

Overview

Remittance information is available at both the payment and claim levels. The **Payment Summary** provides complete remittance information related to an individual EFT payment and is returned by the **History** and **Payment Search** screens. The **Paid Claim Detail** provides remittance information related to an individual claim and is available from payment search results as well as the **Summary** and **Paid Claims Search** screens.

Workflow Statuses

Workflow status is used to assign transactions to easy-to-understand categories. Workflow statuses are assigned automatically when a response is received, and each status has a color scheme. Workflow status may also be assigned manually when viewing search results. The workflow statuses below that are configured by default, and your administrator may create new statuses to fit your business needs.

Payment Search Results

Workflow Status: Format:

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<input type="checkbox"/>		Payer Name ↑	Payment Date	Check/EFT #	Total Payment	Total Claims
<input type="checkbox"/>	<input type="button" value="VIEW"/> <input type="button" value="SUMMARY"/> <input type="button" value="A"/>		02/03/2010	091207539008898	\$828.50	19
<input checked="" type="checkbox"/>	<input type="button" value="VIEW"/> <input type="button" value="SUMMARY"/> <input type="button" value="B"/>		02/03/2010	091207539008893	\$434.25	14
<input type="checkbox"/>	<input type="button" value="VIEW"/> <input type="button" value="SUMMARY"/>		01/23/2010	29982955	\$0.00	1

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☒

- A** Click **Summary** to view full payment details in a new pop up window.
- B** Click **View** for payment details on individual claims.
- C** Use the checkboxes to select a payment and click **Download EDI** for a machine-readable copy of the file. *Only one item may be selected at a time.*
- D** Use the checkboxes to select one or more payments. Select a **Workflow Status** from the menu and click **Update** to assign the status (for example, **Posted**).
- E** Select a file **Format** and click **Download** to work with the report in another program.

Paid Claim Search Results

Workflow Status: Format:

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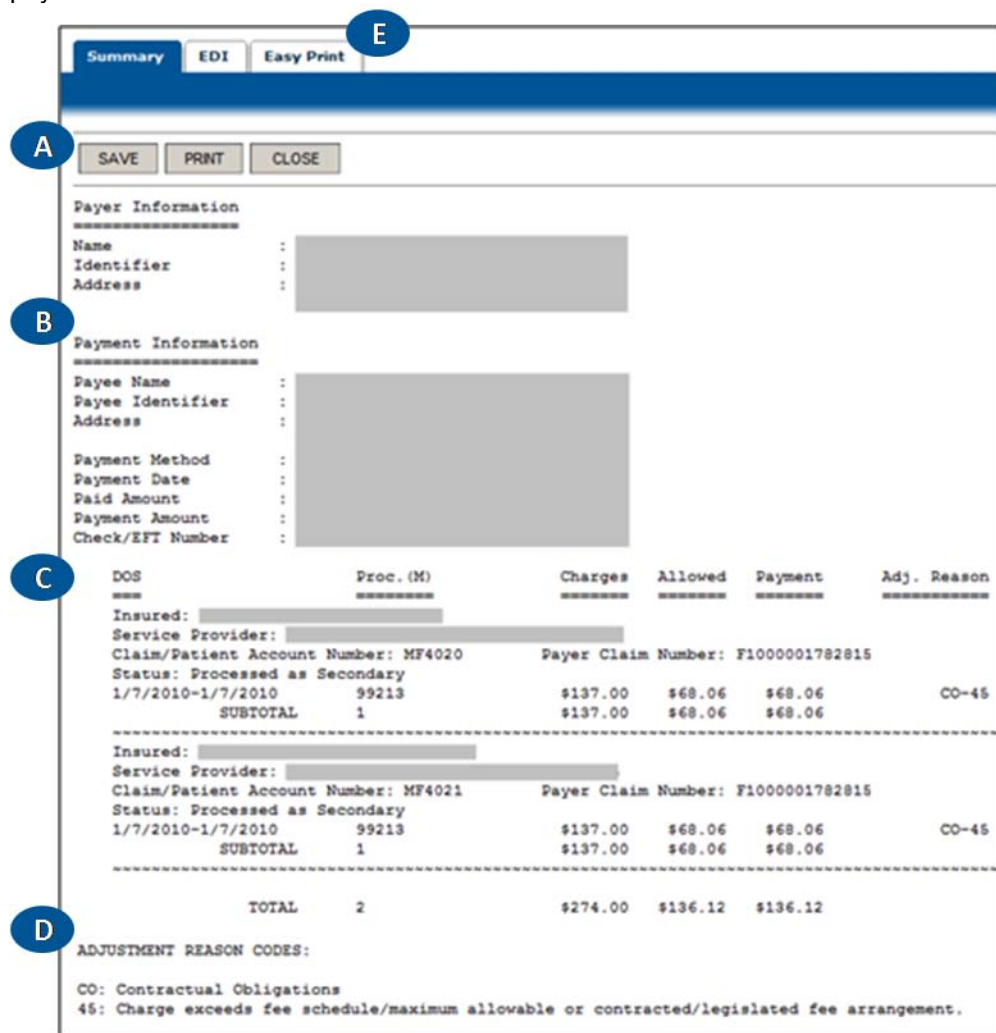
<input type="checkbox"/>		Payer	Check/EFT #	Claim #	Claim Service Date	Total Charges	Patient Last ↑
<input checked="" type="checkbox"/>	<input type="button" value="A"/> <input type="button" value="DETAIL"/>			000003129	12/22/2009-12/22/2009	\$212.00	
<input type="checkbox"/>	<input type="button" value="DETAIL"/>			000008520	12/16/2009-12/16/2009	\$112.00	
<input type="checkbox"/>	<input type="button" value="DETAIL"/>			000009816	12/22/2009-12/22/2009	\$121.00	

