservices/accounting/>) in the "Forms" section. It is important to use the correct version of the template as it is updated each fiscal year for current fringe benefit projections. The form contains macros and formulas that should not be overwritten when preparing the document. Data entry should be done only in the cells that are shaded yellow.

The salary and benefit calculation on the Salary Agreement form is an estimate of how the labor and benefit expenses will be allocated between UNM departments and UH cost centers. The amount invoiced to UH and their component units is based on actual salary and benefit expense.

## IDENTIFYING THE REVENUE

The revenue is recorded in the department index each time an invoice is generated. This transaction also creates a receivable entry in the General Ledger. It does not represent a cash transaction. The Salary Agreement example above indicates that the revenue for this agreement should be posted to Index 99705D for Fiscal Year 2010. Banner Finance displays the following information when viewing the detailed posting on Banner form FGITRND:

Oracle Developer Forms Runtime - Web: Open > FGIBDST - FGITRND

File Edit Options Block Item Record Query Tools Help

Detail Transaction Activity Form FGITRND 7.4.0.1 (BANP)

COA: U Fiscal Year: 10 Index: 99705D Fund: 3U0011 Organization: 331A Account: 0340 Program: P17E Activity: GNACTV Location: Period: Query Type: S Commit Type:

Account	Organization	Program	Activity	Date	Type	Document	Field	Amount	Increase (+) or Decrease (-)
0340	331A	P17E	UH-PEDS-SA-Rodri	30-OCT-2009	CLR	F0086348	YTD	13,859.64	+
0340	331A	P17E	UH-PEDS-SA-Stelzi	30-OCT-2009	CLR	F0086348	YTD	24,258.80	+
0340	331A	P17E	FY10UH-PEDS-SA-t	30-OCT-2009	CLR	F0086348	YTD	24,523.65	+
0340	331A	P17E	FY10UH-Peds-SA-A	30-OCT-2009	CLR	F0086348	YTD	36,820.86	+
0340	331A	P17E	FY10UH-PEDS-SA-t	30-OCT-2009	CLR	F0086348	YTD	29,269.81	+
0340	331A	P17E	FY10/UH-PEDS-SA-	30-OCT-2009	CLR	F0086348	YTD	39,770.58	+
0340	331A	P17E	FY10/UH-PEDS-SA-	30-OCT-2009	CLR	F0086348	YTD	43,635.23	+
0340	331A	P17E	UH-PEDS-SA-Stelzi	13-AUG-2009	CLR	F0081437	YTD	6,096.49	+
0340	331A	P17E	UH-PEDS-SA-Stelzi	13-AUG-2009	CLR	F0081437	YTD	-6,096.49	-
<b>Total:</b>								212,138.57	+

Banner form FGITRND can be accessed directly or the user can drill into the detail listing from FGIBDST, by *Options*, then *Transaction Detail Information*. If a lot of data is displayed, the user might want to use the query function to narrow the data displayed. The first step is to enter the query mode by pressing “F7”, or by clicking the enter query icon , or by using the drop down menu option “Query-Enter”; define the parameter desired in the appropriate field. In this case, the user could enter “F%” in the document field as all NSAR revenue postings are created with documents that begin with an “F”. The “%” character is used as a wildcard when querying in Banner Finance. To process the query the user can press “F8”, or can click on the execute query icon , or by using the drop down menu option “Query-Execute”.





## UNM MEDICAL GROUP & UNM

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In certain situations, the UNM Medical Group (UNM MG) pays for expenditures within their accounting system on behalf of a UNM Department. When this situation occurs, UNM MG invoices UNM in order to be reimbursed for these expenditures. The most common type of UNM MG invoice is for Professional Liability (Malpractice) Insurance allocated to non-clinical departments.

Each month the UNM MG Finance Division compiles the billing information for the month and sends this data to Unrestricted Accounting-HSC for processing. The UNM MG unit creates an invoice for each transaction. The invoices are sent to Unrestricted Accounting-HSC for routing to the UNM department with the supporting documentation attached. Generally, the UNM MG expense file is posted in the month that the expense occurs; while the UH invoice posting are typically for the prior month's activity.



