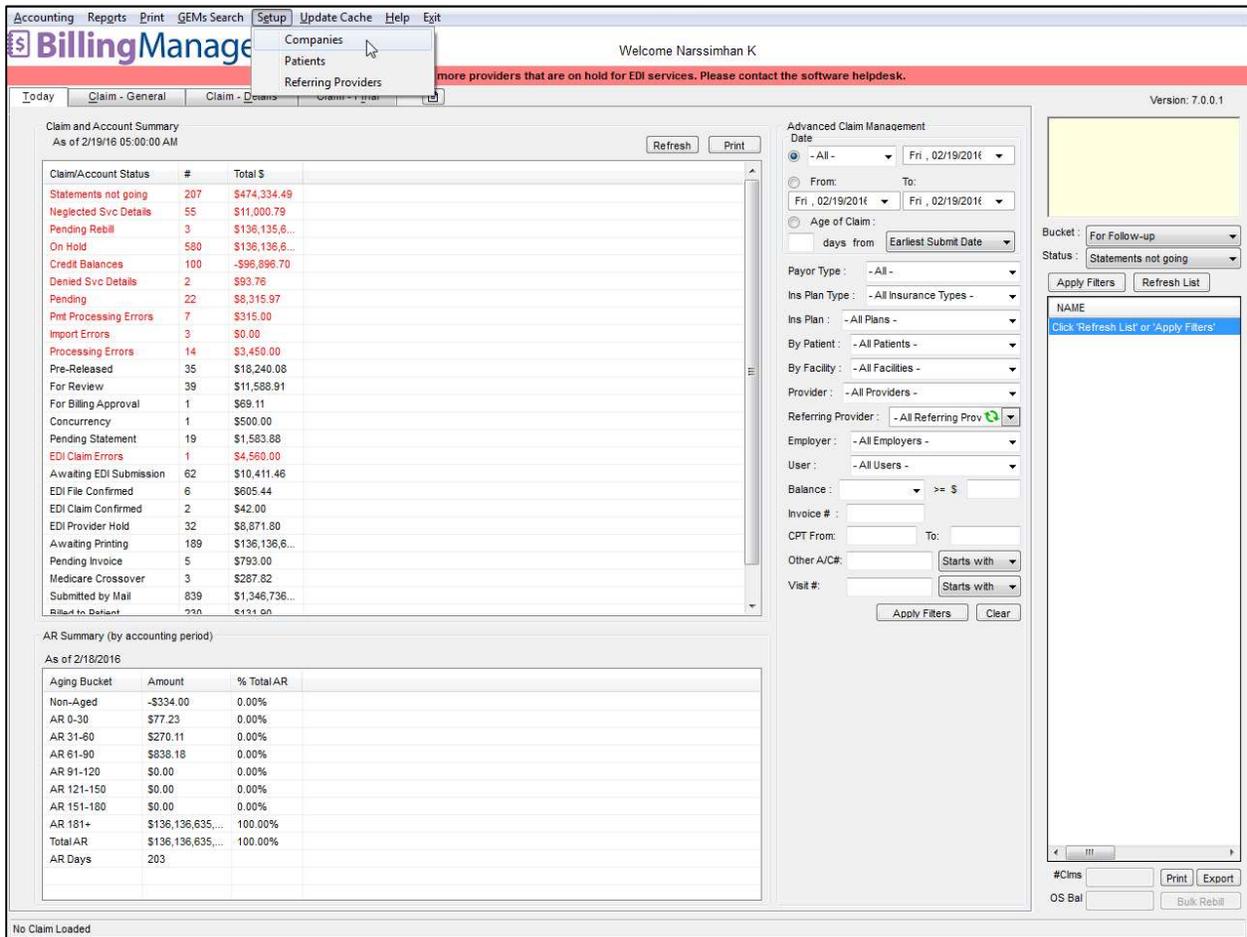


# Billing Manager Setup

## To set up and record Company Info

This is a simple database which allows you to record general information about the company, and record Industrial account information. Using this option, you can add a new client record or edit an existing record.

