

PCC 2013 Users' Conference

Strategies for Insurance and Personal Collections



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Ins & Pers Collections

- Pre Visit
- Visit Date
- Post Visit



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Ins & Pers Collections Pre-Visit

The processes used *prior* to when a patient comes in will impact the quality of your claims, increase TOS payments, and help reduce the amount of collections needed.

In short the Front End functions drive the revenue cycle.



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Ins & Pers Collections Pre-Visit – Scheduling

- Points to make during appointment verification
 - Verify date, time, and visit reason
 - Verify insurance plan, subscriber, start date, and end date
 - Remind patient
 - to bring in their insurance card
 - expected copay
 - outstanding balances



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Ins & Pers Collections Pre-Visit – Appointment Verification

- Why?
 - Avoid gaps in your schedule
- When?
 - 24 – 48 hours prior to the appointment
- How?
 - notify program
 - srs reports
 - 3rd party software



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Ins & Pers Collections Pre-Visit – Appointment Verification

- What to verify during reminder calls
 - Date, time and visit reason
 - Insurance plan, subscriber, start/end dates
 - Reminders:
 - Bring insurance card
 - Expected copay
 - Outstanding balances



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Ins & Pers Collections Pre-Visit – Eligibility Verification

- Why?
 - Primary Error for EDI Rejections
 - REJECTED AT CLEARINGHOUSE:
SUBSCRIBER PRIMARY IDENTIFICATION
NUMBERS IS MISSING OR INVALID
- When?
 - 1 – 2 days prior to the appointment

Ins & Pers Collections Pre-Visit – Eligibility Verification

- How?
 - Phone
 - Internet
 - Partner's Eligibility Program

Ins & Pers Collections Pre-Visit – Eligibility Verification

- Partner's elig program
 - Auto eligibility overnight
 - 48 hours prior to visit
 - 24 hours prior to visit
 - Update policy information as needed through elig
 - Use notes for the front desk to see at checkin

Ins & Pers Collections Pre-Visit – Eligibility Verification

- Partner's elig program
 - Eligibility for visits more than two days away
 - Why? How?
 - Pros/Cons



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Ins & Pers Collections Pre-Visit – Billing Dept Prep

- Develop a financial policy you share with parents.
- Develop guides to educate patients about insurance responsibility
- Understand basic information about patient insurance plans



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Ins & Pers Collections Same Day Visits

- Scheduling
 - Verify: demographics, insurance, copay, personal balance
 - Reminders: bring insurance card, expected copay, previous personal balance
- Eligibility
 - Real time with elig if possible
 - Check online/via phone as needed



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Ins & Pers Collections Day of Visit

- Patient Check In (checkin)
- Posting Charges (checkout)
- Clean claims

Ins & Pers Collections Day of Visit - checkin

- Why?
 - Most Common Clearinghouse Claim Rejection Reasons can be avoided by properly using the checkin program
 - Update demographics
 - Check eligibility
 - Insurance verification
 - TOS payments (copay/previous balance)

Ins & Pers Collections Day of Visit – checkin Demographics

Pat PCC (#3336)
Checkin - Demographics
Step 1 of 5

First Name: Pebbles	Born: Apr 24, 2003	
Last Name: Flintstone	Age: 10 years	
Physician: Williams	Sex: Female	
Status: \$\$ Problem, Adoption		
SSN: 828-74-6104	Alt Name: Rubble	
School: Bedrock Central	Chart #: 2755	
Patient Lives with Wilma Flintstone (#1981)		
Status: CONFIDENTIAL		
Addr: 5 Quarry Lane	Home Phone: 802-555-0194	
	Work Phone: 802-555-0197	
City: Winooski	Cell Phone: 802-555-0161	
State: VT	Zip Code: 05404	Emg Phone: 802-555-0168
Email: stones@HannaBarbera.com		
Bills Sent to Fred Flintstone (#1980)		
Status: Billing Problem		
Addr: 1400 Rock Road	Home Phone: 802-555-0105	
	Work Phone: 802-555-0146	
City: Winooski	Cell Phone: 802-555-0112	
State: VT	Zip Code: 05404	Emg Phone:
Email: stones@HannaBarbera.com		
Next Step	Edit Patient	Edit Account
Reassign Account	Make Appt	Reprint Billing Enc Form
Key Set		

Ins & Pers Collections

Day of Visit – checkout Insurance Config

- Proper insurance configuration
 - Pending correct procedures
 - Submitting correct procedures
 - Why pending and submitting are not the same
 - Different copays for well vs. sick codes
 - Support can help you fix any of these not working properly.
 - Call and ask for Jim!