**September 30, 2009**

**UNM Health Sciences Center**

**SES Providers**

**MSC08 4600**

**Invoice: #MG090909**

**Index: #160021**

**Account: #63P0**

**Sept Malpractice**

**Total Due: \$2,523.00**

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**Payment made by HSC Financial Services to:**

**UNM Medical Group  
PO Box 27200  
Albuquerque, NM 87125**

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**FOR QUESTIONS, PLEASE CONTACT UNM Medical Group, Inc., AT 505-272-3348. THANK-YOU.**

The data file sent by UNM MG is evaluated by Unrestricted Accounting-HSC in order to validate appropriate FOPAL element and account codes and then the file is loaded into Banner Finance. The expense items are directed to the index /account code combination on the invoice. The UNM MG invoice file is posted as a journal document, with the document number beginning "HSYXXXXX".

The document is posted as a FUPLOAD, which does not have any additional information contain in FOATEXT; however, the description that posts should provide the department with sufficient information. The description line will indicate the posting month, description and UNM MG invoice number associated with the transaction. HSC Finance maintains a record of all UNM MG invoices, and can send a department a copy of needed invoices if the department is questioning the accuracy of an expense they have received from UNM MG.

The screen shot below is an example of UNM MG invoices that have been posted into Banner Finance.

Account	Organization	Program	Type	Document	Description	Field	Amount	Increase (+) or Decrease (-)
63P0	160C01	P171	JEH	HSY10010	Oct MalpracticeMG091009	YTD	2,523.00	+
63P0	160C01	P171	JEH	HSY10009	Sept MalpracticeMG090909	YTD	2,523.00	+
63P0	160C01	P171	JEH	HSY10006	Aug MalpracticeMG070909	YTD	2,523.00	+
63P0	160C01	P171	JEH	HSY10005	July MalpracticeMG070909	YTD	2,523.00	+
<b>Total:</b>							10,092.00	+

This screen shot was accessed by selecting form FGIBDT in Banner, entering the index with a next block function to display results, and then selecting *Options*, and *Transactions Detail Information* on the selected account code. The highlighted line is the September Malpractice Insurance charge from UNM MG. The invoice number is MG090909. The document number is HSY10009. These are recorded as an expense in account 63P0, Professional Liability Insurance.

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## RECONCILIATION ASSISTANCE

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HSC Financial Services has created a reporting database which can provide invoicing summary to assist departments in their reconciliation process. The database contains information on all UNM MG invoicing processed in Banner Finance since inception of the UNM MG.

UNM MG Invoice Reports can be generated for review by specific index or by Organization Level 5, with sorting provided by index or account code. Appendix 3 provides a sample report by index for Fiscal Year 2009. Appendix 4 shows a sample report with an Organization Level 5 specified, sorted by index code. Departments can request UNM MG Invoice Reports by contacting the HSC AR Coordinator with the parameters needed for review.

Copies of UNM MG invoices can also be requested by contacting the HSC AR Coordinator. Appendix 6 identifies what type of information needs to be supplied when requesting a copy of a UNM MG invoice. Generally copies are provided within two business days of the request.

## APPENDIX 1- UH INVOICE REPORT BY INDEX

Sample page of UH Invoice report by Index from *UH Invoices* database

### Report of Charge By Index

Date Range: Between 9/1/2009-9/30/2009

**INDEX CODE**

**INDEX TITLE**

FISCAL YEAR		2010			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Inv Offset	L108	Hospital A/P Elimination	3,152,867.19	
9/18/2009	UH Invoice 135044	L108	Hospital A/P Elimination	636,183.33	
9/18/2009	UH Invoice 135043	L108	Hospital A/P Elimination	459,183.33	
9/18/2009	UH Invoice 135042	L108	Hospital A/P Elimination	53,958.33	
9/18/2009	UH Invoice 134984 MSC 02	L108	Hospital A/P Elimination	9,494.41	
9/18/2009	UH Invoice 134974 MSC 02	L108	Hospital A/P Elimination	10,409.04	
9/18/2009	UH Invoice 134973 MSC 02	L108	Hospital A/P Elimination	10,475.51	
Summary for 'FISCAL YEAR' = 2010 (7 detail records)				4,332,571.14	

**INDEX CODE** 014006

**INDEX TITLE** 213110 VP Health Sciences

FISCAL YEAR		2010			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Invoice 135067 416218	3860	Bus Meals and Hospitality Gen	219.70	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				219.70	

**INDEX CODE** 015001

**INDEX TITLE** 231931 - ASSOC DEAN CLINICAL

FISCAL YEAR		2010			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Invoice 135052 357871	3860	Bus Meals and Hospitality Gen	618.65	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				618.65	

**INDEX CODE** 037008

**INDEX TITLE** 130080-STUDENT HEALTH-Student Health

FISCAL YEAR		2010			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Invoice 135013 407900	50E0	Lab Medical Supplies Gen	12.94	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				12.94	

**INDEX CODE** 060076

## APPENDIX 2- UH INVOICE REPORT BY ORGANIZATION

Sample page of UH Invoice Report by Organization Level 5 from *UH Invoices* database sorted by index.

