



Configure Your New Billing Tools in PCC EHR

Jack Roberts





Session Objective

Customize billing tools to make your job easier.





Update Practice Preferences

1. You can choose whether or not you want to allow the system to autopost reversals
2. Payment Type mapping will help differentiate between what was posted manually vs automatically.
3. You will be able to report on what was posted manually vs automatically.
4. This will help you diagnose an issue. Was the problem a human error vs autopost error.

Editing the Payment Type in the table

how this would look in the payment history.

Configuration	Window	Help
Auto-Notes		
Billing		
Clinical Alerts		
Diagnoses		
Documents		
Forms		
Growth Charts		
Immunizations		
Labs		
Patient Portal		
Patient Visit Summary		
Protocols		
Rooms		
Scheduling		
Summary of Care Record		
Tables		
Visit Statuses		
Practice Preferences		

Practice Preferences

Settings

Hours

Insurance Payments

☒ Autopost insurance payment reversals

Payment Type Mapping

ERA Autoposting Payment Type

Auto Ins. Payment

ERA Autoposting Adjustment Type

Auto Ins. Adjustment

ERA Autoposting Reversal Type

Insurance Takeback

Insurance Payments Tool Default Payment Type

Ins Pmt

Insurance Payments Tool Default Adjustment Type

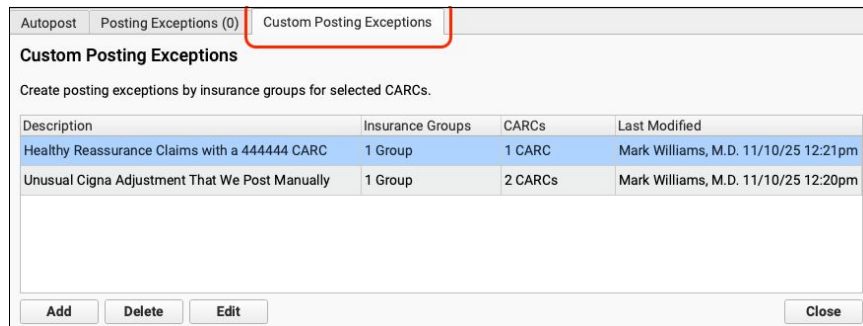
Ins Adj

PCC EHR will automatically post insurance reversals found on ERAs. If you wish to post takebacks manually instead, deselect this option.



Custom Posting Exceptions

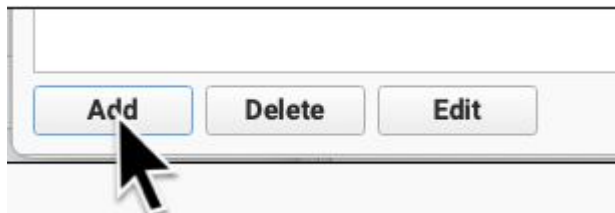
Navigate to the Custom posting exception tab in the ERA autoposting tool



Description	Insurance Groups	CARCs	Last Modified
Healthy Reassurance Claims with a 444444 CARC	1 Group	1 CARC	Mark Williams, M.D. 11/10/25 12:21pm
Unusual Cigna Adjustment That We Post Manually	1 Group	2 CARCs	Mark Williams, M.D. 11/10/25 12:20pm

Buttons: Add, Delete, Edit, Close

Click the Add button to create a new Custom Posting Exception



Give your custom posting exception a name

Description

Cigna Posting Exceptions

Insurance Groups:

Edit No Insurance Groups selected

CARCS:

Edit No CARCs selected

Select Edit for Insurance Groups to assign insurance groups

Insurance Groups

Insurance Groups

Select All **Select None** Search Filter:

Select	Insurance Groups
☐	Capital BCBS
☐	Capital Blue Cross
☒	Cigna
☐	Geisinger Health Plan
☐	Green Leaf Insurance

Cancel **Save**

Select Edit for CARCS to assign the CARC exceptions

CARCs

CARCs

Select All **Select None** Search Filter:

Select	Code	Description
☐	20	This injury/illness is covered by the liability carrier.
☐	21	This injury/illness is the liability of the no-fault carrier.
☒	22	This care may be covered by another payer per coordination of benefits.
☐	23	The impact of prior payer(s) adjudication including payments and/or adjustments.
☐	24	Charges are covered under a capitation agreement/managed care plan.