Ins & Pers Collections

Day of Visit – checkout Screens

- checkout screens
 - Setup using Charge Screen Editor (csedit)
 - Can vary by visit reason, place of service, and/or provider

Ins & Pers Collections

Day of Visit – checkout SNAP codes

- SNAP Code Table
 - Use for so procedures are not missed, ie. Immunizations
 - Each SNAP code can link up to 21 procedures, each capable of linking to 4 diagnoses codes
 - Can be placed on screens using the Charge Screen Editor (csedit)

Ins & Pers Collections

Day of Visit – checkout Clean Claims

- Always link diagnoses to procedures
- Certified coder on staff
 - Close to providers for questions
- Train staff on basic coding scenarios
 - Improve your revenue
 - Reduce your rejection rate
- Use SNAP codes to reduce missed procedures

Ins & Pers Collections

Day of Visit – checkout Clean Claims

- Verifying quality claims
 - Daysheet Postings Check (dailycheck)
 - Use interactive mode
 - Who should use dailycheck?
 - Changing insurance after charges are posted means:
 - Updating the insurance in policy and oops
 - Batching the claim with the correct insurance
- Pre-authorization / Referral requirements

Ins & Pers Collections

Post Visit

- Insurance Collections
- Personal Collections

Insurance Collections

Post Visit – Claim Submission

- Partner Claim Responses
 - ECS Batch Logs
 - Lists claims (date of service, total claim charge, patient name) **submitted** by Partner to a specific payor on a specific date



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Insurance Collections

Post Visit – Claim Submission

- Clearinghouse/Intermediary Responses
 - Delivered via clearinghouse or gateway
 - PCC Daily Submission Summary
 - Capario Daily Verification Report, etc
 - Rejected claims are **not submitted** to payors
 - Accepted claims are **submitted** to payors



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Insurance Collections

Post Visit – Claim Submission

- Finding Electronic Claim Responses in Partner
 - Correct Mistakes (oops)
 - Use to access account/patient specific claim and response history
 - EDI Reports (ecsreports)
 - Use to access original/complete response reports by type and date



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Insurance Collections Post Visit – Payment Posting

- Autoposting of payments
 - ERA vs EFT
 - autopip
 - RARC and CARC
 - erareports



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Insurance Collections Post Visit – Payment Posting autopip

What's ERA?

- Electronic Remittance Advice
- an Electronic EOB

What's EFT?

- Electronic Funds Transfer
- aka Direct Deposit



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Insurance Collections Post Visit – Payment Posting autopip

- ERA is not EFT
 - Most payors allow receipt of either or both
 - Some payors require both
 - Partner doesn't facilitate processing of EFT
 - That's between the payor and your bank!



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Insurance Collections

Post Visit – Payment Posting autopip

- Learning to use autopip
 - autopip and the autoposting process is documented at <http://learn.pcc.com/>
 - Our video tutorial is highly recommended! <http://downloads.pcc.com/videos/autopost.htm>

Insurance Collections

Post Visit – Payment Posting autopip

- Unposted ERA payments are presented by payment date, payor, check number, and check amount

