

Practice EHR | User Guide

Billing Module | Part 4



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.

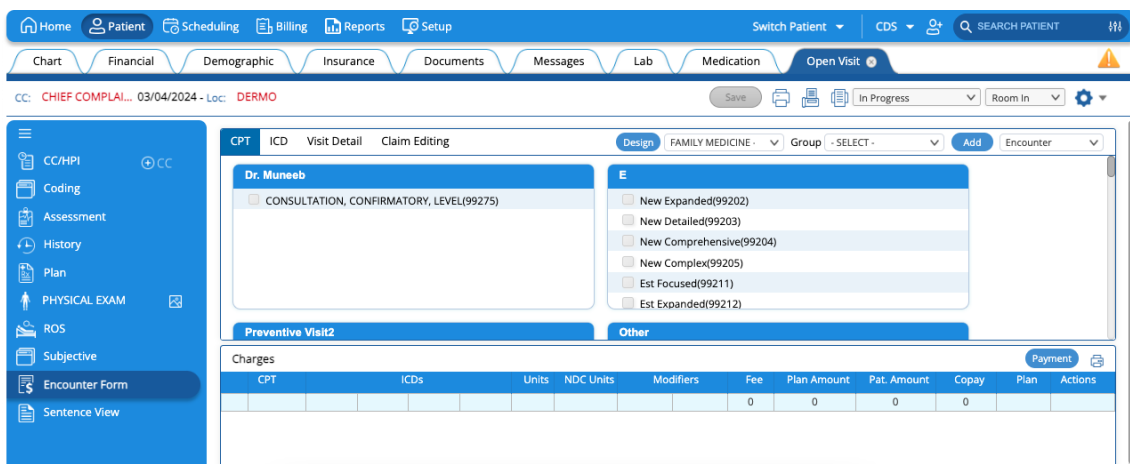
How to Submit a Claim to the Payer in Practice EHR

Submitting a claim to the payer in Practice EHR involves multiple steps and various team members based on the specific process within the practice. For example:

- For some, the provider may complete the encounter form and be confident in updating the status to **"Ready to Bill."**
- Others may have an outside billing company working within Practice EHR with the staff to complete the process.
- The practice can also work with an external billing company with an integration.

Here are the steps to submit a claim to the payer in Practice EHR:

1. Open a visit or encounter for the patient who has been checked into the office.
2. Complete the encounter form based on the clinical findings.



The screenshot shows the Practice EHR interface for a patient encounter. The top navigation bar includes Home, Patient, Scheduling, Billing, Reports, and Setup. The main content area shows a patient record for 'Dr. Muneeb' with a 'Preventive Visit2' encounter. The 'CPT' tab is active, displaying a list of codes including 'CONSULTATION, CONFIRMATORY, LEVEL(99275)'. A 'Charges' table is visible at the bottom, with columns for CPT, ICDs, Units, NDC Units, Modifiers, Fee, Plan Amount, Pat. Amount, Copay, Plan, and Actions.

CPT	ICDs	Units	NDC Units	Modifiers	Fee	Plan Amount	Pat. Amount	Copay	Plan	Actions
					0	0	0	0		



3. Change the status of the visit to "**Ready to Sign Off**" using the drop-down menu in the top left corner of the screen.

*The visit details, like the name of the billing provider, the practice location, or the date of service (DOS), can be changed from the "**Visit Detail**" section of the encounter form only before the visit is signed off. Once signed off, these fields will be locked, and no further changes will be allowed.*

4. Change the encounter form status to "**Ready to Bill.**" It is recommended to sign off the visit before changing the status of the encounter form to ready to bill.

Until the encounter form is updated as ready to bill, the encounter or financial record will remain visible only within the patient's chart. The visit will not be displayed on the patient's financial tab, nor will the revenue from the specific visit be included in any reports.