1. Navigate through the **Setup** tab, and click **Companies** as shown below.



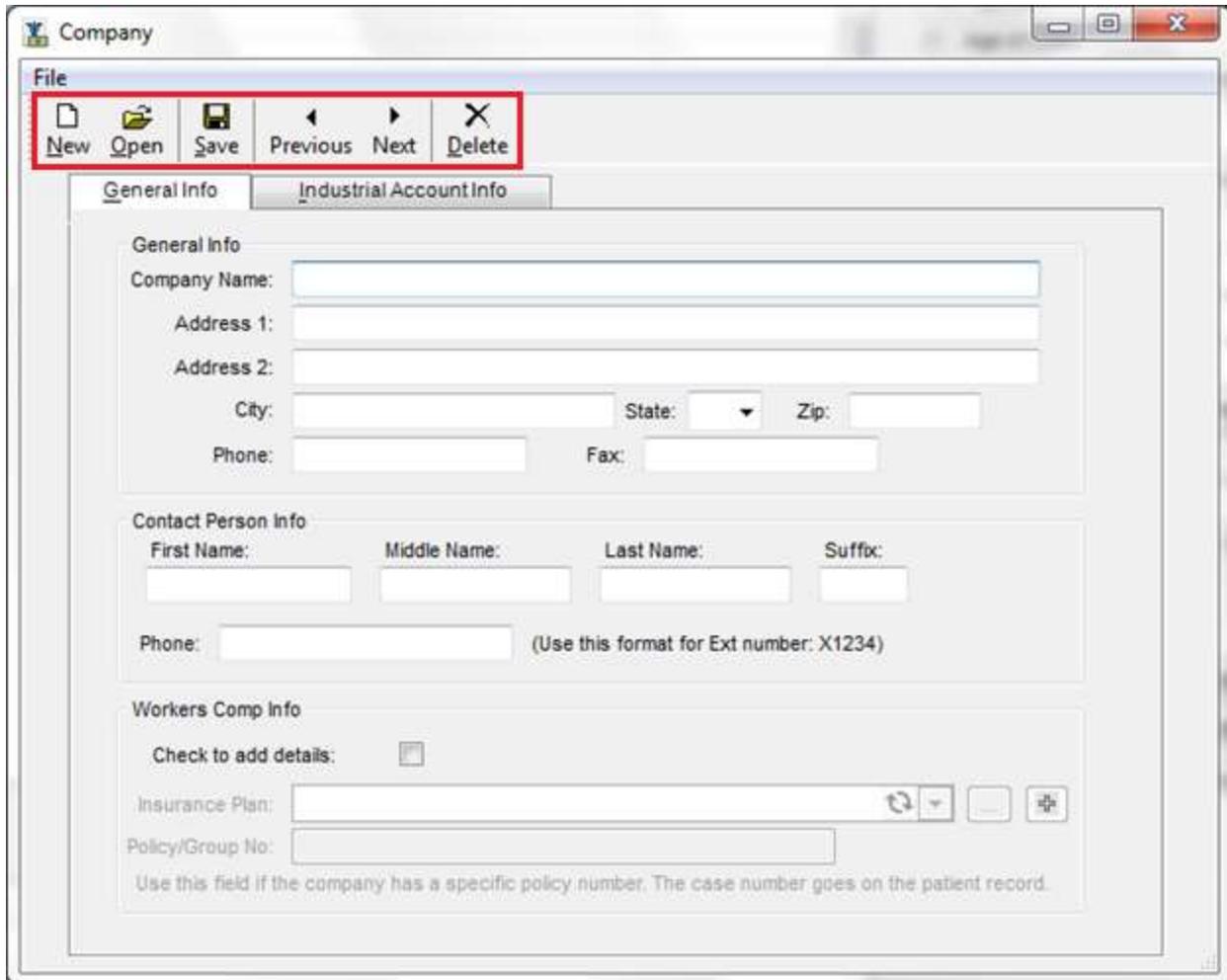
The screenshot shows the Billing Manager software interface. The 'Setup' menu is open, highlighting 'Companies'. The main window displays a 'Claim and Account Summary' table, an 'AR Summary' table, and an 'Advanced Claim Management' panel with various filters and controls.

Claim/Account Status	#	Total \$
Statements not going	207	\$474,334.49
Neglected Svc Details	55	\$11,000.79
Pending Rebill	3	\$136,136.6...
On Hold	590	\$136,136.6...
Credit Balances	100	-\$96,896.70
Denied Svc Details	2	\$93.76
Pending	22	\$8,315.97
Pmt Processing Errors	7	\$315.00
Import Errors	3	\$0.00
Processing Errors	14	\$3,450.00
Pre-Released	35	\$18,240.08
For Review	39	\$11,588.91
For Billing Approval	1	\$69.11
Concurrency	1	\$500.00
Pending Statement	19	\$1,583.88
EDI Claim Errors	1	\$4,560.00
Awaiting EDI Submission	62	\$10,411.46
EDI File Confirmed	6	\$605.44
EDI Claim Confirmed	2	\$42.00
EDI Provider Hold	32	\$8,871.80
Awaiting Printing	189	\$136,136.6...
Pending Invoice	5	\$793.00
Medicare Crossover	3	\$287.82
Submitted by Mail	839	\$1,346,736...
Billed to Patient	730	\$121.00