Insurance Collections

Post Visit – Payment Posting autopip

Date	Payor	Check#	Check Amount
07/27/09	Healthier United	432143214321	203.10
07/27/09	Healthier United	321432143214	75.30
07/27/09	Healthier United	213214321432	51.14
07/28/09	Sergeant Hartford	907698769	32.54
07/28/09	Sergeant Hartford	876987698	57.69
07/29/09	Alma	03210321032	61.00
07/29/09	Alma	32103210321	91.00
07/29/09	Alma	21032103210	73.00
07/29/09	Alma	10321032103	102.00
07/29/09	Alma	03210321033	110.19
07/29/09	Cactus Frickle	4444449	67.28
07/29/09	Sergeant Hartford	565656560	75.95
07/29/09	Sergeant Hartford	565656561	128.29
07/29/09	Sergeant Hartford	565656572	47.69
07/29/09	Sergeant Hartford	565656591	77.73
07/29/09	Spinda	11000000001	471.59
07/29/09	Total Health Complete	222000001	271.25
07/29/09	Kingsland Crosses	42	105.38
07/29/09	Wassalla National Health	88888881	119.96

Insurance Collections

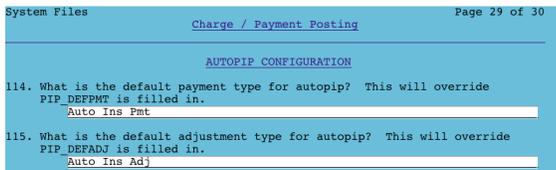
Post Visit – Payment Posting autopip

- Partner autoposting in a nutshell
 - autopip posts the claim payments it can
 - Claim payments which are not autoposted are directed to the Manual Post Report
 - Print the Manual Post Report and post those payments with pip, i.e. the old fashioned way

Insurance Collections

Post Visit – Payment Posting autopip

- Use a different default payment/adjustment type than pip to make auto postings easier to see in Partner programs
 - Payment Types table
 - ced option



Insurance Collections

Post Visit – Payment Posting autopip

- Which payments and adjustments must be manually posted?
 - Those for which the charge amount, CPT, and/or copay doesn't match Partner's data
 - Those which don't relate directly to charges with unpaid insurance balances
 - Denials

Insurance Collections

Post Visit – Payment Posting autopip

- Which payments and adjustments must be manually posted?
 - Depending on your Partner configuration
 - Adjustment codes which are not predefined as acceptable for autoposting
 - Payments which do not match the corresponding Partner allowable value



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Insurance Collections

Post Visit – Payment Posting autopip

- Remittance Advice Remark Code (RARC) and Claims Adjustment Reason Code (CARC) Values
 - HIPAA standardized the coding payors use to identify adjustment reasons
 - All payors must use the standard code values in electronic remittance advice
 - Partner's formatted ERA translates the codes to the corresponding text descriptions



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Insurance Collections

Post Visit – Payment Posting autopip

- Remittance Advice Remark Code (RARC) and Claims Adjustment Reason Code (CARC) Values
 - RARC Values
<http://www.wpc-edi.com/reference/codelists/healthcare/remittance-advice-remark-codes/>
 - CARC Values
<http://www.wpc-edi.com/reference/codelists/healthcare/claim-adjustment-reason-codes/>



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Insurance Collections

Post Visit – Payment Posting autopip

- erareports
 - erareports provides access to archived ERA data separated by check, like autopip
 - All ERA – autoposted, manually posted, and unposted – is presented, separated by payment date, payor, check number, and check amount
 - Search and print functions are provided

Insurance Collections

Post Visit – Payment Posting autopip

- How do I get started with autoposting?
 1. Register to receive ERA from Partner's supported payors at <http://www.pedsourc.com/ERA/>
 2. PCC's EDI Support Team will respond and assist with ERA payor registration as applicable
 3. Preview the <http://learn.pcc.com/> online documentation for Partner ERA and autoposting