Cancel **Save**

When all the fields are populated click Save

Cancel **Save**



Custom posting exceptions will appear like this on a posted ERA.

EASTERDAY, MATTHEW PCC ID: 2155
 Payor Claim Control Number: 357159456 Ins ID: U09165718-03 Processed as Tertiary

Date	Procedure Code	Submitted (if diff)	Charge	Deductible	Copay/Coinsurance	Personal Other	Total Personal Due	Contractual Adjustment	Other Adjustment	Payment
03/30/26	99214	99215	87.00	0.00	15.00 3 PR	0.00	15.00	32.00 45 CO	0.00	40.00
03/30/26	A7003		8.00	0.00	0.00	0.00	0.00	8.00 16 CO	0.00	0.00
03/30/26	94640		35.00	0.00	0.00	0.00	0.00	15.00 45 CO	0.00	20.00
TOTALS:			130.00	0.00	15.00	0.00	15.00	55.00	0.00	60.00

Charge 100% Adjusted (A7003)
 CORE Business Scenario: Additional Information Required - Missing/Invalid/Incomplete Data from Submitted Claim (A7003)
Posting Exception: Procedure code not found in the charge history for this claim (CPT 99215)
Custom Posting Exception: Cigna 16 (CARC# 16) (CPT A7003)
 ▶ Key

You can filter to view the custom posting exceptions using the posting exception filter in a processed ERA

Posting Exceptions: Custom: Cigna 16

Special Cases:

- ☐ All Posting Exceptions
- ☐ Claim status "Denied" cannot be auto-posted
- ☒ Custom: Cigna 16
- ☐ Did not find a payment to reverse
- ☐ Did not find an adjustment to reverse
- ☐ Procedure code not found in the charge history for this claim

They also become available to review in the posting exception tab.

Electronic Remittance Advice

Autopost Posting Exceptions (31) Custom Posting Exceptions

Posting Exceptions

Posting Exceptions are payments that were not autoposted and need attention.

Search Filter:

Posting Exception Status	ERA Processed Date	Check Number	Remittance Date	Payor	Patient	Date of Service	Exception Reason	ERA By
Needs Attention	04/08/26 12:12PM	1234567890	04/03/26	Cigna PPO \$20	Easterday, Matthew	03/30/26	Custom: Cigna 16	PCC
Needs Attention	04/08/26 12:12PM	1234567890	04/03/26	Cigna PPO \$20	Flintstone, Pebbles	04/27/23	Procedure code not...	PCC
Needs Attention	04/08/26 12:12PM	1234567890	04/03/26	Cigna PPO \$20	Smerek, Lisa	03/22/26	Claim status ...	PCC
Payment Posted Manually	04/10/26 11:45AM	2colns	04/10/26	Cigna PPO \$15	Easterday, Matthew	04/02/26	Custom: ...	PCC

36 Posting Exceptions

Posting Exception Status: All Statuses

ERA Processed By: All Users

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Edit Charges Insurance Payments Close View Details





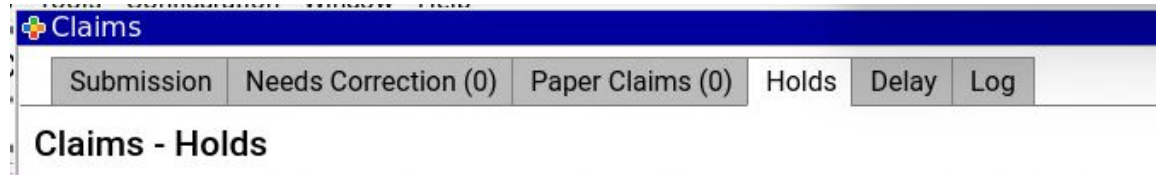
Claim Holds



Open the claims tool



Click on the Holds tab





This will show all the custom claim holds you have in your system

Claims

SubmissionNeeds Correction (0)Paper Claims (0)HoldsDelayLog

Claims - Holds

Claim holds prevent claims from being submitted to the payor. When a claim matches criteria in a claim hold, the claim will not be submitted. Once a claim hold is deleted, those claims can be submitted.

