

PATIENT BILLING AND COLLECTIONS

PART III: THE PATIENT PROCESSING SCREEN



PATIENT CHECK-IN

A critical step in the patient billing process is the checking-in of the patient at the time of service. This is when Systems4PT will alert you to balances due by the patient. Collecting this money at the time of service will save you time and money trying to chase down payment at a later date and will improve your cash flow.

THE PAYMENT PROCESSING SCREEN

Patient Processing Screen (PPS)

NOTE: Date: 3/22/2006

Front Desk

Visits used of authorized.

NO PRIMARY PAYOR SELECTED

DOB: 5/5/1955 ACT: 1008

Double Click on a Patient Share/selfpay record above to enter an adjustment -- You CANNOT change treatment charges or any transaction entered in billing.

Trans	Treat	#	Charge	Pay/Adj	Revenue File	Comments	Type	RsnCde	PayorCde

Registration Comments (read-only)

TYPE	CO-PAY	OTHER	Self Pay (including deductibles and co-insurance)			TOTAL
			TMNT CHARGE	PAY/ADJ	NET	
BEG BAL	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NET FOR TODAY	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00
ENTER PYMNT						\$0.00
NEW BAL	\$0.00	\$0.00			\$0.00	\$0.00

DEBIT CARD
 CASH
 CHECK
 CREDIT CARD
 INVOICE

WillPay (date): Auth Code./Check No.:

Notes:

Process

Esc to Return

Box #1

Box #2

Box #3

Box #4

Box #5

Box #6

When the patient arrives at your office, you will double-click on their name on the Patient Scheduling Screen. This will take you to the Patient Processing Screen (PPS). If you have entered a co-pay amount in the V & A screen during registration, a pop-up box will appear asking if you want to apply the primary co-pay. Select “OK” and you will be taken to the PPS. The patient’s co-pay for today’s date of service, for their primary insurance, will be added to the Patient Processing Screen allowing you to collect the most up-to-date balance due.

For this guide, we are only going to discuss the information and processing of boxes 3, 4, and 6. *Multi-server clinics have a slightly different process for accessing the information, but you will still be looking for and interpreting the information in the same way.*

STEP 1:

First review all notes in Box 3 and Box 6.

Box 3: These are notes that you entered in the “Comments” box on the Patient Registration Screen. You want to review these notes as they may be pertinent to the amount you will be collecting from the patient. Possible relevant comments might be “Payment Plan in effect, collect \$50 per visit”, “Patient’s secondary insurance will cover primary insurance co-pay”, or “Patient has a \$1500 deductible. Collect \$___ for the first ___ visits.”.

<p>Registration Comments (read-only) Patient has 20% co-insurance. Collect \$20 estimate every visit. Patient has high deductible plan. Collect \$75 every visit.</p>
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Box 6: This is any information that you want to be referenced every time the account is processed. This information cannot be accessed anywhere else in the System and will remain in this box until it is manually removed. You may want to copy a note from Box 3 into this box to be sure that it is seen. The same type of comments that are used as examples in Box 3, are also appropriate to be documented here. Other comments might be “Patient expected to meet OOP maximum in 2 weeks. Check payor website before collecting on <date>”, “Patient is a minor, parent permission and credit card is on file, bill cc at time of service”, etc.

	<input type="radio"/> DEBIT CARD <input type="radio"/> CASH <input type="radio"/> CHECK <input type="radio"/> CREDIT CARD <input type="radio"/> INVOICE				
Will Pay (date):	<input type="text"/>	Auth Code./Check No.:			<input type="text"/>
Notes:	Patient is a minor. Parent permission and CC on file. Charge CC at time of service.				

STEP II:

Review all the information appearing in box 4.

Box 4: This box shows you the total amount due from the patient and this is where you will post payments received from the patient. **Before collecting from the patient and finalizing this screen, review both the left and center grids and collect the Total Due from the last column on the far right.**

Ideally, your PPS will look like this, and you will collect the patient co-pay and post the payment.

TYPE	CO-PAY	OTHER	Self Pay (including deductibles and co-insurance)			TOTAL
			TMNT CHARGE	PAY/ADJ	NET	
BEG BAL	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NET FOR TODAY	\$50.00	\$0.00		\$0.00	\$0.00	\$50.00
ENTER PYMNT						\$0.00
NEW BAL	\$50.00	\$0.00			\$0.00	\$50.00

If the patient has a deductible or co-insurance, you may see a PPS that looks like this. These numbers will not populate this screen until FOCUS Collections, Systems4PT's in-house fully integrated billing and collection service has received an ERA/EOB and posted the payment.