Insurance Collections

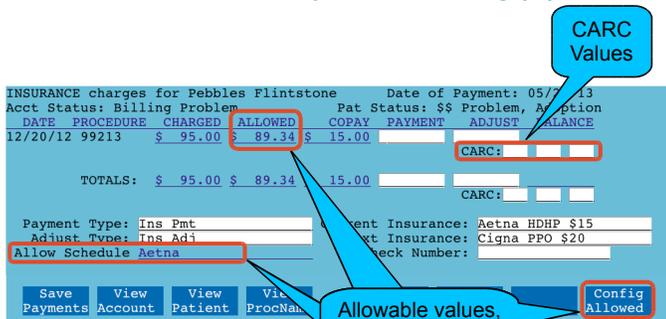
Post Visit – Payment Posting erareports

Date	Payor	Check#	Check Amount	Autoposted
07/29/09	Healthier United	432143214321	\$ 241.98	
07/29/09	Healthier United	321432143214	\$ 0.00	
07/29/09	Healthier United	213214321432	\$ 119.96	
07/29/09	Sergeant Hartford	987698769	\$ 105.38	
07/29/09	Sergeant Hartford	876987698	\$ 271.25	
07/29/09	Alma	03210321032	\$ 471.59	
07/29/09	Alma	32103210321	\$ 77.73	
07/29/09	Alma	21032103210	\$ 47.69	
07/29/09	Alma	10321032103	\$ 128.29	
07/29/09	Alma	03210321033	\$ 75.95	
07/29/09	Cactus Prickle	4444449	\$ 67.28	
07/29/09	Sergeant Hartford	565656560	\$ 110.19	
07/29/09	Sergeant Hartford	565656561	\$ 102.00	
07/29/09	Sergeant Hartford	565656572	\$ 73.00	
07/29/09	Sergeant Hartford	565656591	\$ 91.00	
07/29/09	Spindra	11000000001	\$ 61.00	
07/28/09	Total Health Complete	222000001	\$ 57.69	
07/28/09	Kingsland Crossms	42	\$ 32.54	
07/27/09	Wassalla National Health	88888881	\$ 51.14	

Insurance Collections Post Visit – Payment Posting pip

- Posting insurance payments manually, aka pip
 - Payment/Adjustment types to track denials
 - CARC fields can be configured to appear
 - Using `allow` allows secondary claims to be submitted electronically
 - Post ALL CARC codes!
 - Insurance Allowables / Fee Schedules
 - Instant comparison
 - Configuration on the fly

Insurance Collections Post Visit – Payment Posting pip



INSURANCE charges for Pebbles Flintstone Date of Payment: 05/27/13
 Acct Status: Billing Problem Pat Status: \$\$ Problem, Adjustment

DATE	PROCEDURE	CHARGED	ALLOWED	COPAY	PAYMENT	ADJUST	BALANCE
12/20/12	99213	\$ 95.00	\$ 89.34	\$ 15.00			
TOTALS:		\$ 95.00	\$ 89.34	15.00			

Payment Type: `Ins Pmt` Patient Insurance: Aetna HDHP \$15
 Adjust. Type: `Ins Adj` Patient Insurance: Cigna PPO \$20
 Allow Schedule Aetna Check Number:

Buttons: Save Payments, View Account, View Patient, View ProcName, Config Allowed

Insurance Collections Post Visit – Corrections

- oops and oopsp
 - Correct insurance <F4>
 - Correct diagnoses <F5>
 - Correct billing provider <F3>
 - Batch corrected claims <F2>
 - Unlink/Relink payments <F6>

Insurance Collections Post Visit – Follow Up

- Unpaid claims
- Denial management
- Appeals process
- Partner claims submission tools and reports



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Insurance Collections Post Visit – Follow Up Partner Tools

- maketags
- insaging
- inscoar – interactive mode
- srs Billing & Collection reports
- ecsreports
- allowedit
- cfs



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Insurance Collections Post Visit – F/U Partner Tools maketags

- ONLY for special circumstances

RESUBMIT CLAIMS

Age of Charges:

45 or more days old

from 45 to 90 days old

for dates from 05/21/12 through 05/20/13

Charges to Resubmit:

Only Unpaid, Pending Charges

Only Unpaid Charges, Pending or Personal

All Charges, Paid or Unpaid, Pending or Personal

Which Insurance Plans:

Many Plans

Just One Plan: _____

All Providers: Yes

NOTE: the above criteria will be ignored when using F5 (SRS).