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- A** Click **Detail** to view payment details for the claim in a new popup window.
- B** Click **Back** to return to the previous screen.
- C** Use the checkboxes to select one or more payments. Select a **Workflow Status** from the menu and click **Update** to assign the status (for example, **Posted**).
- D** Select a file **Format** and click **Download** to work with the report in another program.

Payment Summary

The **Payment Summary** displays complete remittance information for a single payment.



The screenshot shows the Payment Summary interface. At the top, there are tabs for 'Summary', 'EDI', and 'Easy Print'. Callout E points to the 'Easy Print' tab. Below the tabs, there are buttons for 'SAVE', 'PRINT', and 'CLOSE'. Callout A points to these buttons. The main content area is divided into sections: 'Payer Information', 'Payment Information', and a table of charges. Callout B points to the 'Payment Information' section. Callout C points to the table of charges. Callout D points to the 'ADJUSTMENT REASON CODES' section at the bottom.

Payer Information

Name : [REDACTED]
 Identifier : [REDACTED]
 Address : [REDACTED]

Payment Information

Payee Name : [REDACTED]
 Payee Identifier : [REDACTED]
 Address : [REDACTED]
 Payment Method : [REDACTED]
 Payment Date : [REDACTED]
 Paid Amount : [REDACTED]
 Payment Amount : [REDACTED]
 Check/EFT Number : [REDACTED]

DOS	Proc. (M)	Charges	Allowed	Payment	Adj. Reason
Insured: [REDACTED]					
Service Provider: [REDACTED]					
Claim/Patient Account Number: MF4020 Payer Claim Number: F1000001782815					
Status: Processed as Secondary					
1/7/2010-1/7/2010	99213	\$137.00	\$68.06	\$68.06	CO-45
SUBTOTAL		1	\$137.00	\$68.06	
Insured: [REDACTED]					
Service Provider: [REDACTED]					
Claim/Patient Account Number: MF4021 Payer Claim Number: F1000001782815					
Status: Processed as Secondary					
1/7/2010-1/7/2010	99213	\$137.00	\$68.06	\$68.06	CO-45
SUBTOTAL		1	\$137.00	\$68.06	
TOTAL		2	\$274.00	\$136.12	

ADJUSTMENT REASON CODES:

CO: Contractual Obligations
 45: Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement.

- A** Click **Save** to download a local copy or click **Print** for a paper copy.
- B** Payment information including **Payment Method**, **Date**, **Amount**, and **EFT Number** is provided at the top of the summary.
- C** Detailed payment information is provided on a claim by claim basis.
- D** A key for the **Adjustment Reason Codes** is provided at the bottom of the summary.
- E** Click the **Easy Print** tab to display the summary in the Medicare Easy Print format.

History

The **History** screen returns a list of all payments received within a specified date range.



