

Billing

Billing refers to the process of invoicing and charging for medical services provided to patients in their homes. It involves documenting the care, submitting claims to insurance companies and collecting payments for the services rendered by the caregiver to the patient.

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Manage Claims

The Manage Claims option includes data like Processed Claims, Rejected, Acknowledged and Transmitted claims in the system.

View Claim Status

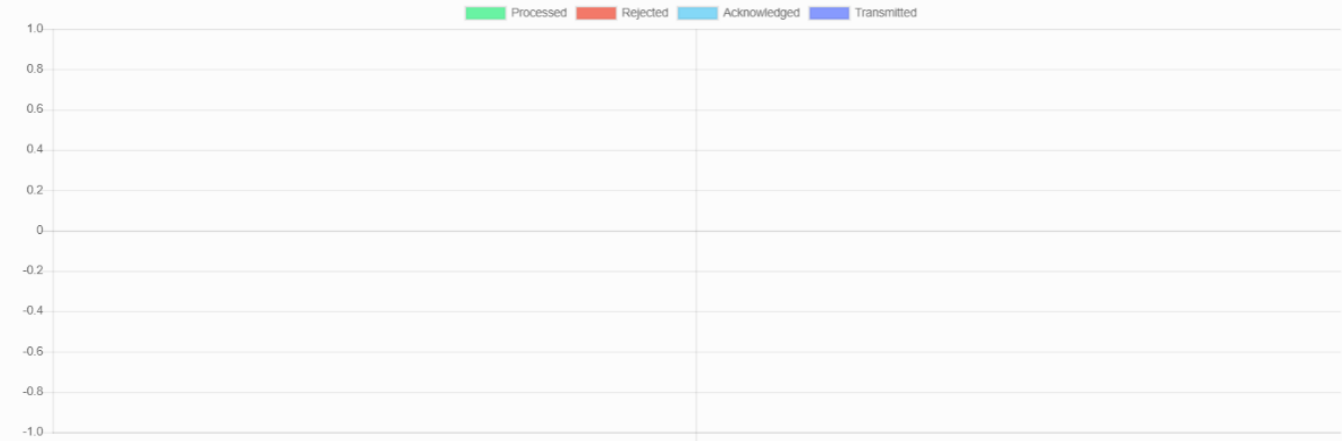
Billing >> Manage Claims



The user can view the claim status by using the option Manage Claims.



For searching the Batch Status, update the Batch ID, Patient Name, Payor, Start Date and End Date and click Search option.

MANAGE CLAIMS



| Batch ID | Patient Name | Payor | Insured ID | FDOS | Charges | Status | Action |
|--------------------------------------|---|---|--|---|---------|--------|--|
| <input type="text" value="BatchID"/> | <input type="text" value="Select Patient"/> ▼ | <input type="text" value="Select Payor"/> ▼ | <input type="text" value="Insured's ID Number"/> | <input type="text" value="Start Date"/>  <input type="text" value="End Date"/>  | | | <input type="button" value="Search"/> <input type="button" value="Reset"/> |

Billing Claims

Billing claims are formal documents submitted to insurance companies and seeking reimbursement for medical services delivered to patients in their homes. These claims detail the services provided, associated costs, and ensure proper compensation for home-based services.

Adding Batch for Billing

Billing >> Billing Claims

To bill the visits in the Timesheet, the user has to create Batches for the Timesheet and submit them to the insurance company for payment.



Click +Add Batch option on the top right side of the screen. Select the Batch Type as Initial Submission, Select the Payor, Service code, Start Date, End Date and Click Search option. Now a popup will appear with the details of the Timesheet, check the box and Click Create Batch option for adding a Batch.

Add Batch

| | | | |
|---|-------------------------------------|---|-----------------------------------|
| Batch Type Initial Submission ▼ | Payor United Healthcare ▼ | Service Code Personal Care - T1019 - HI ▼ | Client Name Client Name |
| Start Date 10/11/2023 | End Date 10/18/2023 | Search | Reset |

The Batch is created with initial submission. Now under Actions Click the Submit Claim option.