Include entire visits: No

Find Claims



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Insurance Collections

Post Visit – F/U Partner Tools insaging

- Use to find insurance companies not paying timely

Insurance Company Aging Report – All Providers 05/21/13							
Ins Group	Current	30-59	60-89	90-119	120+	Total	Percent
Personal	5,676	6,348	3,426	1,746	63,973	81,172	52
Medicaid	0	0	0	0	46	46	0
Aetna USHC HMO	1,426	180	265	0	0	1,871	1
Aetna MC & Elect	1,259	0	0	0	0	1,259	1
Aetna Open	2,099	441	0	0	0	2,540	2
BCBS	2,521	30	619	38	122	3,331	2
Capital Blue Cross	10,638	4,950	99	0	588	16,275	11
Health America	4,873	621	165	0	15	5,674	4
Keystone HealthPlan	2,028	146	185	40	261	2,660	2
HealthyKids HMO	371	491	206	0	332	1,400	1
Private Insurance	13,290	2,310	346	460	913	17,320	11
Cigna	393	0	0	0	0	393	0
Highmark Blue Shield	16,922	1,141	0	72	60	18,195	12
Retired Insurance Plans	1,267	1,043	105	143	169	2,727	2
Total	62,765	17,702	5,417	2,499	66,480	154,865	
Percentage	41%	11%	3%	2%	43%		

Insurance Collections

Post Visit – F/U Partner Tools inscoar

- inscoar generates a list of outstanding claims
 - Interactive gives you access to everything!
 - fame (notes)
 - notjane
 - refund
 - pam
 - pip
 - oops
 - checkout

Insurance Collections

Post Visit – F/U Partner Tools inscoar

INSOCOAR INTERACTIVE SCREEN							
Use the PgUp and PgDn keys to scroll through this information.							
						TOTAL: \$	543.00
<input checked="" type="checkbox"/>	ACCOUNTS WITH BALANCES PENDING Health America HMO \$10/20 ()						
<input checked="" type="checkbox"/>	Moyer, Donald J. (#1372)						
<input type="checkbox"/>	PARTNER: Moyer, Donald J.						
<input type="checkbox"/>	Moyer, Jeremy (#2512) (09/30/12) (ID: 850435296-03, Grp: Moy665)						
<input type="checkbox"/>	12/08/2012	O	DTaP	90700	V06.1	O	\$ 45.00
	12/08/12 Health America claim batched						
	12/09/12 Claim (from Health America) to PROXYMEDamerica						
<input type="checkbox"/>	12/08/2012	O	HepB/Hib	90748	V06.8	O	\$ 80.00
	12/09/12 Health America claim batched						
	12/10/12 Claim (from Health America) to PROXYMEDamerica						
						\$	125.00
<input type="button" value="Show MoreInfo"/>	<input type="button" value="Hide MoreInfo"/>	<input type="button" value="WorkWith Entry"/>	<input type="button" value="New Pattern"/>	<input type="button" value="Next Match"/>	<input type="button" value="Previous Match"/>	<input type="button" value="Bop To Top"/>	

Insurance Collections Post Visit – F/U Unpaid Claims

- Follow up schedule for contacting the carrier
- Call if no acknowledgment of receipt of claims
 - 10 days for paper
 - 3 days for electronic
- inscoar
- srs

Insurance Collections Post Visit – F/U Denial Management

- Create denial/appeals procedure
- Automate appeal form letters
- Reminder system for followup
 - tickle
 - Account flags

Insurance Collections Post Visit – F/U Appeals

- Know you payer contacts
 - Claims services representative
 - Provider services representative
 - Claims supervisor
 - Appeals coordinator
 - Medical review manager
 - Medical Director

Insurance Collections Post Visit – F/U Appeals

- Sample phone call with carrier
 - Have necessary data in front of you
 - inscoar: interactive mode
 - Know the history of the claim
 - Ask for a time estimate for response



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Insurance Collections Post Visit – F/U Appeals

- Sample phone call with carrier
 - Make detailed notes in the Family Editor (fame)
 - Track start/end time
 - Names, titles, phone number and extension
 - Check numbers and dates
 - Claim id numbers



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Insurance Collections Post Visit – F/U Denials/Appeals

- For more on denials and appeals
 - Attend Donelle Holle's **Denial & Appeal Strategies**, Friday 2:45pm!