<b>Report of Charge By Index</b>					
Date Range: Between 9/1/2009-9/30/2009					
<u>[Organization Level 5]="099A"</u>					
<b>INDEXCODE</b>	099080				
<b>INDEXTITLE</b>	35820-Clinical Trial -Phase I				
<b>FISCAL YEAR</b>	2010				
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Invoice 515549 353446	5020	Outpatient Care Gen	130.00	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				130.00	
<b>INDEXCODE</b>	0990BR				
<b>INDEXTITLE</b>	CRTC Meetings & Conferences				
<b>FISCAL YEAR</b>	2010				
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Invoice 135060 414144	3180	Food F&A Excludable Gen	118.20	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				118.20	
<b>INDEXCODE</b>	0990CE				
<b>INDEXTITLE</b>	36800-Clinical Trial Phase III				
<b>FISCAL YEAR</b>	2010				
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Credit Adj 802082 357358	6920	Other Professional Services Gen	-2,576.50	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				-2,576.50	
<b>INDEXCODE</b>	0990CG				
<b>INDEXTITLE</b>	368V0-Clinical Trial Phase II				
<b>FISCAL YEAR</b>	2010				
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Credit Adj 802087 357361	6920	Other Professional Services Gen	-2,957.00	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				-2,957.00	
<b>INDEXCODE</b>	0990CM				
<b>INDEXTITLE</b>	370F0 - Clinical Trial Phase II				
<b>FISCAL YEAR</b>	2010				
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT	
9/18/2009	UH Credit Adj 802084 356008	5020	Outpatient Care Gen	-240.54	
Summary for 'FISCAL YEAR' = 2010 (1 detail record)				-240.54	
<b>INDEXCODE</b>	0990D7				

## APPENDIX 3- UNMMG INVOICE REPORT BY INDEX

Sample page of Medical Group Invoice report by Index from *UNMMG Invoices* database

<b>Report of Charge By Index</b>				
Date Range: Between 7/1/2008-6/30/2009				
<b>INDEX CODE</b>	015001			
<b>INDEX TITLE</b>	231931 - ASSOC DEAN CLINICAL			
<b>FISCAL YEAR</b>	2009			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT
10/31/2008	September Malpractice-MG090902	63PO	Professional Liability Insuranc Gen	2,791.35
10/31/2008	July Malpractice-MG090702	63PO	Professional Liability Insuranc Gen	2,791.35
10/31/2008	August Malpractice-MG090802	63PO	Professional Liability Insuranc Gen	2,791.35
11/30/2008	October Malpractice-MG100902	63PO	Professional Liability Insuranc Gen	2,791.35
12/31/2008	Jul-Oct Malpractice - MGCM100902	63PO	Professional Liability Insuranc Gen	-11,165.40
Summary for 'FISCAL YEAR' = 2009 (5 detail records)				0.00
<b>INDEX CODE</b>	015003			
<b>INDEX TITLE</b>	211140 Clinical Affairs I and G			
<b>FISCAL YEAR</b>	2009			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT
10/31/2008	September Malpractice-MG090903	63PO	Professional Liability Insuranc Gen	379.20
10/31/2008	July Malpractice-MG090703	63PO	Professional Liability Insuranc Gen	379.20
10/31/2008	August Malpractice-MG090803	63PO	Professional Liability Insuranc Gen	379.20
11/30/2008	October Malpractice-MG100903	63PO	Professional Liability Insuranc Gen	379.20
12/31/2008	Jul-Oct Malpractice - MGCM100903	63PO	Professional Liability Insuranc Gen	-1,516.80
Summary for 'FISCAL YEAR' = 2009 (5 detail records)				0.00
<b>INDEX CODE</b>	028091			
<b>INDEX TITLE</b>	CASAA Research & Prevention OH			
<b>FISCAL YEAR</b>	2009			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT
10/31/2008	September Malpractice-MG090904	63PO	Professional Liability Insuranc Gen	128.72
10/31/2008	July Malpractice-MG090704	63PO	Professional Liability Insuranc Gen	128.72
10/31/2008	August Malpractice-MG090804	63PO	Professional Liability Insuranc Gen	128.72
11/30/2008	October Malpractice-MG100904	63PO	Professional Liability Insuranc Gen	128.72
12/31/2008	December Malpractice - MG120907	63PO	Professional Liability Insuranc Gen	136.00
12/31/2008	November Malpractice - MG110907	63PO	Professional Liability Insuranc Gen	136.00
12/31/2008	Jul-Oct Malpractice - MG100904	63PO	Professional Liability Insuranc Gen	29.12
Wednesday, November 04, 2009				Page 1 of 19

## APPENDIX 4- UNMMG INVOICE REPORT BY ORGANIZATION

Sample page of UNM Medical Group Invoice report by Organization Level 5 from *UNMMG Invoices* database sorted by index.

