Ins & Pers Collections

- Pre Visit
- Visit Date
- Post Visit

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.
Ins & Pers Collections
Pre-Visit

- Scheduling
- Appointment Verification
- Eligibility Verification
- Eligibility Using Partner
- Billing Department Prep

Ins & Pers Collections
Pre-Visit – Scheduling

- New Patient Process
  - Who collects insurance information over the phone?
    - Pros / Cons
      - F7 can be configured to bring you directly to the policy program
      - Remind them to bring their insurance card and copay
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

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

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
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

• How?
  – Phone
  – Internet
  – Partner’s Eligibility Program

• 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

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

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
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
### Ins & Pers Collections

#### Day of Visit – checkin Demographics

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name</td>
<td>Pebbles</td>
</tr>
<tr>
<td>Last Name</td>
<td>Flintstone</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>Jan 24, 2013</td>
</tr>
<tr>
<td>Physician</td>
<td>Mark Miller, M.D.</td>
</tr>
<tr>
<td>Status</td>
<td>12 Problem, Adoption</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Not Hispanic or Latino</td>
</tr>
<tr>
<td>Preferred Language</td>
<td>English</td>
</tr>
<tr>
<td>Contact Name</td>
<td>John Doe</td>
</tr>
<tr>
<td>Contact Address</td>
<td>123 Main St, Anytown, USA</td>
</tr>
<tr>
<td>Contact Phone</td>
<td>555-1234</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:john.doe@email.com">john.doe@email.com</a></td>
</tr>
</tbody>
</table>

#### Meaningful Use

- Verify eligibility has already been checked.
- Relationship code for child or self.
- Online eligibility systems do not ask for patient relationship to subscriber. Real-time eligibility requires this be correct of the insurance will not return a response.

---

### Ins & Pers Collections

#### Day of Visit – checkin Eligibility

- Make sure eligibility has been verified.
- Relationship code for child or self.
  - Online eligibility systems do not ask for patient relationship to subscriber. Real-time eligibility requires this be correct of the insurance will not return a response.
Ins & Pers Collections
Day of Visit – checkin Policies

- Always get a copy of their insurance card
  - Make this part of your financial policy
  - Create a sign at checkin
  - Verify Signature on File form is in the chart
- Verify subscriber information
  - Policy ID
  - Correct relationship

Ins & Pers Collections
Day of Visit – checkin Copays

- Copay notes: they gave a note and sure to collect at Policy: Aetna HMO $15
  - Previous personal balance and credit
  - Expected Copay

- Personal Balance: $12.00
Ins & Pers Collections
Day of Visit – checkin Copays

- Does the parent want to know why they have a balance?

F4 Show Details gives you this:

<table>
<thead>
<tr>
<th>OUTSTANDING CHARGES</th>
<th>PRIMARY</th>
<th>PROV</th>
<th>AMOUNT</th>
<th>PERS DUE</th>
<th>INS DUE</th>
</tr>
</thead>
</table>
| 05/01/12 Flintstone, Pediatrics
Well Child 5-11 yrs | V20.2 | Case | 95.00 | 7.00 | 0.00 |
| 12/20/12 Flintstone, Dans
OV Expanded Focus | 372.30 | Davi | 79.00 | 15.00 | 44.00 |
| 12/20/12 Flintstone, Pediatrics
OV Expanded Focus | 372.30 | Davi | 79.00 | 15.00 | 44.00 |

TOTAL AMOUNT DUE
37.00 128.00

Ins & Pers Collections
Day of Visit – checkin Copays

- Make sure to collect the proper copay amount, sick vs. well
- HSA Accounts
  - Keeping credit card on file to use after EOBs are received
- Credits appear as a – instead of a CR as part of the balance

Ins & Pers Collections
Day of Visit – checkout

- Proper insurance configuration
- Checkout screens pre-set by visit reason
- SNAP codes
- Clean claims
- Account for all visits
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, i.e. 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

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

Insurance Collections
Post Visit – Claims Submission

- preptags
  - Bad Claims Report
    - Result from basic validation errors
    - Missing subscriber identifier, provider NPI
    - List claims not submitted by Partner

- Sample preptags Bad Claim Report Error

  Date: 07/16/12    PCC #: 12345
  Cus PCC #: 54321
  Guar PCC #: 54321
  Claim is for an insurance company no longer on the patient
  Charge filed with: UNITED HEALTHCARE BOX 749880 025
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