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Personal Collections Post Visit

- Send personal bills
- Post payments
- Work Personal A/R
- Sending an Account to Collections
- Reports



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Personal Collections Post Visit – bills/ebills

- Personal bills
 - ebills vs bills
 - Sample bill
 - Cycle billing
 - Alphabet range
 - Partner cycle billing
 - Billing messages
 - Finding bills sent in the past



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Personal Collections Post Visit – bills/ebills

ebills vs bills

- | | |
|---|---|
| <ul style="list-style-type: none">• Look more professional• Submit electronically• Cost per bill<ul style="list-style-type: none">- \$.79366 first page- \$.2235 each addtl page | <ul style="list-style-type: none">• Plain printing, nothing fancy• Print in your office• Folding, stuffing, stamping, and time costs• More control |
|---|---|



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Personal Collections Post Visit – Collections

- Sending an account to collection agency, two options
 - Adjust off charges
 - Pend charges to Agency
- Regardless of option selected above:
 - Print charge information for collection agency
 - Use Collection Report (F3 in fame, coll) or Account History (F8 in fame, tater)

Personal Collections Post Visit – Collections: Adjust Charges

- Run Post Personal Payments (pam)
 - Find account
 - Post Bad Debt/Collection Adjustment and link to charges being sent to collections.
 - Add Collection flag to account
 - Update account notes

Personal Collections Post Visit – Collections: Adjust Charges

POSTING PERSONAL PAYMENTS Page 1 of 2

First Name: John Phone Lbl 1: 802-250-8812
 Last Name: Canning Phone Lbl 2: 802-335-5981
 Status: Payment Plan

Address: 584 Water Street Depend
 City: Irasburg John Canning
 State: VT Zip Code: 05845

AGING:	0-30	31-60	61-90	Over 90	Old Bal	New Bal
Personal:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 208.00	\$ 208.00	\$ 208.00
Insurance:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 279.00	\$ 0.00	\$ 279.00
Medicaid:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Date	Payment/Adjustment Type	Amount	Check #	Prov
07/15/13	BadDebt/Collection	\$ 208.00		

Post the adjustment

Link the adj to the charges

Add Collection flag and notes to the account

Personal Collections

Post Visit – Collections: Adjust Charges

- When you receive a payment from the collection agency do one of the following two options, then add a note in fame.
 - Delete the bad debt adjustment you posted and post the payment using a payment type that indicates the payment was from a collection agency.
 - You may need to post another adjustment
 - Post a "Collection Income" adjustment in the refund program and then post a Collection Payment against that adjustment using pam.

Personal Collections

Post Visit – Collections: Pend Agency

- Partner configuration needed for this option
 - Add “Collection” as an insurance group
 - Adding “1. Collection Agency” as an insco
 - This makes it easier to find in oops

Personal Collections

Post Visit – Collections: Pend Agency

- Partner configuration needed for this option
 - Add “Collection” as an insurance group
 - Adding “1. Collection Agency” as an insco
 - This makes it easier to find in oops
- Go into Correct Mistakes (oops) for this account and change the charges to pend the 1. Collection Agency
 - Add Collection flag and notes to the account

Personal Collections

Post Visit – Collections: Adjust Charges

ITEM	DATE	PATIENT	PROCEDURE NAME	DIAG	SVC	BIL	AMOUNT	SUM DUE
44)	08/06/12	C John	Well Child 5-11 y V70.0	C	C		95.00	95.00
45)	08/07/12	John	Claim (from Other) to enbcbs					
46)	08/06/12	John	Other claim batched					
47)	08/07/12	John	Respiratory Flow 493.81	C	C		28.00	28.00
48)	08/07/12	John	Claim (from Other) to enbcbs					
49)	08/06/12	John	Other claim batched					
50)	08/07/12	John	Spirometry Simple 493.81	C	C		70.00	70.00
51)	08/07/12	John	Claim (from Other) to enbcbs					
52)	08/06/12	John	Other claim batched					
53)	08/07/12	P John	Same 737.30	C	C		0.00	0.00
54)	08/07/12	John	Claim (from Other) to enbcbs					
55)	08/06/12	John	Other claim batched					
56)	01/30/12	C John	OV Expanded Focus 917.8	G	G		56.00	0.00
57)	03/06/12	John	Ins Pmt Direct Blue #110088	G			42.00	
58)	03/06/12	John	Ins Adj Direct Blue #110088	G			4.00	
59)	02/01/12	John	Claim (from BCBS) to BCBS					