Claim Hold Details

Description:

Cigna Claim Hold - All Providers

Dates of Service:

01/21/23 - 01/20/34

Billing Providers:

All Providers

Places of Service:

All Places of Service

Insurance Plans:

7 Insurance Plans

Modified:

Michael Stein 06/05/26 10:22am

Claim Hold Index

Description	Dates of Service	Billing Providers	Places of Service	Insurance Plans	Modified
Cigna Claim Hold - All Providers	01/21/23 - 01/20/34	All Providers	All Places of Service	7 Insurance Plans	Michael Stein 06/05/26 10:22am

Add

Delete

Edit

Close



You can Add, Delete, or Edit your current claims holds.

When you click add you can see all the different criteria that can go into a claims hold rule.

Add **Delete** **Edit** **Close**

Claim - Add Hold

Description:

Dates of Service:

Start Date through End Date

Billing Providers:

Edit All Providers

Places of Service:

Edit All Places of Service

Insurance Plans:

Edit All Insurance Plans





This claim hold will show up in multiple places

In the claims tool when processing

Selected Batches:

Edit

All batches

Prepared Claims:

7 Claims prepared to submit

0 Claims prepared to route to paper

Claims That Will Not Be Submitted:

1 Claim held

0 Claims delayed

20 Claims need correction

In the claims tool log after processing

per Claims (0) Holds Delay Log

that were held, delayed, needed corrections, or routed to paper in addition to claims submit

User	Held	Delayed
PCC PCC	1	0

And in the billing history, claim history for this encounter

Claim History:

Date	Event	Insurance (PayorID)	Details	Claim ID	User
06/10/26 04:24pm	Claim Queued	Cigna (62308)	Charges posted		pcc
06/10/26 04:26pm	Claim Held	Cigna (62308)	DOS 06/10/26, Dr. Williams, New NE, Cigna PPO \$10		pcc

Billing History Index

Date	Provider of Service	Place of Service	Billing Status	Signed	Billing Account	Docs
06/10/26	Mark Williams, M.D.	Burlington Peds - New North End	Posted		Eric Wise (# 171)	



Personal Billing Fees



Navigate to Tools, Bills



Click on the Billing Fees tab





This is where you will toggle billing fees on and off and add the criteria for them

Bills

Electronic Bills | Paper Bills | Log | E-billing Messages | Paper Billing Messages | **Billing Fees**

Billing Fees

Billing Fees: ☐ On ☒ Off

Settings

Billing fee procedure to post:

Provider to post:

☐ Post billing fees for accounts with a budget amount set

Exclude By Account Flags

No Account Flags Excluded

Criteria

(Billing fees are posted for accounts that meet all the criteria.)

Accounts with a balance over

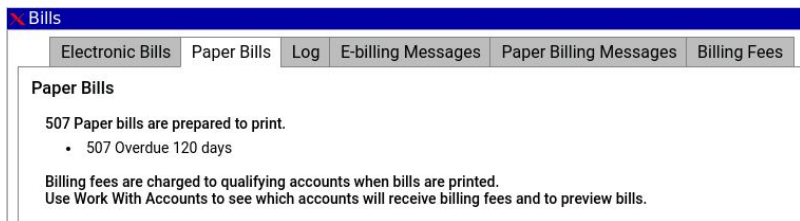
Accounts with a balance over days old

Accounts that received or more bills for the current charges with a balance

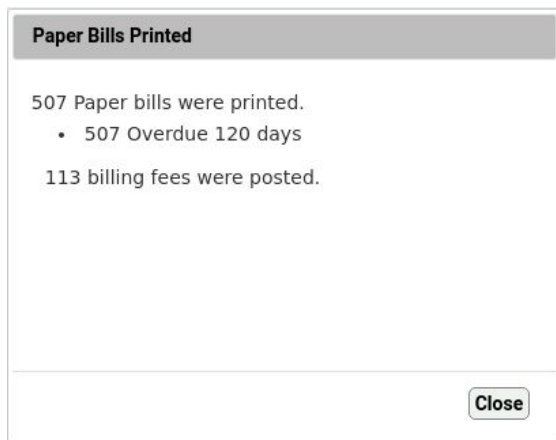
Accounts with the most recent billing fee posted over days ago



When the billing fees are on you
will be presented with this
message when you prepare bills.