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

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
Insurance Collections
Post Visit – Follow Up Claim Submission Tools

Electronic Claim Responses in Correct Mistakes (oops)

Use the <F4> Insurance Status function key to access the claim responses (e.g. lines 4, 5, and 6)

Insurance Collections
Post Visit – Claim Submission

EDI Reports (ecsreports)

To learn more about EDI reports attend Justin’s Electronic Claims Submission Reporting class on Friday at 10:30am!
Insurance Collections
Post Visit – Payment Posting

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

What's ERA?
- Electronic Remittance Advice
- an Electronic EOB

What's EFT?
- Electronic Funds Transfer
- aka Direct Deposit

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!
Insurance Collections
Post Visit – Payment Posting autopip

• Sample ERA

<table>
<thead>
<tr>
<th>Name</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOB R. SMITH</td>
<td>(123) 555-6789</td>
</tr>
<tr>
<td>PATRICK W. JONES</td>
<td>(123) 456-7890</td>
</tr>
</tbody>
</table>

Payment Information:
Physician Services Company
345 Main Street, Suite 123
Anytown, USA 12345

Adjustment Reason: 05 - Change amount due to mistake or overpayment.

How does ERA benefit you?
• Standardization of presentation format/layout
  • All payors must use the HIPAA standard format and codesets, e.g. adjustment reasons
  • ERA is generally delivered more quickly than a paper/mailed EOB
  • ERA is required for automatic payment posting

Insurance Collections
Post Visit – Payment Posting autopip

• autopip is Partner's automatic insurance payment posting program
  • Why are you not using this program?
    • 50% of our you are not
  • autopip works in conjunction with pip
    • Yes, you'll still need to post some payments the old fashioned way.
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

<table>
<thead>
<tr>
<th>Appt</th>
<th>Payor</th>
<th>Check#</th>
<th>Check Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/07/09</td>
<td>HealthEast United</td>
<td>123456</td>
<td>75.99</td>
</tr>
<tr>
<td>07/08/09</td>
<td>HealthEast United</td>
<td>789012</td>
<td>98.56</td>
</tr>
<tr>
<td>07/09/09</td>
<td>HealthEast United</td>
<td>456789</td>
<td>12.34</td>
</tr>
<tr>
<td>07/10/09</td>
<td>HealthEast United</td>
<td>234567</td>
<td>11.11</td>
</tr>
<tr>
<td>07/11/09</td>
<td>HealthEast United</td>
<td>890123</td>
<td>13.13</td>
</tr>
</tbody>
</table>

Pediatric Software Just Got Smarter. Your Practice Just Got Healthier.
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

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

Insurance Collections
Post Visit – Payment Posting autopip

● Remittance Advice Remark Code (RARC) and Claims Adjustment Reason Code (CARC) Values
  - RARC Values
  - CARC Values
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

How do I get started with autoposting?

1. Register to receive ERA from Partner’s supported payors at http://www.pedsource.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 pip

- Posting insurance payments manually, aka pip
  - Payment/Adjustment types to track denials
  - CARC fields can be configured to appear
    - Using 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 – Corrections

- oops and oopsp
  - Correct insurance <F4>
  - Correct diagnoses <F5>
  - Correct billing provider <F5>
  - 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

Insurance Collections
Post Visit – Follow Up Partner Tools

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

Insurance Collections
Post Visit – F/U Partner Tools maketags

- ONLY for special circumstances
Insurance Collections
Post Visit – F/U Partner Tools inscoar

- Use to find insurance companies not paying timely

<table>
<thead>
<tr>
<th>Insurance Company Ageing Report - All Providers 09/21/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ins Group</td>
</tr>
<tr>
<td>-----------</td>
</tr>
<tr>
<td>Personal</td>
</tr>
<tr>
<td>Medicaid</td>
</tr>
<tr>
<td>Anthem Blue Cross</td>
</tr>
<tr>
<td>Aetna NC &amp; Electric</td>
</tr>
<tr>
<td>Aetna Open</td>
</tr>
<tr>
<td>BCBS</td>
</tr>
<tr>
<td>Capital Blue Cross</td>
</tr>
<tr>
<td>HealthAmerica</td>
</tr>
<tr>
<td>Keystone HealthPlan</td>
</tr>
<tr>
<td>HealthyKids</td>
</tr>
<tr>
<td>Private Insurance</td>
</tr>
<tr>
<td>Cigna</td>
</tr>
<tr>
<td>BlueCross BlueShield</td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>Percentage</td>
</tr>
</tbody>
</table>

- 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

INSOAR INTERACTIVE SCREEN
Use the F10 and PShift keys to scroll through this information.