Personal: \$ 208.00 Correcting John Canning (# 1).
 Insurance: \$ 279.00 There are 189 more items.
 Medicaid: \$ 0.00

Find the charges

Hit F4 to send to the new collection agency insco

Generate SeeClaim Insurance Visit Unlink & View Adj Delete
 Claim Rpt/Bill Status Relink Reasons Item(s)

Personal Collections

Post Visit – Collections: Adjust Charges

ITEM	DATE	PATIENT	PROCEDURE NAME	DIAG	SVC	BIL	AMOUNT	SUM DUE
44)	08/06/12	C John	Well Child 5-11 y V70.0	C	C		95.00	95.00
47)	08/07/12	John	Respiratory Flow 493.81	C	C		28.00	28.00
50)	08/07/12	John	Spirometry Simple 493.81	C	C		70.00	70.00
53)	08/07/12	P John	Same 737.30	C	C		0.00	0.00
56)	01/30/12	C John	OV Expanded Focus 917.8	G	G		56.00	0.00
			Ins Pmt Direct Blue #110088	G			42.00	
			Ins Adj Direct Blue #110088	G			4.00	
			Claim (from BCBS) to BCBS					

Personal: \$ 208.00 Correcting John Canning (# 1).
 Insurance: \$ 279.00 There are 189 more items.
 Medicaid: \$ 0.00

Type in the numbers for the charges going to collection

type item numbers to edit: 44 47 50

Personal Collections

Post Visit – Collections: Adjust Charges

Changing Insurance Information Page 1 of 1
 John Canning

DATE	PATIENT	Insurance	SUM DUE
44	08/06/12 C John	+ Highmark PPO Blue \$15 - Select Blue \$10	95.00
47	08/06/12 John	- Direct Blue \$10 + Health One \$10/10	28.00
50	08/06/12 John	- Some Other Insurance	70.00

Insurance: Copay:

Some Other Insurance allows you to choose any insurance company

The 1. sorts the Collection Agency to the top of the list

Changing Collection Agency Information Page 1 of 1
 John Canning

Collection	Agency	Address	City	State	Zip	Phone	Fax
1.	Collection						
	Aetna EPO \$10	Box 91522/P.O. Box	91522/Arlington/TX	76015-0022			
	Aetna EPO \$15	Box 91522/P.O. Box	91522/Arlington/TX	76015-0022			
	Aetna HMO \$10	Box 1124/200	Box 1124/200	Bellevue/WA	98004-1124		

Ins & Pers Collections Review

- Pre Visit
 - Scheduling
 - Appointment Verification
 - Eligibility Verification
 - Billing Department Prep



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Ins & Pers Collections Review

- Visit Date
 - Patient Check In (checkin)
 - Posting Charges (checkout)
 - Clean claims



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Ins & Pers Collections Review

- Post Visit Insurance
 - Claims submission
 - Posting payments / responses
 - Claims follow up
 - Claim submission tools and reports



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Ins & Pers Collections Review

Post Visit Personal

- Send personal bills
- Post payments
- Work Personal A/R
- Sending an Account to Collections
- Reports



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Ins & Pers Collections learn.pcc.com

- Click on Partner
 - Click on Insurance Billing
 - <http://learn.pcc.com/Content/Partner/InsuranceBilling/InsuranceBillingIntro.htm>
 - Click on Personal Billing
 - <http://learn.pcc.com/Content/Partner/PersonalBilling/PersonalBillingIntro.htm>



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