When you print bills you will see
this message





If you choose work with accounts
you can see everyone who will
receive a billing fee.

Start Over

Work With Accounts

Close

Prepare Paper Bills

Paper Bills

Bills Last Submitted: 06/10/20

Account	Current	Overdue 30	Overdue 60	Overdue 90	Overdue 120+	Total	Billing Fee To Be Posted
Acord, Nancy	0.00	0.00	0.00	0.00	20.00	20.00	
Addington, Jeffrey	0.00	0.00	0.00	0.00	207.00	207.00	25.00
Albert, Janet	0.00	0.00	0.00	0.00	10.00	10.00	
Altland, David	0.00	0.00	0.00	0.00	76.00	76.00	
Alviani, Michael	0.00	0.00	0.00	0.00	293.00	293.00	
Anderson, Debra	15.98	15.98	0.00	1.80	43.20	76.96	25.00

You can then view the billing fee
information in the log

Log - Bill Run 06/12/26 9:53am

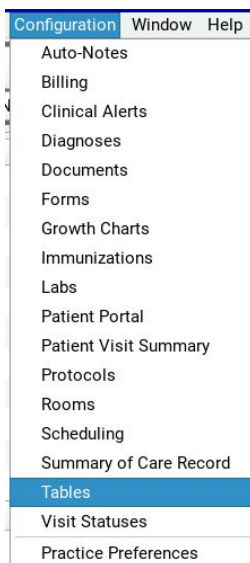
Aging: 120

Name	Account #	Billed Amount	Billing Fee
Nancy Acord	901	20.00	
Jeffrey Addington	1238	232.00	25.00
Janet Albert	987	10.00	
David Altland	700	76.00	
Michael Alviani	1740	293.00	
Debra Anderson	914	101.96	25.00

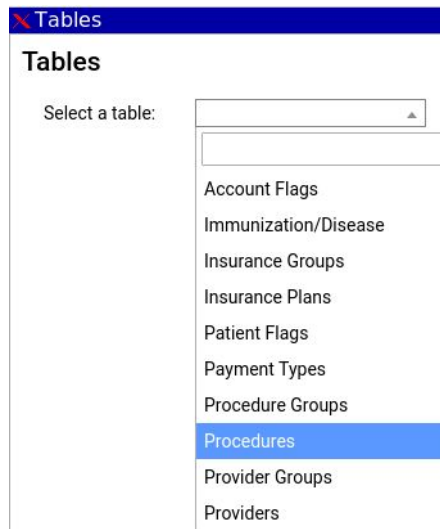


Table Configuration

Go to Configuration, Tables



Click the dropdown
and select a table



In the procedures table you will have button options in the lower right to help with configuration

Export History Add Clone Edit Back



When you export you will see more details in the export than in the regular table view

Procedure	Procedure Group	Type of Service	Accounting Type	Units	NDC	Dose	Dose Code (A)	Price (A)	Code (B)	Price (B)	Code (C)	Price (C)	Code (D)
Unclassified	Medical	Revenue	1			X		0X		0X		0X	
Other Fees	Medical	Revenue	1					0		0		0	
Office Visits	Pediatric	Revenue	1				99211	60	99211	55	99211	60	99211
Office Visits	Pediatric	Revenue	1				99212	80	99212	75	99212	80	99212
Office Visits	Pediatric	Revenue	1				99213	100	99213	95	99213	100	99213

Use the search filter to find all codes starting with 9921

Search Filter: 9921



Updating procedures has become much easier thanks to the save and next feature. Let's use updating pricing for sick visits as an example.