TOTAL: $ 433.00
Insurance Collections
Post Visit – F/U Partner Tools srs

- Billing & Collections
  - Gross Collection Ratio Report

- Billing & Collections
  - Claim Error Report (preptags/Proxymed/Emdeon Claims)

- Allowables
  - allowedit
  - srs
    - Allowable Overpayments Report
      - by Payor Grp and Chk, Subtotal by Schedule
    - Allowable Underpayments Report
      - by Payor Grp and Chk, Subtotal by Schedule

- Attend the Optimizing Partner with Configuration theme to see how to setup your allowable / fee schedules and let Partner track under and over payments for you automatically!
Insurance Collections
Post Visit – F/U Partner Tools cfs

Check accounts with specific flags used for follow up your office may have created.

Insurance Collections
Post Visit – F/U

- Challenges:
  - Variety of plans covering your families
  - Coding requirements
    - usually made without notice
  - Ever-changing payer 'rules'
    - use a modifier, don't use a modifier
  - Claims submission address changes

Insurance Collections
Post Visit – F/U

- Division of work load
  - By carrier
  - By task
    - Claims submission
    - Payment posting
    - Follow up on denials
    - Follow up on unpaid claims
      - Denials, no responses
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

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

Insurance Collections
Post Visit – F/U Denials/Appeals

• For more on denials and appeals
  − Attend Donelle Holle's Denial & Appeal Strategies, Friday 2:45pm!
Personal Collections
Post Visit

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

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

Personal Collections
Post Visit – bills/ebills

ebills vs bills

- Look more professional
- Submit electronically
- Cost per bill
  - $.79366 first page
  - $.2235 each add’l page

- Plain printing, nothing fancy
- Print in your office
- Folding, stuffing, stamping, and time costs
- More control
Personal Collections
Post Visit - bills

Account billing notes and billing messages appear below the aging section.

Budget amount appears here if set in fame.

Personal Collections
Post Visit – ebills/RelayHealth

Personal Collections
Post Visit – Cycle Billing

- Sending out bills weekly instead of monthly
  - Personal payments come in all month
- Manual cycles
  - Breaking up bills by:
    - Alphabet range
    - Aging range
    - Zip code range
Personal Collections
Post Visit – Cycle Billing

• Partner Cycle Billing
  – Set your cycle to 28 / 30 days
  – Or any other number you like
  – Run bills weekly
  – Accounts get a bill if:
    • they have a new personal balance in the last 7 days
    • they have not received a bill for 28 / 30 days, based on what you set your cycle to in ed

Personal Collections
Post Visit – Billing

• Billing Messages
  – Available in ebills and bills
  – By billing aging category

Please choose which billing message you would like to work with:

1) The default message (used when one of the others does not exist)
2) The Normal Bills message
3) The Overdue 30 Day Bills message
4) The Overdue 40 Day Bills message
5) The Overdue 90 Day Bills message

Personal Collections
Post Visit – Billing: Posting Pers Pmts

ALWAYS link personal payments to specific charges!

What is on Page 2?
Personal Collections
Post Visit – Billing

- Account Billing Notes
  - Available in the Family Editor (fame)
  - Use cfS to track which accounts have account billing notes

- Researching previously sent bills
  - billlog
  - aka F8 in bills/ebills
Personal Collections
Post Visit – Billing billog

- Accounts Billed
  - See who received a bill
  - Includes the bill amount
  - View the actual bill sent using F1

<table>
<thead>
<tr>
<th>Name</th>
<th>Bill Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Archey, Jeremy</td>
<td>$147.00</td>
</tr>
<tr>
<td>Archey, Pamela</td>
<td>$877.00</td>
</tr>
<tr>
<td>Aordo, Nancy</td>
<td>$20.00</td>
</tr>
<tr>
<td>Aden, Scott L.</td>
<td>$52.00</td>
</tr>
<tr>
<td>Addington, Jeffrey</td>
<td>$207.00</td>
</tr>
</tbody>
</table>

- Accounts Not Billed
  - See who did not receive a bill
  - Includes why they did not receive one