*All the encounters that are not billed will be displayed in the "**Not Billed Encounters**" bucket of the Home section. Moreover, if the encounters are not billed for 48 hours, the system will display those encounters in the Billing module under the "**User Action Required**" section as "**Electronic encounters are not billed since last 2+ days.**"*

5. Go to the Billing module.
6. Under the **Auto Daily Activities** section, open the electronic visits set for automatic submission at a preset time.
7. Check the box against the visit number of the recently signed-off visit and click "**Submit Now.**" If not done manually, the system will automatically submit the claim at a preset time if auto-submission is enabled.



How to Perform To-Do Billing Activities that Require User Action

There are various tasks under the “**To Do Billing Activities**” section in the Billing module that require intervention from the user.

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

Here, we explain in detail how to perform each activity:

1. Electronic Encounters On Hold for Review

When a provider completes the encounter form within the visit, the system allows the provider to put the encounter on hold before marking it ready to bill. This bucket allows a member of the billing team to review these encounters within the Billing module without navigating to the Home screen.



- Click this option under the “To Do Activities” section to open a list of encounters on hold.
- Click the Visit Date, which will open the visit details.
- Once the encounter is reviewed and required changes are made, you can change the status of the encounter form to “**Ready to Bill**,” and the task will be removed from the bucket.

2. Electronic Encounters Are Not Submitted Since Last 2+ Days

If an encounter is not billed for 48 hours, the system will display the encounter in this bucket. The user can open the encounter and update the status of the encounter form as “**Ready to Bill**.”

3. Visit(s) Need to be Fixed Before Submission

If there are any edits required in certain claims against information entered in the patient demographic, insurance, or practice information needed to process the claim, they will appear in this bucket.

- Open the bucket by clicking “**Visit(s) need to be fixed before submission**” under the “**To Do Billing Activities**” Section.
- Click the visit number.
- Make the required changes.
- Click “**Update Visit**.”

4. Visit(s) Rejected by Payer, Need to be Reviewed

If the claim can not be processed by the insurance plan due to conflicting or wrong information, the visit will be available in this bucket for review and resolution.

- Open the bucket by clicking “**Visit(s) rejected by the payer, need to be reviewed**” under the “**To Do Billing Activities**” Section.
- Click the visit number.



- Make the required changes.
- Click **"Update Visit."**

5. ERA/Check Need Posting

Electronic remits received against the claims submitted will be available in this bucket and can simply be posted. The ERAs or checks can also be set for auto-posting.

6. Paper Visit(s) to be Submitted

If a plan does not accept electronic claim submissions or the EDI number has not been loaded into the insurance plan profile, the visits will appear in this bucket.

- Open the bucket by clicking **"Paper visit(s) to be submitted"** under the **"To Do Billing Activities"** Section.
- Check the box(es) against the visit number(s).
- Click the print icon to print and physically send the claim to the insurance plan.
- Click **"Plan Paper Submission"** to update the claim submission status.

7. Visit(s) in Plan Follow Up Bucket

This bucket will display all the visits that require additional attention from the practice and/or the insurance plan. Clicking the **Followup Visit #** against an enlisted visit will open the Plan Followup tab.

8. Visit(s) in Patient Follow Up Bucket

This bucket will display all the visits that require additional attention from the patients. This may reflect patients' responsibilities like co-payments, deductibles, share of cost, or self-pay accounts.

The system will generate three statements to the patients while the visit stays in the plan follow-up bucket, after which the visit moves into the patient follow-up bucket. Thereafter, the practice can follow internal collection policies and procedures.



9. Patient Statement(s) are Pending to be Sent

Once the insurance plan identifies monies as the patient's responsibility, the system will generate a patient statement. These statements will appear in the "**Patient statement(s) are pending to be sent**" bucket.

After the initial statement, the system will generate three additional statements before allowing the practice to determine the next step for collection.

10. ERA Failed Processing

When an electronic remit is received, but the system is unable to link the patient, date of services (DOS), or charges, the remit will be placed in this bucket for resolution by the billing team or the practice.

Once resolved, click "**Resolve**" in the upper left corner of the screen to remove the ERA from this bucket.