

# Configurations for IMC Claims in CareRight

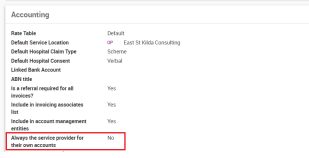
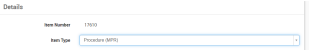
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This article is part of the systems administration guide. You will require administration access to view the pages mentioned in this article.

Inpatient Medical Claims (IMC) Claim between, Patient, Health fund, and Medical Provider in an Inpatient location against the Private Health fund account.

The checklist below walks you through the setup of IMC in the CareRight Billing and Claiming Module.

Special Note	Steps	Full Article	Specific & Mandatory Fields
<b>1st Time Set up only</b>  Note: Claims will be unsuccessful if Medicare Registration is not completed correctly.	1. Register for Medicare Online - To activate Eclipse Claim in CareRight.  <b>Note:</b> You need to be registered with Medicare before Claiming within CareRight can begin. Please contact Medicare if you have any questions.	<a href="#">Medicare Registration Information Pack</a>	Please contact Medicare Australia for full details on 1800 700 199.
	2. Contact Clintel for Medicare Online Module installation.		Please contact your designated Clintel Project Manager or raise a Redmine Ticket.
System Administration Configuration in CareRight			
<b>1st Time Set up only</b>	3. Location Set up in CareRight		
	4. Service Location Set up in CareRight  Any service locations must have a <b>hospital provider number</b> .  Any <b>providers</b> at the service location must have a <b>billing provider number</b> . The billing provider number of the Medical Provider is allocated specifically from medicare for a unique identifier in their system. A medical Provider can have more than one Billing provider number for each service location they work for.		
	5. Medical Providers must have their approval number assigned to the Service Location. This requires registration of the Medical Provider against the service Location with Medicare Australia. You must enter the approval number against the Medical Provider Set up.		
	6. Configure the Health fund to charge/No Charge the <b>Gap</b> . Set the <b>Default Hospital Claim Type, Hospital Consent</b> (Always Verbal, Except for Medibank),		

	7. Rate tables configuration, must create rate definition in advance.	<a href="#">Configure Rate Table</a>	
	8. Provider Setup for Account and Service Provider.  Can set the provider as always the service provider for own accounts.		
	9. Configure the billing Items applicable to Multiple Procedure Rules(MPR).  Item type >choose MPR	<a href="#">MPR Items</a>	
	10. Set Health fund pay ID (Only for BUPA)  Generic table <b>MOL Payees</b> should be updated with the Bupa IDs for all medical Providers	<a href="#">Generic Codes</a>	