

Practice EHR | User Guide

Billing Module | Part 1



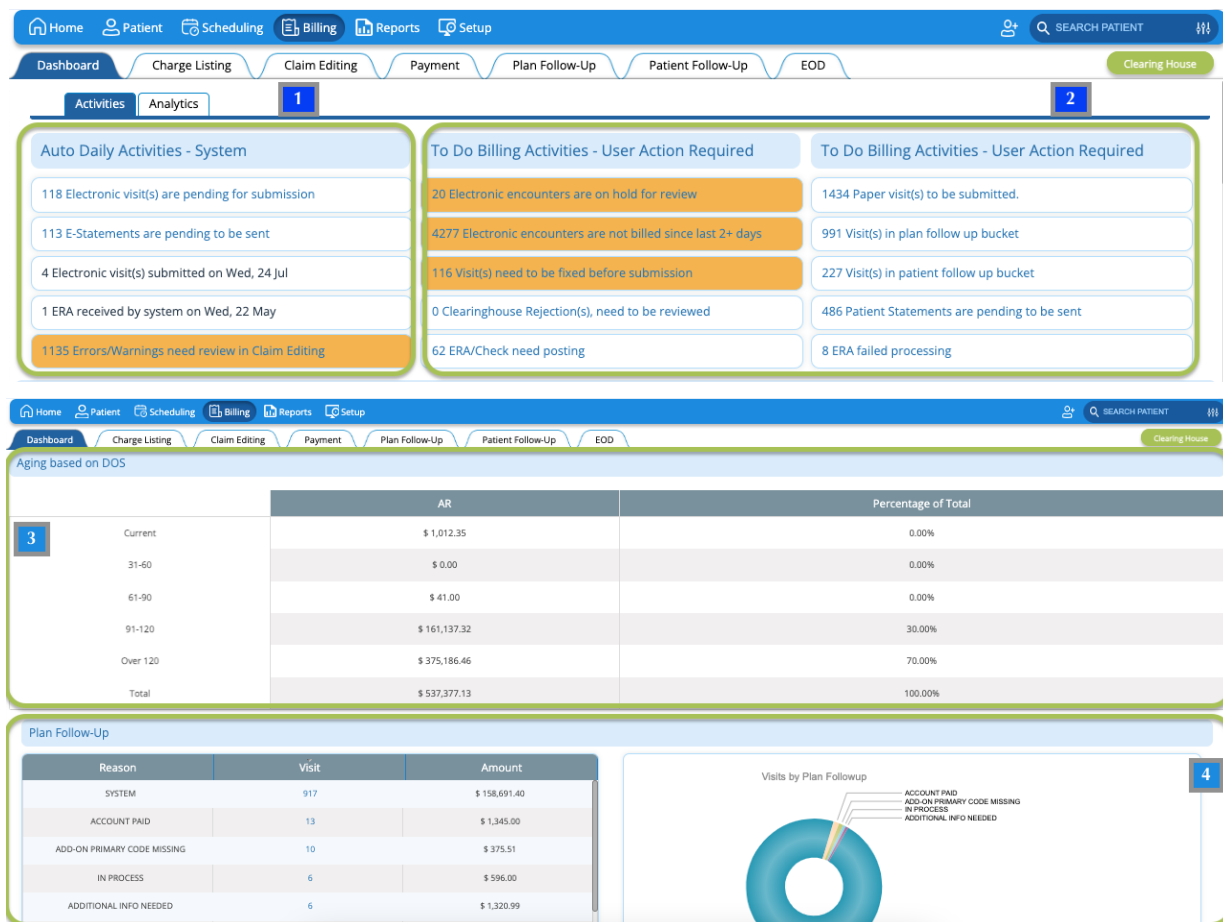
Billing Module

The Billing module deals with the claim submission and follow-up processes that are essential to a medical practice’s financial health. The user can access the Billing module to submit or review any pending claims and follow up with the patient or the plan if necessary.

Here, we explain the various tabs of the Billing module.

1. Dashboard

The Dashboard of the Billing module provides several key performance indicators to help monitor the financial health of your practice.



The dashboard interface includes a navigation bar with tabs for Home, Patient, Scheduling, Billing, Reports, and Setup. A search bar for patients is also present. Below the navigation, there are sub-tabs for Dashboard, Charge Listing, Claim Editing, Payment, Plan Follow-Up, Patient Follow-Up, and EOD. A 'Clearing House' button is located in the top right corner.

The dashboard is divided into two main sections, labeled 1 and 2. Section 1, 'Auto Daily Activities - System', lists: 118 Electronic visit(s) pending for submission, 113 E-Statements pending to be sent, 4 Electronic visit(s) submitted on Wed, 24 Jul, 1 ERA received by system on Wed, 22 May, and 1135 Errors/Warnings need review in Claim Editing. Section 2, 'To Do Billing Activities - User Action Required', lists: 20 Electronic encounters on hold for review, 4277 Electronic encounters not billed since last 2+ days, 116 Visit(s) need to be fixed before submission, 0 Clearinghouse Rejection(s) need to be reviewed, 62 ERA/Check need posting, 1434 Paper visit(s) to be submitted, 991 Visit(s) in plan follow up bucket, 227 Visit(s) in patient follow up bucket, 486 Patient Statements pending to be sent, and 8 ERA failed processing.