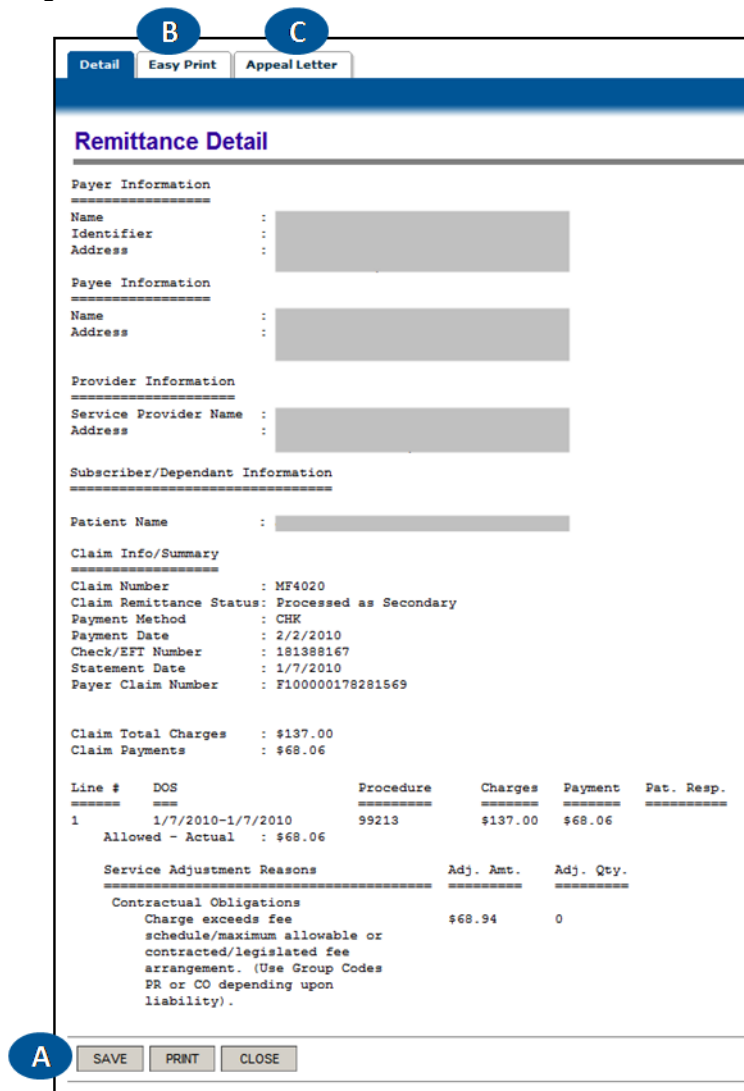
The screenshot shows the filter controls for the History screen. Callout A points to the 'Filter By' dropdown menu. Callout B points to the 'GO' button.

Filter By: [Dropdown]
 From: 1/1/2010 To: 1/8/2010 Group: ANY GO

- A** Enter or use the calendar controls to select a date range. *The default range is the past 7 days, and the maximum range is 90 days.*
- B** Click **Go** to view results.

Paid Claim Detail

The **Paid Claim Detail** displays payment information related to a single claim.



Remittance Detail

Payer Information

Name :
 Identifier :
 Address :

Payee Information

Name :
 Address :

Provider Information

Service Provider Name :
 Address :

Subscriber/Dependant Information

Patient Name :

Claim Info/Summary

Claim Number : MF4020
 Claim Remittance Status: Processed as Secondary
 Payment Method : CHK
 Payment Date : 2/2/2010
 Check/EFT Number : 181388167
 Statement Date : 1/7/2010
 Payer Claim Number : F100000178281569

Claim Total Charges : \$137.00
 Claim Payments : \$68.06

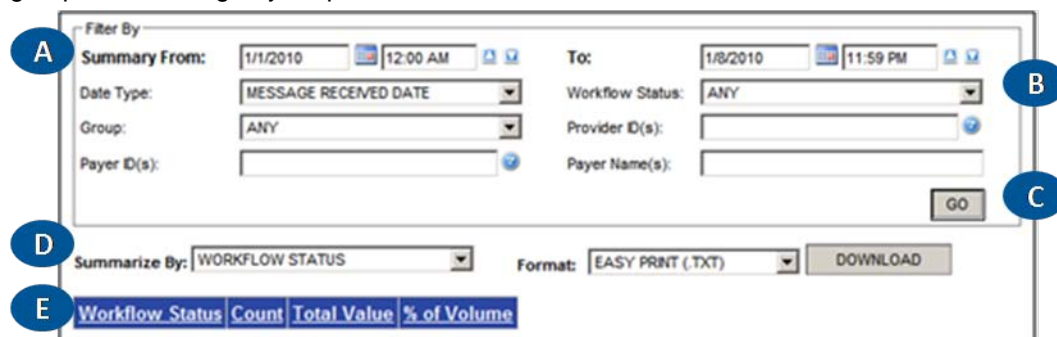
Line #	DOS	Procedure	Charges	Payment	Pat. Resp.
1	1/7/2010-1/7/2010	99213	\$137.00	\$68.06	
Allowed - Actual : \$68.06					
Service Adjustment Reasons			Adj. Amt.	Adj. Qty.	
Contractual Obligations					
Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. (Use Group Codes PR or CO depending upon liability).			\$68.94	0	

SAVE PRINT CLOSE

- A** Click **Save** to download a local copy or click **Print** for a paper copy.
- B** Click the **Easy Print** tab to display the summary in the Medicare Easy Print format.
- C** Click the **Appeal Letter** tab to print or download a prepared letter to appeal a denial.