TYPE	CO-PAY	OTHER	Self Pay (including deductibles and co-insurance)			TOTAL
			TMNT CHARGE	PAY/ADJ	NET	
BEG BAL	\$0.00	\$0.00	\$210.07	\$0.00	\$210.07	\$210.07
NET FOR TODAY	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00
ENTER PYMNT						\$0.00
NEW BAL	\$0.00	\$0.00			\$210.07	\$210.07

If you are not sure what the amount due is referring to, go to the Patient Account Detail (PAD) screen under your FOCUS menu. In this example, you will be able to see that the first 2 dates of service were applied to the patient's deductible. When FOCUS posted the payment, they rolled the amount due to the patient side and provided the reason code. You want to collect this now, while the patient is standing in front of you, and not have to chase it down later with costly monthly billings.

Patient Account Detail

DOS	Net Charges	Payments	Adjustments	Balance	Reserve	DOS	CpyChgs	CpyPymts	Net Charges	Payments	Adjustments	Balance	ReasonCodeDescr
1/25/2023	3.52	0.00	3.52	0.00	0.00	1/25/2023	0.0000	0.0000	125.35	0.00	0.00	125.35	Deductible not Met
1/30/2023	3.44	0.00	3.44	0.00	0.00	1/30/2023	0.0000	0.0000	84.72	0.00	0.00	84.72	Deductible not Met
2/2/2023	88.16	0.00	0.00	88.16	0.00								
2/6/2023	88.16	0.00	0.00	88.16	0.00								
2/9/2023	88.16	0.00	0.00	88.16	0.00								
2/13/2023	88.16	0.00	0.00	88.16	0.00								

In the two scenarios above, be sure you post the payments in the correct place. If the balance due is a co-pay, post the amount in the left-hand column under co-pay. If the balance due is a deductible, co-insurance, or self-pay amount, post it in the center column under PAY/ADJ. If the patient has a balance due in each column, post the correct portion of the payment in each column and the TOTAL column will reflect the amount of the full payment.

Sometimes you will see an unexpected amount due. This most likely indicates that a payment received from the payor did not process as expected from the data you entered in the patient V & A screen. Go to the PAD screen in the FOCUS menu. FOCUS must post the payments as they are stated in the ERA/EOB. In this example, the total adjusted charge for the patient's second date of service is less than the patient's co-pay. FOCUS posts the ERA adjusting the co-pay to the allowed charge resulting in a patient credit of \$4.35 since they paid the full \$60 at the time of service. On today's visit, you would only collect \$55.65 to bring the patient's balance to \$0 and avoid having to issue a check to the patient for the credit amount.

TYPE	CO-PAY	OTHER	Self Pay (including deductibles and co-insurance)			TOTAL
			TMNT CHARGE	PAY/ADJ	NET	
BEG BAL	\$60.00	\$0.00				\$60.00
NET FOR TODAY	-\$4.35	\$0.00	\$0.00	\$0.00	\$0.00	-\$4.35
ENTER PYMNT						\$0.00
NEW BAL	\$55.65	\$0.00			\$0.00	\$55.65

Patient Account Detail

DO5	Net Charges	Payments	Adjustments	Balance	Reserve	DO5	CpyChgs	CpyPymts	Net Charges	Payments	Adjustments	Balance	ReasonCodeDescr
1/20/2023	111.54	81.26	30.28	0.00	0.00	1/20/2023	60.0000	60.0000	0.00	0.00	0.00	0.00	Copay charge and payment
1/26/2023	12.87	0.00	12.87	0.00	0.00	1/26/2023	55.6500	60.0000	0.00	0.00	0.00	-4.35	Copay charge and payment
2/1/2023	38.48	20.23	18.25	0.00	0.00	2/1/2023	60.0000	60.0000	0.00	0.00	0.00	0.00	Copay charge and payment
2/8/2023	38.48	20.23	18.25	0.00	0.00	2/8/2023	60.0000	60.0000	0.00	0.00	0.00	0.00	Copay charge and payment
2/15/2023	68.44	0.00	0.00	68.44	0.00	2/15/2023	60.0000	0.0000	0.00	0.00	0.00	60.00	Copay charge