Aging Bucket	Amount	% Total AR
Non-Aged	-\$334.00	0.00%
AR 0-30	\$77.23	0.00%
AR 31-60	\$270.11	0.00%
AR 61-90	\$838.18	0.00%
AR 91-120	\$0.00	0.00%
AR 121-150	\$0.00	0.00%
AR 151-180	\$0.00	0.00%
AR 181+	\$136,136,635,...	100.00%
Total AR	\$136,136,635,...	100.00%
AR Days	203	

2. The **Company** dialog box is displayed as shown below.



The highlighted tabs are the common tabs applicable to both **General Info** and the **Industrial Account Info**.

Field	Description
New	Click <b>New</b> to record details of a new company
Open	Click <b>Open</b> to access the details of the existing company. Click <b>Open</b> and select the required company and click <b>OK</b> .
Save	Click <b>Save</b> to save the details of the company information entered.

Previous	Click <b>Previous</b> to access the previously accessed company information.
Next	Click <b>Next</b> to access the previously accessed company information.
Delete	Click <b>Delete</b> to permanently remove the details of a company.

## To set up and record a New Company

**General Info** tab is displayed by default. The following are the sections available under this tab:

1. General Info
2. Contact Person Info
3. Workers Comp Info

General Info    Industrial Account Info

---

**General Info**

Company Name:

Address 1:

Address 2:

City:     State:     Zip:

Phone:     Fax:

---

**Contact Person Info**

First Name:     Middle Name:     Last Name:     Suffix:

Phone:  (Use this format for Ext number: X1234)

---

**Workers Comp Info**

Check to add details:

Insurance Plan:

Policy/Group No:

Use this field if the company has a specific policy number. The case number goes on the patient record.

## General Info

**General Info**

Company Name:

Address 1:

Address 2:

City:  State:  Zip:

Phone:  Fax:

Field	Description
Company Name	Enter/Type the name of the company in the provided text box.
Address 1	Enter/Type the first line of the company address.
Address 2	Enter/Type the second line of the company address.
City	Enter/Type the name of the city where the company is located.
State	Select the state where the company is located from the provided drop down menu.
Zip	Enter/Type the company's zip code.
Phone	Enter/Type the company's phone number.
Fax	Enter/Type the company's fax number.

## Contact Person Info

Contact Person Info

First Name: 
 Middle Name: 
 Last Name: 
 Suffix:

Phone:  (Use this format for Ext number: X1234)

Field	Description
First Name	Enter/Type the first name of the person representing the company in the provided text box.
Middle Name	Enter/Type the middle name of the person representing the company.
Last Name	Enter/Type the last name of the person representing the company.
Suffix	Enter/Type additional information about the person, like letters that indicate the position held by the individual, or educational degree, accreditation, office, or honour.
Phone	Enter/Type the phone number of the person representing the company. The format for entering the extension number is X1234.

## Workers Comp Info

The details in this section can be entered only when the **Check to add details** feature is checked. When this feature is unchecked, the subsequent tabs are greyed out.

Workers Comp Info

Check to add details:

Insurance Plan:     

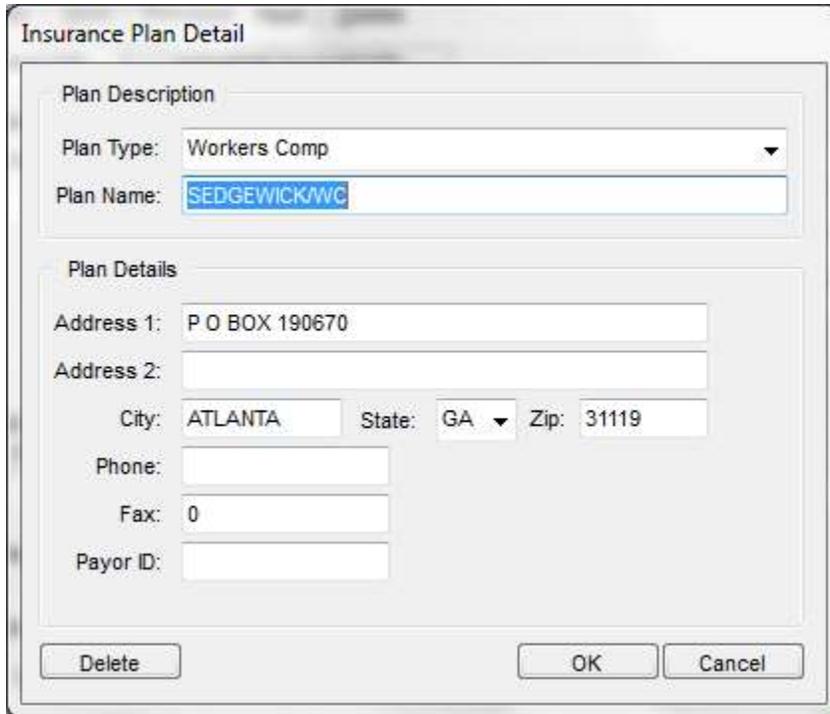
Policy/Group No:

Use this field if the company has a specific policy number. The case number goes on the patient record.

1. Select the required Insurance Plan from the drop down menu.
2. Enter/Type the Policy/Group number.

To Search for the required plan

1. Click .
2. The following **Insurance Plan Detail** dialogue box is displayed:



The two sections available in the **Insurance Plan Detail** dialogue box are:

- Plan Description
- Plan Details

#### *Plan Description*

Field	Description
Plan Type	Select the plan type from the drop down menu. By default <b>Workers Comp</b> is the only plan type available.
Plan Name	Enter/Type the name of the plan in the text box available.

#### *Plan Details*

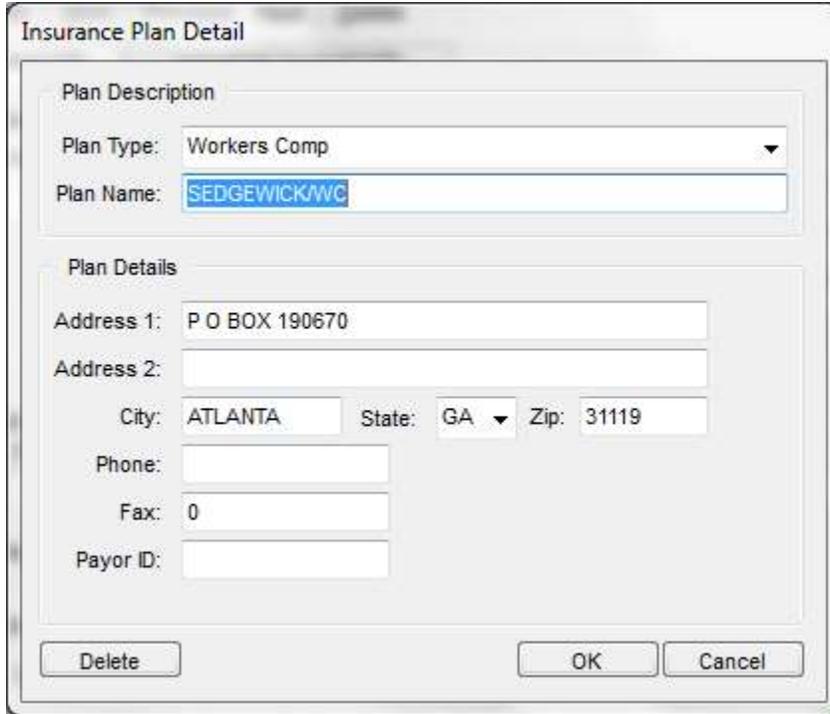
Field	Description
Address 1	Enter/Type the first line of the company address.
Address 2	Enter/Type the second line of the company address.

City	Enter/Type the name of the city where the company is located.
State	Select the state where the company is located from the provided drop down menu.
Zip	Enter/Type the company's zip code.
Phone	Enter/Type the company's phone number.
Fax	Enter/Type the company's fax number.
Payor ID	Enter/Type the payor's identification number.
Delete	Click delete to remove all the details entered in the Insurance Plan Detail dialog box.
OK	Click ok to save the details entered in the Insurance Plan Detail dialog box.
Cancel	Click cancel to close the Insurance Plan Detail dialog box.

3. Enter the details and click **OK**. The insurance plan matching the details entered is displayed.

To Add a New Insurance Plan Detail

1. Click .
2. The following **Insurance Plan Detail** dialogue box is displayed:



The two sections available in the **Insurance Plan Detail** dialogue box are:

- Plan Description
- Plan Details

*Plan Description*

Field	Description
Plan Type	Select the plan type from the drop down menu. By default <b>Workers Comp</b> is the only plan type available.
Plan Name	Enter/Type the name of the plan in the text box available.