<b>Report of Charge By Index</b>				
Date Range: Between 7/1/2008 -6/30/2009				
<u>[Organization Level 5]="195A"</u>				
INDEXCODE	196000			
INDEXTITLE	Community Health			
FISCAL YEAR	2009			
DATE	INVOICE NUMBER	ACCOUNT	ACCOUNT DESCRIPTION	AMOUNT
10/31/2008	July Malpractice-MG090711	63P0	Professional Liability Insuranc Gen	242.14
10/31/2008	August Malpractice-MG090811	63P0	Professional Liability Insuranc Gen	242.14
10/31/2008	September Malpractice-MG090911	63P0	Professional Liability Insuranc Gen	242.14
11/30/2008	October Malpractice-MG100911	63P0	Professional Liability Insuranc Gen	242.14
12/31/2008	Jul-Oct Malpractice - MGCM100911	63P0	Professional Liability Insuranc Gen	-968.56
Summary for 'FISCAL YEAR' = 2009 (5 detail records)				0.00
<b>Grand Total</b>				<b>0.00</b>

Wednesday, November 04, 2009 Page 1 of 1

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## APPENDIX 5 – UH INVOICE REQUEST FORM

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### UH Invoice Copy Request

Date Submitted: \_\_\_\_\_

Please pull Invoice, scan, make a copy, fax or mail per below request.

1 Invoice # ( ) \_\_\_\_\_

Send to: \_\_\_\_\_

Department: \_\_\_\_\_

Fax #2- \_\_\_\_\_

Mail MSC \_\_\_\_\_

Scan (email) \_\_\_\_\_

---

To request a copy of a UH invoice, complete this form and send to:

Stacie Hurley, HSC AR Coordinator

MS09 5220

Or provide information requested on the form via e-mail to Stacie Hurley, AR Coordinator:

SHurley@salud.unm.edu

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## APPENDIX 6 – UNM MG INVOICE REQUEST FORM

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### UNM MG Invoice Copy Request

Date Submitted: \_\_\_\_\_

Please pull Invoice, scan, make a copy, fax or mail per below request.

1 Invoice # ( ) \_\_\_\_\_

Send to: \_\_\_\_\_

Department: \_\_\_\_\_

Fax #2- \_\_\_\_\_

Mail MSC \_\_\_\_\_

Scan (email) \_\_\_\_\_

---

To request a copy of a UH invoice, complete this form and send to:

Stacie Hurley, HSC AR Coordinator

MS09 5220

Or provide information requested on the form via e-mail to Stacie Hurley, AR Coordinator:

SHurley@salud.unm.edu

## APPENDIX 7- REFERRAL BILLING QUESTIONNAIRE



THE UNIVERSITY OF NEW MEXICO • HEALTH SCIENCES CENTER  
**UNM HOSPITALS**

RIDE

### Referral Billing Questionnaire

HRRC# 07-241

Guarantor Number 99997823

Complete Name of Study: A Phase III, Double-Masked, Multicenter, Randomized, Sham-controlled Study of the Efficacy and Safety of Ranibizumab Injection in Subjects with Clinically Significant Macular Edema with Center Involvement Secondary to Diabetes Mellitus

Short Name of Study (15 Characters max) RIDE

Sponsor of Study (Drug Co, Grant, etc.) Genentech, Inc., S. San Francisco, CA

Number of Participants 10 (maximum per contract)

Frequency of visits per patient Once every month for 36 months

Number of visits per patient 38 total (including screening)

Length of visits 2 hours

Type of patient population: (Pediatrics, Adults etc) Adults

Type of exams/procedures specifics Eye exams, OCT, injection of drug in randomized group

Nursing assistance required: Yes or No No

Supplies needed Local anesthetic and syringe for intravitreal injection (drug is supplied at no cost to the study site by Genentech)