Section 3, 'Aging based on DOS', is a table with columns for Current, 31-60, 61-90, 91-120, Over 120, Total, AR, and Percentage of Total.

	AR	Percentage of Total
Current	\$ 1,012.35	0.00%
31-60	\$ 0.00	0.00%
61-90	\$ 41.00	0.00%
91-120	\$ 161,137.32	30.00%
Over 120	\$ 375,186.46	70.00%
Total	\$ 537,377.13	100.00%

Section 4, 'Plan Follow-Up', includes a table with columns for Reason, Visit, and Amount, and a donut chart titled 'Visits by Plan Follow-Up'.

Reason	Visit	Amount
SYSTEM	917	\$ 158,691.40
ACCOUNT PAID	13	\$ 1,345.00
ADD-ON PRIMARY CODE MISSING	10	\$ 375.51
IN PROCESS	6	\$ 596.00
ADDITIONAL INFO NEEDED	6	\$ 1,320.99

The donut chart shows the distribution of visits by plan follow-up status: ACCOUNT PAID, ADD-ON PRIMARY CODE MISSING, IN PROCESS, and ADDITIONAL INFO NEEDED.



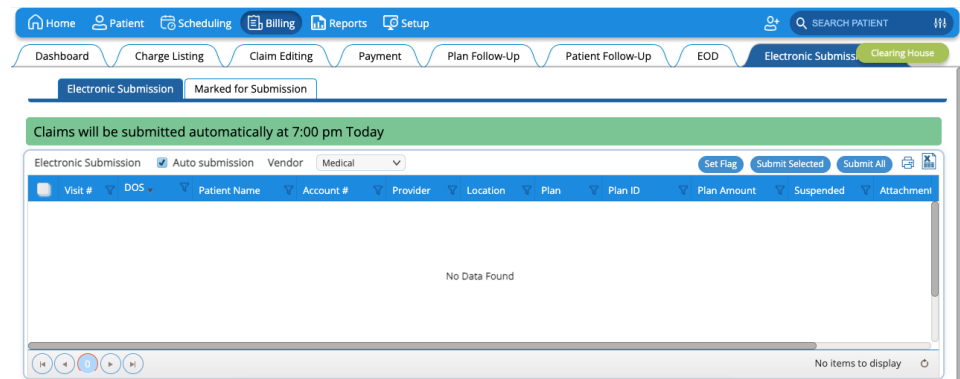
1.1. Auto Daily Activities - System

Those billing activities that are automatically performed by the system are shown in the “**Auto Daily Activities**” section.

Auto Daily Activities - System

- 118 Electronic visit(s) are pending for submission
- 113 E-Statements are pending to be sent
- 4 Electronic visit(s) submitted on Wed, 24 Jul
- 1 ERA received by system on Wed, 22 May
- 1135 Errors/Warnings need review in Claim Editing

- **Claims or Electronic Visit(s)** can be set for auto-submission by checking the “**Auto Submission**” box after opening the claim list. The claims will automatically be sent to the clearinghouse at a preset time each day.



- **E-statements** are the patient statements that will be displayed within the patient portal.
- **ERA** means **Electronic Remittance Advice**, which is the payment received against the claims submitted to the plans.



1.2. To Do Billing Activities - User Action Required

Billing activities that require intervention from the user are shown in the “**To Do Billing Activities**” section.

To Do Billing Activities - User Action Required

20 Electronic encounters are on hold for review

4277 Electronic encounters are not billed since last 2+ days

116 Visit(s) need to be fixed before submission

0 Clearinghouse Rejection(s), need to be reviewed

62 ERA/Check need posting

To Do Billing Activities - User Action Required

1434 Paper visit(s) to be submitted.

991 Visit(s) in plan follow up bucket

227 Visit(s) in patient follow up bucket

486 Patient Statements are pending to be sent

8 ERA failed processing

- **Electronic Encounter(s)** that are on hold for review must be billed and submitted manually after a review.
- Those visits that require additional information can be **fixed and submitted** through the designated section.



- Some visits are **rejected by the payer**, but they can be reviewed and resubmitted through the designated section.
- **Paper Visit(s)** will contain the visits that must be printed and submitted manually for those plans that do not accept electronic claims.
- Visits that require additional follow-ups will move to either the **Plan Follow-up** or **Patient Follow-up** buckets, depending on the action required.

1.3. **Aging Based on DOS**

This section gives an overview of the aging of the plan and patient payments broken down based on their date of service (DOS).

1.4. **Plan Followup**

This section gives an overview of the most common reasons for the denials and the amount of charges impacted due to a specific denial reason. This overview is crucial and can help the practice identify opportunities within the workflow to reduce the denials.

2. **Charge Listing**

The Chart Listing tab within the billing module gives you an overview of all the charges that have been billed.



2.1. Search Option

The search option within the charge listing tab allows the user to filter the results based on a specific search query. A user can check the “**Advance Search**” box and search for results using the charge number, account number, patient’s name, location, and provider.

2.2. List of Charges

Once the user clicks “**Search**,” a list of charges based on the search filters will be displayed at the bottom of the screen. The user can check the details of each charge billed by clicking on the charge number.

The “**Plan Payment**” option in the top left corner of this section allows the user to open plan payment details and submit payments.

The “**Follow Up**” option can be used to create a follow-up for the visit, if necessary.