The PPS screen may be the first red flag for you that the payor is not processing the claims correctly, or according to the benefits you were quoted. If you see a balance due in the co-pay column and you were not expecting the patient to have a co-pay, this is your alert to re-verify the patient benefits. If they were misquoted to you the first time and the patient does have a co-pay, go back and adjust the V & A screen. If upon re-verification you find that the patient does not have a co-pay and the claims are processing incorrectly, send a message through the FRS, built-in messaging system, to your FOCUS representative and they will pursue having the claims re-processed. Be sure to let your FOCUS rep know whom you spoke with, when, and what the call reference number was for the benefit re-verification. **Verifying benefits and entering the correct information in the V & A screen is the clinic's responsibility.** Discrepancies you might be alerted to by the PPS screen are incorrect co-pay amounts, unexpected deductibles or co-insurance, or having met an OOP max.

You can have balances due in both the co-pay and the self-pay columns of the PPS. You must look at all three columns and collect the "NEW BAL" from the TOTAL right-hand column.

TYPE	CO-PAY	OTHER	Self Pay (including deductibles and co-insurance)			TOTAL
			TMNT CHARGE	PAY/ADJ	NET	
BEG BAL	-\$15.00	\$0.00	\$337.31	\$322.31	\$15.00	\$0.00
NET FOR TODAY	\$30.00	\$0.00		\$0.00	\$0.00	\$30.00
ENTER PYMNT						\$0.00
NEW BAL	\$15.00	\$0.00			\$15.00	\$30.00

What you don't ever want to see is the scenario below. No one was collecting co-pays! If you look at the PAD screen, you will see the co-pays account for greater than 50% of the payment for your time and service! Were your treatments worth \$627.06 or \$307.06? Can your business survive on \$307.06 instead of \$627.06? The best time to collect this money is while the patient is present in your clinic. The longer this money is outstanding, the more costly it is to pursue collection and the less likely it is to be collected.

TYPE	CO-PAY	OTHER	Self Pay (including deductibles and co-insurance)			TOTAL
			TMNT CHARGE	PAY/ADJ	NET	
BEG BAL	\$280.00	\$0.00				\$280.00
NET FOR TODAY	\$40.00	\$0.00	\$0.00	\$0.00	\$0.00	\$40.00
ENTER PYMNT						\$0.00
NEW BAL	\$320.00	\$0.00			\$0.00	\$320.00

Patient Account Detail

DOS	Net Charges	Payments	Adjustments	Balance	Reserve	DOS	CpyChgs	CpyPymts	Net Charges	Payments	Adjustments	Balance	ReasonCodeDescr
1/23/2023	159.11	111.81	47.30	0.00	0.00	1/23/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
1/27/2023	68.48	39.05	29.43	0.00	0.00	1/27/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
1/30/2023	68.48	39.05	29.43	0.00	0.00	1/30/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
2/2/2023	68.48	0.00	0.00	68.48	0.00	2/2/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
2/6/2023	68.48	39.05	29.43	0.00	0.00	2/6/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
2/9/2023	68.48	39.05	29.43	0.00	0.00	2/9/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
2/15/2023	68.48	39.05	29.43	0.00	0.00	2/15/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
2/20/2023	-40.00	0.00	0.00	-40.00	0.00	2/20/2023	40.0000	0.0000	0.00	0.00	0.00	40.00	Copay charge
<div style="display: flex; justify-content: space-between;"> 529.99 307.06 194.45 28.48 0.00 </div>						<div style="display: flex; justify-content: space-between;"> 320.00 0.00 0.00 0.00 0.00 320.00 </div>							

Don't be afraid to ask the patient for payment, based on the Patient Payment Screen, while they are present in your clinic. Everyone in your clinic has worked very hard to provide the best possible care to the patient. You have earned this money. The patient should know their benefits and know that they are responsible for these charges. Collecting the patient payment now will save you a tremendous amount of time, effort, and cost required for the next step in the Patient Payment Process, Invoicing.

At Systems4PT we provide an ALL USA BASED team that gets you PAID MORE, PAID FASTER, that COSTS LESS, and we only get paid AFTER you get paid!