BILLING/CLAIMS BATCH 837 RELATED INFORMATION + Add Batch

Batch Type
Select Batch Type

Payor
Select Payor

Start Date
mm/dd/yyyy

End Date
mm/dd/yyyy

Comment
Comment

Client Name
Client Name

BatchID #
BatchID

Search

Reset

☐ Refresh All

| | Batch | Batch Summary | Line Items | Services Summary | Batch Status Summary | Sort by | ERA | Action |
|--------------------------|-------|---|-----------------------------|---|---|--------------------------------|------------------------|--------------|
| <input type="checkbox"/> | 50224 | Payor: → United Healthcare Description: → Initial Submission | Gathered: 1 Rolled Up: 1 | Billing Amount: \$13.70 Service Span: 06/02/2023-06/02/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: N/A Sent By: N/A | | Action |
| <input type="checkbox"/> | 50195 | Payor: → Straight Medicaid Description: → Initial Submission | Gathered: 1 Rolled Up: 1 | Billing Amount: \$900.00 Service Span: 01/09/2023-01/09/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: N/A Sent By: N/A | Download Overview File | Submit Claim |
| <input type="checkbox"/> | 50194 | Payor: → Straight Medicaid Description: → Initial Submission | Gathered: 1 Rolled Up: 1 | Billing Amount: \$450.00 Service Span: 01/02/2023-01/02/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: N/A Sent By: N/A | Billing Notes | |
| <input type="checkbox"/> | 50193 | Payor: → Straight Medicaid Description: → Initial Submission | Gathered: 1 Rolled Up: 1 | Billing Amount: \$900.00 Service Span: 01/16/2023-01/16/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: N/A Sent By: N/A | Mark As Sent | |

Once the Batch is submitted, a green color mark appears on the Batch number to indicate that the Batch is submitted.

BILLING/CLAIMS BATCH 837 RELATED INFORMATION + Add Batch

Batch Type
Select Batch Type

Payor
Select Payor

Start Date
mm/dd/yyyy

End Date
mm/dd/yyyy

Comment
Comment

Client Name
Client Name

BatchID #
BatchID

Search

Reset

☐ Refresh Sent

| | Batch | Batch Summary | Line Items | Services Summary | Batch Status Summary | Sort by | ERA | Action |
|--------------------------|-------|--|-----------------------------|---|---|--|-----|--------|
| <input type="checkbox"/> | 5015 | Payor: → Anthem Healthkeepers Description: → Initial Submission | Gathered: 1 Rolled Up: 1 | Billing Amount: \$103.32 Service Span: 12/01/2021-04/01/2022 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: 04/06/2022 Sent By: me-admin | | Action |
| <input type="checkbox"/> | 50130 | Payor: → Anthem Healthkeepers Description: → Initial Submission | Gathered: 1 Rolled Up: 1 | Billing Amount: \$0.00 Service Span: 02/01/2021-03/12/2021 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: 05/08/2021 Sent By: me-admin | | Action |
| <input type="checkbox"/> | 50127 | Payor: → Anthem Healthkeepers Description: → Initial Submission | Gathered: 2 Rolled Up: 2 | Billing Amount: \$0.00 Service Span: 10/01/2020-11/30/2020 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: 11/03/2020 Sent By: me-admin | | Action |
| <input type="checkbox"/> | 50125 | Payor: → United Healthcare Description: → Initial Submission | Gathered: 6 Rolled Up: 6 | Billing Amount: \$0.00 Service Span: 06/03/2020-10/28/2020 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: 10/03/2020 Sent By: me-admin | | Action |

Resubmission of Batches

Billing >> Billing Claims

For Resubmission of Claims follow these steps:

- Select the Batch by using the check box.
- Click Bulk Action - Mark As option in the screen.
- Select Replacement option.

BILLING/CLAIMS BATCH 837 RELATED INFORMATION + Add Batch

Batch Type:
 Payor:
 Start Date:
 End Date:
 Comment:
 Client Name:

BatchID #:
Search Reset

☐ Refresh

Prev 1 2 3 10 Next

| Batch | Batch Summary | Resend | ns | Services Summary | Batch Status Summary | Sort by | ERA | Action |
|--------|--|--------|-----------|---|---|---------|-----|--------|
| 110673 | Payor: → Molina Healthcare Description: → Replacement | Void | 2 p: 2 | Billing Amount: \$143.08 Service Span: 06/01/2023-06/04/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | | | Action |

Now click Add Batch option and Select the Batch Type as Adjustment (Void/Replace)Submission and update the Payor Name, Start Date, End Date and Click Search option.

Add Batch

Batch Type:
 Payor:
 Service Code:
 Client Name:

Start Date:
 End Date:
Search Reset

The following screen appears with the Line item. Select the line item and click create Batch option.

⬅ Add Batch

Batch Type:
 Comment:
 Create Patient Wise Batches: ☐
Create Batch

Note*: Please select claims to create a new batch.
Total Selected : Claims 1 , Amount : 606.55, Line Items : 5

| <input checked="" type="checkbox"/> | Patient | Account # | Medicaid # | Date of Birth | Total Line Items | Total Amount | Action |
|-------------------------------------|---------|-----------|------------|---------------|------------------|--------------|--------|
| | | | | | | | |

The Batch has been created for Adjustment (Void / Replace)Submission. Select the check box and click Submit claim option.