Starting at the top double click to edit the procedure.
Update the price and use duplicate Price to populate other schedules

Schedule Price

A:

Click Save + Next and work down the list of office visits.





Billing Configuration



Go to Configuration Billing



There are four tabs at the top the operate different parts of the billing configuration.





In Order Mapping list of all the orders in your system organized by order type will be available here. A search filter can be used to search for an order or find specific CPT/ICD10 that have been mapped.

Order Mapping			
Diagnosis Mapping		Default Procedures	ICD-10 Default Diagnoses
Order Mapping			
			Search Filter:
Order Type	Order Name	ICD-10 Billing Diagnosis	CPT Billing Procedure
Lab	Urine Drug Screen 9		
Lab	Vision Test Lab		
Lab	Vitamin D 25 Elab		
Lab	Vitamin D-25(OH)D		
Lab	WBA		
Lab	Wound C&S		
Medical Pro...	Aerochamber with ...		
Medical Pro...	Aerochamber witho...		
Medical Pro...	Anesthesia Skin		
Medical Pro...	Asthma action plan		



Order Mapping is used to have ICD-10 or CPT codes show automatically in the super bill. They link to orders in the EHR and when that order is used the mapped CPT/ICD-10 appear on the bill.

Order Mapping - Edit

Order Type: **Lab**

Order Name: **Hemoglobin (In Office)**

ICD-10 Billing Diagnoses

Z13.9 Encounter for screening, unspecified



☒ Preselect on Billing Screen

CPT Billing Procedures

85018 Hemoglobin

☒ Preselect on Billing Screen

36415 Finger Stick

☐ Preselect on Billing Screen

36415 Heel stick



☐ Preselect on Billing Screen

In this example of an in office Hemoglobin lab once this lab is ordered, a Z13.9 and a 85018 will appear on the bill checked off. The 36415 finger and heel stick will be available, but will not be auto selected.



Diagnosis Mapping is all about taking SNOMED which is clinical by nature and mapping these to ICD-10 which are billing by nature.

Billing Configuration

Order Mapping	Diagnosis Mapping	Default Procedures	ICD-10 Default Diagnoses
Diagnosis Mapping			
Search Filter: Search			
Favorite	Diagnosis	Alternate Description	ICD-10
✓	18 month examination normal		Z00.129 Encounter for routine child health examination with...
✓	Abdominal bruit		A42.1 Abdominal actinomycosis, R14.0 Abdominal distensi...
✓	Abdominal colic	Colicky abdominal pain, Sp...	R10.83 Colic
✓	Abdominal discomfort		R10.9 Unspecified abdominal pain
✓	Abdominal muscle pain		M79.18 Myalgia, other site
✓	Abdominal pain	AP - Abdominal pain	R10.9 Unspecified abdominal pain
✓	🔒 Abdominal pain in early pregnan...		R10.9 Unspecified abdominal pain, Z33.1 Pregnant state, in...
✓	🔒 Abdominal pain in pregnancy		R10.9 Unspecified abdominal pain, Z33.1 Pregnant state, in...
✓	🔒 Abdominal pregnancy		000.00 Abdominal pregnancy without intrauterine pregnancy



When editing these You will see a assisted mapping which is the EHR's suggested mapping for this SNOMED. You will also have the option to manually map to whichever ICD-10 you'd like.

Diagnosis Mapping - Edit

Diagnosis: **18 month examination normal**

ICD-10

☐ Assisted mapping (Source: National Library of Medicine)

♦ Z00.129 Encounter for routine child health examination without abnormal findings

☒ Manual mapping

Z00.129 Encounter for routine child health examination without abnormal findings

☒ Preselect

Z00.121 Encounter for routine child health examination with abnormal findings

☒ Preselect

There is a toggle to view either favorites or all diagnosis in the bottom right.

Display: ☐ All Diagnoses

☒ Favorites

Edit

Close

The preselect option will have it auto select these ICD-10 codes on the superbill.

Charted Diagnoses

☒ 18 month examination normal

Z00.129 Encounter for routine child health examination without abnormal findings

Z00.121 Encounter for routine child health examination with abnormal findings



Using Default Procedures and Default Diagnosis is a way to have certain codes here appear automatically on the super bill.