<table>
<thead>
<tr>
<th>Account, Text</th>
<th>Total bal</th>
<th>Amount</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acher, Patricia</td>
<td>$0.00</td>
<td>$0.00</td>
<td>is not billable.</td>
</tr>
<tr>
<td>Aden, Monica</td>
<td>$0.00</td>
<td>$0.00</td>
<td>is not billable.</td>
</tr>
<tr>
<td>Adams, Mark</td>
<td>$0.00</td>
<td>$0.00</td>
<td>is not billable.</td>
</tr>
<tr>
<td>Adams, Christopher</td>
<td>$0.00</td>
<td>$0.00</td>
<td>is not billable.</td>
</tr>
<tr>
<td>Catalani, John</td>
<td>$49.99</td>
<td>$49.99</td>
<td>is not billable.</td>
</tr>
</tbody>
</table>

Personal Collections
Post Visit - persview

- Use your bills cut-off balance.
- Focus on one aged account at a time.
- You may wish to exclude/include by account flag.
- Personal Balance Range to include: $4.99 - $50000.99
- How to view the list: Account Name, Total Personal Acc.
Personal Collections
Post Visit - persview

Many function keys to help you review each account from one program.

Work With All is the quick way to send form letters and/or bills to all accounts on the list!

Personal Collections
Post Visit - persview

Use form letters to automatically add flags to each account on the list, as well as print a letter.

Print a bill for every account on the list.

Personal Collections
Post Visit – Payment Plans

- Setting up a payment plan
  - Create a form letter explaining their responsibilities
    - Have them sign it
    - Track when they sign the form
  - Update the Budget field in frame
  - Give them a flag so you can easily review the accounts on a payment plan to verify they are paying
Personal Collections
Post Visit – Payment Plans

Add the Budget Amt in fame and it appears on personal bills as the due field.

Last Services: 5/2/2012
Last Bill Sent: 5/2/2012
Last Pay Stmt: 5/20/2012
Bill Due: 5/31/2012
Budget Amt: $3,000

Personal Collections
Post Visit – Payment Plans

Print missed payment plan form letter easily.

Jump into oops as needed.

Access coll via fame to see parts.

Personal Collections
Post Visit - notify

- Notify allows you to send account balance information.
  - Hello this is Pediatric Associates calling. Our records indicate that your account is more than 60 days overdue. Please call our office at 800-722-1082 to arrange payment today. Thank you!
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, tat)

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

- When you receive a payment from the collection agency, do one of the following two options, then add a note in name.
  - 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 pm.

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

<table>
<thead>
<tr>
<th>DATE</th>
<th>PATIENT</th>
<th>PROCEDURE NAME</th>
<th>CODE</th>
<th>INSURANCE</th>
<th>CHARGES</th>
<th>AMOUNT</th>
<th>REMAIN</th>
<th>BRACKET</th>
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</thead>
<tbody>
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<td>93.00</td>
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<td>797.30</td>
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Find the charges

Hit F4 to pend to the new collection agency insco

Some Other Insurance allows you to choose any insurance company

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

Type in the numbers for the charges going to collection

Personal Collections

Post Visit – Collections: Adjust Charges

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Find the charges

Find the charges

Type in the numbers for the charges going to collection

Some Other Insurance allows you to choose any insurance company

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

Type in the numbers for the charges going to collection
Personal Collections
Post Visit – Collections: Adjust Charges

Now hit F1 to save and the charges will be pending collection.

- Use insaging and inscoar to review charges pending the “1. Collection” insurance company.
- Post payments using pip
  - Leave balance pending “1. Collection” or adjust off
- Update notes on the account in frame
  - Post a follow up to the original note

Personal Collections
Post Visit – Other Reports

- Smart Report Suite (srs)
  - Billing & Collections Reports
    - Accounts with Credit Balances
    - Collection Worksheet for Appointments
    - Copay Collection Ratio
    - Insurance Eligibility Report
    - Insurance Eligibility Report for Same Day Appts
Ins & Pers Collections
Review

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

Ins & Pers Collections
Review

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

Ins & Pers Collections
Review

- Post Visit Insurance
  - Claims submission
  - Posting payments / responses
  - Claims follow up
  - Claim submission tools and reports
Ins & Pers Collections
Review

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

Ins & Pers Collections
learn.pcc.com

• Click on Partner
  - Click on Insurance Billing

  - Click on Personal Billing
    - http://learn.pcc.com/Content/Partner/PersonalBilling/PersonalBillingIntro.htm