☐ Refresh

« Prev 1 2 3 4 Next »

| Batch | Batch Summary | Line Items | Services Summary | Batch Status Summary | Sort by | ERA | Action |
|-------|---|-----------------------------|---|---|--------------------------------|-----|--------|
| 21041 | Payor: → Optima Health Community Care Description: → Adjustment(Void/Replace) Submission | Gathered: 5 Rolled Up: 5 | Billing Amount: \$606.55 Service Span: 08/31/2023-09/11/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: N/A Sent By: N/A | | Action |

☐ Refresh

« Prev 1 2 3 4 Next »

| Batch | Batch Summary | Download Overview File | Line Items | Services Summary | Batch Status Summary | Sort by | ERA | Action |
|-------|--|--|-----------------------------|---|---|--------------------------------|-----|--------|
| 21041 | Payor: → Optima Health Community Care Description: → Submit Claim | <input type="button" value="Generate 837i"/> | Gathered: 5 Rolled Up: 5 | Billing Amount: \$606.55 Service Span: 08/31/2023-09/11/2023 | Allowed Amt: \$0.00 Paid Amt: \$0.00 | Sent Date: N/A Sent By: N/A | | Action |

Reconcile Payments / ERA, Reconcile 835/ EOB and EDI File Log

Reconcile Payments / ERA

Reconcile payments refers to the process of comparing received payments from insurance providers and patients against the billed charges for services provided. This ensures accuracy, identifies discrepancies, and helps resolve outstanding balances, contributing to the financial stability of the home health care agency. Electronic Remittance Advice, which is an electronic document that provides detailed information about payment and denial of claims.

Get Latest ERA

Billing >> Reconcile Payments / ERA

Click the option Latest ERA. The following screen appears, click Get Latest ERA option. The latest ERA details will be displayed on the screen.

LATEST ERA GET LATEST ERA AND PROCESS INFORMATION

Payor

Select Payor

Check / ETF Number

CheckNumber

ERA ID

ERA

Paid Start Date

Start Date

Paid End Date

End Date

Received Start Date

Start Date

Received End Date

End Date

Q Search

✕ Reset

Get Latest ERA

Get Latest & Process ALL ERA

| Payor Name | ERA ID | Paid Amount | Paid Date | Check Number | Received Time | Status | Batch #s Mapped | Action |
|------------|--------|-------------|-----------|--------------|---------------|--------|-----------------|--------|
|------------|--------|-------------|-----------|--------------|---------------|--------|-----------------|--------|

Reconcile 835/ EOB

Reconcile 835/ EOB helps home healthcare providers to verify that payments and denials on the EOB are consistent with the ERA, ensuring accurate financial management and claims processing.

Billing >> Reconcile 835/EOB

Update the required fields and click Search option. The details will appear on the screen with Patient name and Billed amount.

RECONCILE 835 / EOB RECONCILE 835 / EOB RELATED INFORMATION All Filters

| | | | | | |
|---|---|----------------------------------|--|-------------------------------------|--|
| Payer All | Batch # Batch Number | Claim # Claim Number | Payer Claim # Payer Claim Number | Client boyd, carrie | Service Code T1019 |
| Modifier All | Claim Status All | Payer Claim Status All | Service Start Date mm/dd/yy | Service End Date mm/dd/yy | Denial / Adjustment Code All |
| Reconcile Record Type Sent Only, w/ 835 Process | Upload 835 File Search uploaded 835 files | | Search | Reset | Group Code All |

EDI File Log

An EDI (Electronic Data Interchange) file log is a record of digital interactions between healthcare providers, payers, and agencies. It tracks the exchange of patient data, claims, and billing information, ensuring compliance with industry standards and facilitating efficient communication for better patient care and reimbursement.

Billing >> EDI File Log

The list of EDI File logs information is displayed in the screen. Enter the File Name, File type and click Search option to view the required EDI File.

EDI FILE LOGS LIST EDI FILE LOGS INFORMATION

☐ Refresh

| Batch | File Name | File Type | File Size | Added By | Added Date | Action |
|----------------------------|--|--|-----------|----------|------------|--|
| | <input type="text" value="File Name"/> | <input type="text" value="File Type"/> | | | | <input type="button" value="Search"/> <input type="button" value="Reset"/> |
| <input type="checkbox"/> 2 | Aetna_09082019_09182019_IS_2.txt | 837 | 0.94 KB | N/A | 09/17/2019 | <input type="button" value="Delete"/> |
| <input type="checkbox"/> 1 | Aetna_09082019_09182019_IS_1.txt | 837 | 0.94 KB | N/A | 09/17/2019 | <input type="button" value="Delete"/> |