Add Procedures

Arrange Procedures

Est Patients	Est Pt Well Exams
99211 OV Minimal	Well Child (age auto-calculated)
99212 OV Problem Focused	New Pt Well Exams
99213 OV Expanded Focus	New Pt Well Child (age auto-calculated)
99214 OV Detailed H&E	Telemedicine A/V
99215 OV Comprehensive	99211-95 OV Minimal Min Realtime A/V
99050 OV After Hours Differential	99212-95 OV Problem Focused Realtime A/V
New Patients	99213-95 OV Expanded Focus Realtime A/V
99201 New Pt OV Minimal	99214-95 OV Detailed H&E Realtime A/V
99202 New Pt OV Problem Focus	99215-95 OV Comprehensive Realtime A/V
99203 New Pt OV Expanded Focused	Telemedicine Phone
99204 New Pt OV Detailed H&E	99441 Physician Telephone E&M (5-10 minutes)
99205 New Pt OV Highly Comprehensive	99442 Physician Telephone E&M (11-20 minutes)
Extended Visit Codes	99443 Physician Telephone E&M (21-30 minutes)
99354 OV Prolonged Service	Lactation
99354 OV Prolonged Service	12015 Lac Rep 7.6-12.5cm Face Ears Simple
Hospital Consults	12016 Lac Rep 12.6-20c Face Ears Simple
99232 IH Subs Care Expanded Focus	
99254 IH Initial Comp Consult	
Allergy Office Codes	

Add ICD-10 Diagnoses

Arrange ICD-10 Diagnoses

BMI
Z68.51 Body mass index [BMI] pediatric, less than 5th percentile for age
Z68.52 Body mass index [BMI] pediatric, 5th percentile to less than 85th percentile for age
Z68.53 Body mass index [BMI] pediatric, 85th percentile to less than 95th percentile for age
Z68.54 Body mass index [BMI] pediatric, 95th percentile for age to less than 120% of the 95th percentile for age
Test Diagnosis
H57.12 Ocular pain, left eye



Using Default Procedures and Default Diagnosis is a way to have certain codes here appear automatically on the super bill.

Additional Diagnoses
BMI
☐ Z68.51 Body mass index [BMI] pediatric, less than 5th percentile for age
☐ Z68.52 Body mass index [BMI] pediatric, 5th percentile to less than 85th percentile for age
☐ Z68.53 Body mass index [BMI] pediatric, 85th percentile to less than 95th percentile for age
☐ Z68.54 Body mass index [BMI] pediatric, 95th percentile for age to less than 120% of the 95th percentile for age
Test Diagnosis
☐ H57.12 Ocular pain, left eye
Other Billing Diagnoses
☐

Charted Procedures
Additional Procedures

Est Patients
☐ 99211 OV Minimal
☐ 99212 OV Problem Focused
☐ 99213 OV Expanded Focus
☐ 99214 OV Detailed H&E
☐ 99215 OV Comprehensive
☐ 99050 OV After Hours Differential
New Patients
☐ 99201 New Pt OV Minimal
☐ 99202 New Pt OV Problem Focus

Est Pt Well Exams
☐ 99392 Well Child 1-4 yrs
New Pt Well Exams
☐ 99382 New Pt Well Child 1-4 yrs
Telemedicine A/V
☐ 99211-95 OV Minimal Min Realtime A/V
☐ 99212-95 OV Problem Focused Realtime A/V
☐ 99213-95 OV Expanded Focus Realtime A/V
☐ 99214-95 OV Detailed H&E Realtime A/V
☐ 99215-95 OV Comprehensive Realtime A/V

Session Takeaways

1. You now have a better understanding of what the system can do to improve your workflow.
2. You can make these improvements in your own PCC system today.





**Please complete the course
survey in the UC App.**





Asking Questions:

Virtual attendees: Use the chat if you have a question that you want answered

In-person attendees: Go to the stationary microphone in your room.

CEUs:

You can request CEU codes for qualifying sessions using the form PCC shares out at the conclusion of the conference.

Do you have any questions?