Summary

The Summary screen returns a dashboard of claims paid within a specified date range and grouped according to your preferences.



Filter By

Summary From: 1/1/2010 12:00 AM **To:** 1/8/2010 11:59 PM

Date Type: MESSAGE RECEIVED DATE **Workflow Status:** ANY

Group: ANY **Provider ID(s):**

Payer ID(s): **Payer Name(s):**

GO

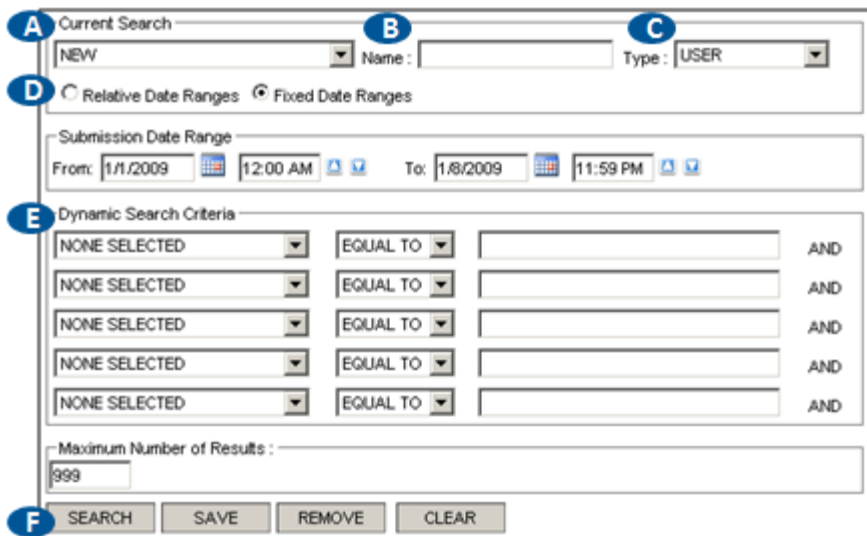
Summarize By: WORKFLOW STATUS **Format:** EASY PRINT (.TXT) **DOWNLOAD**

Workflow Status Count Total Value % of Volume

- A** Enter or use the calendar controls to select a date range. *The default range is the past 7 days, and the maximum range is 90 days.*
- B** Set additional filters as needed, such as **Workflow Status**.
- C** Click **Go** to show results.
- D** Use the **Summarize By** menu to change the summary type if needed. *The results will refresh automatically.*
- E** The results are shown in a table. Click the **Count** for any line item to view a detailed list of transactions. *The counts appear as hyperlinks.*

Paid Claims and Payment Search

The **Paid Claims Search** and **Payment Search** screens allow you to build robust queries for remittances and save them for future use. The steps for building, saving, and performing both types of searches are identical.



The screenshot shows the 'Current Search' form. Annotations are as follows:

- A**: Points to the 'Current Search' dropdown menu, which is currently set to 'NEW'.
- B**: Points to the 'Name' text input field.
- C**: Points to the 'Type' dropdown menu, which is currently set to 'USER'.
- D**: Points to the 'Relative Date Ranges' radio button, which is currently selected.
- E**: Points to the 'Dynamic Search Criteria' section, which contains five rows of dropdown menus for criteria and 'EQUAL TO' operators.
- F**: Points to the 'SEARCH' button at the bottom of the form.

- | | |
|----------|--|
| A | Select NEW from the Current Search drop down menu to build a new search. <i>If the desired search is already saved, select it from the menu and go to the last step.</i> |
| B | Enter a Name for the new search. |
| C | Select the search Type to make a search available to you only (USER) or to all users (ORGANIZATION). |
| D | Select Relative Date Ranges for the Submission Date Range to update automatically relative to the current date whenever the search is selected. |
| E | Select and define one or more Dynamic Search Criteria . |
| F | <ul style="list-style-type: none"> Click Search to retrieve your results without saving changes. Click Save to save the changes. Click Remove to delete a saved search. Click Clear to reset all the fields. |

Administrator Tips

Configure > General > Form Letters

Create one or more templates for the **Appeal Letter** tab in the **Paid Claim Detail** window.

Configure > Users & Groups > Groups

Create a **Group** for each billing provider that receives remittances under the account. **Groups** may be used to filter searches and to restrict user access to information.

Configure > Healthcare > Provider ID Group Mapping

If groups are configured, then **Provider ID Group Mappings** must be created. Map a billing provider identifier to a group name.

Configure > Workflow > Workflow Statuses

Workflow Statuses may be applied at both the payment and paid claim levels. View, modify, or remove pre-configured items. Create new items to fit your business needs.