Give a brief description of the study as well as the services that will be provided by UNM Hospitals: (Summary of Protocol)

The RIDE study is a Phase III, double-masked, randomized, sham-controlled study of the efficacy and safety of ranibizumab in CI DME with approximately 366 subjects to be randomized at 70 investigational centers in the United States. The study consists of a screening period of up to 28 days and a 36 month treatment period. The duration of the study is 36 months, excluding the screening period. Eligible subjects will be randomized in a 1:1:1 ratio so that

HRR# 07-241 Short Name of Study RIDE

## UNM Hospital Clinic Information

UNMH Dept where service(s) will be provided Eye Clinic  
 UNMH Unit Director's name (print) Diane Giron  
 UNMH Unit Director's e-mail address dgiron@salud.unm.edu Phone# 272-2546

List exact CPT codes for each service provided by the clinic named above including a list of lab, pathology and any other specific procedures. Please use one form per clinic.

CPT CODES	DESCRIPTION	CPT CHARGE *
99202 OC108	Level 2	\$82.00
92230 OC166	Lt RT 50 Fundu Fluor, Photography *	\$323
9225050 OC167	Fundus Photo <u>Bilateral</u>	\$102
67210 OC220	Lt Rt-50 laser Focal <u>Dist Lesion Retina</u>	\$2,098
92135 OC287	OCT	<del>\$48</del> <u>47.00</u>
67028 OC243	Intravitreal Injection	\$454

## UNM Hospital's Manager Authorization

UNMH Unit Director's signature *Diane Giron*  
 Date of signature 9/6/07

UNMH Manager's approval and signature must be completed in order to assign a guarantor number.

\*Prices and discounts are subject to change only upon approval of UNMH Finance Department.

Note: UNM Hospital's Referral Billing process is to bill UNM HSC for patient services provided to a study or grant. Since we do not directly invoice patients and/or insurance companies for referral billing accounts, do not use this guarantor number if the patient and /or insurance company are to be billed.

Please return Questionnaire and PR to:  
 University of NM Hospital, Attn: Finance, Referral Billing, 1650 University, #310,  
 Albuquerque, NM 87102. Phone 272-3767 Fax 272-3279

HRR# 07-241

Short Name of Study RIDE

**UNM Hospital Clinic Information**

UNMH Dept where service(s) will be provided Eye Clinic

UNMH Unit Director's name (print) Diane Giron

UNMH Unit Director's e-mail address dgiron@salud.unm.edu Phone# 272-2546

List exact CPT codes for each service provided by the clinic named above including a list of lab, pathology and any other specific procedures. Please use one form per clinic.

CPT CODES	DESCRIPTION	CPT CHARGE *
99202 OC108	Level 2	\$82.00
92230 OC166	Lt RT 50 Fundu Fluor, Photography *	\$323
9225050 OC167	Fundus Photo <u>Bilateral</u>	\$102
67210 OC220	Lt Rt-50 laser Focal <u>Dist Lesion Retina</u>	\$2,098
92135 OC287	OCT	<del>\$48</del> <u>47.00</u>
67028 OC243	Intravitreal Injection	\$454

**UNM Hospital's Manager Authorization**

UNMH Unit Director's signature Diane Giron

Date of signature 9/6/07

UNMH Manager's approval and signature must be completed in order to assign a guarantor number.

\*Prices and discounts are subject to change only upon approval of UNMH Finance Department.

Note: UNM Hospital's Referral Billing process is to bill UNM HSC for patient services provided to a study or grant. Since we do not directly invoice patients and/or insurance companies for referral billing accounts, do not use this guarantor number if the patient and /or insurance company are to be billed.

Please return Questionnaire and PR to:

University of NM Hospital, Attn: Finance, Referral Billing, 1650 University, #310, Albuquerque, NM 87102. Phone 272-3767 Fax 272-3279

## APPENDIX 8-WHO TO CONTACT

---

Stacie Hurley, AR Coordinator

Unrestricted Accounting – HSC

[SHurley@salud.unm.edu](mailto:SHurley@salud.unm.edu)

(505) 272-5460

MSC09 5220

John Brandt, Fiscal Services Supervisor

Unrestricted Accounting – HSC

[JoBrandt@salud.unm.edu](mailto:JoBrandt@salud.unm.edu)

(505) 925-4567

MSC09 5220

Laura Putz, Accounting Manager

Unrestricted Accounting – HSC

[LPutz@salud.unm.edu](mailto:LPutz@salud.unm.edu)

(505) 272-0160

MSC09 5220