*Plan Details*

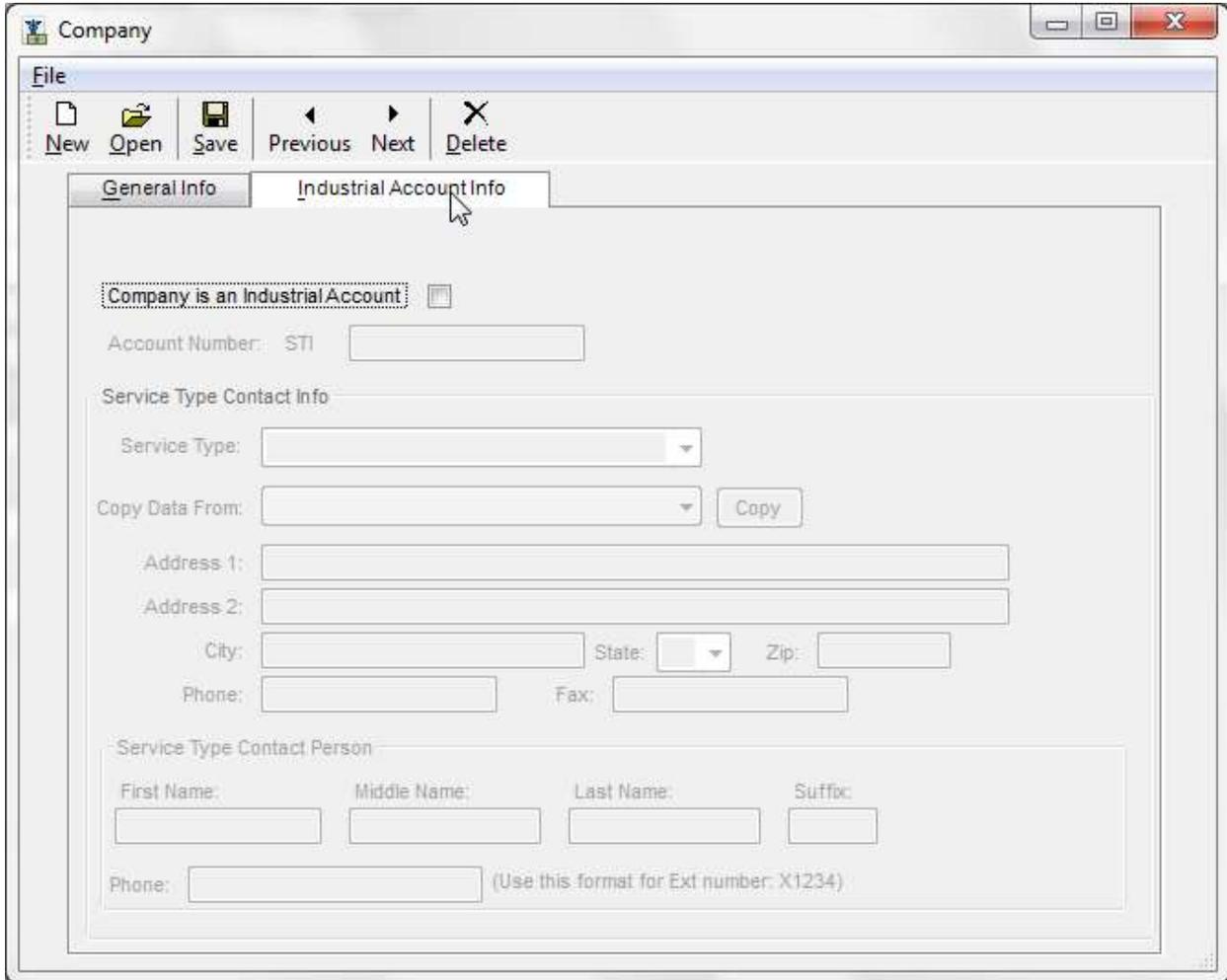
Field	Description
Address 1	Enter/Type the first line of the company address.
Address 2	Enter/Type the second line of the company address.

City	Enter/Type the name of the city where the company is located.
State	Select the state where the company is located from the provided drop down menu.
Zip	Enter/Type the company's zip code.
Phone	Enter/Type the company's phone number.
Fax	Enter/Type the company's fax number.
Payor ID	Enter/Type the payor's identification number.
Delete	Click delete to remove all the details entered in the Insurance Plan Detail dialog box.
OK	Click ok to save the details entered in the Insurance Plan Detail dialog box.
Cancel	Click cancel to close the Insurance Plan Detail dialog box.

3. Enter the details and click **OK**. The insurance plan details are recorded.

## To set up and record Industrial Account Info

1. Navigate through the **Setup** tab, and click **Companies**.
2. The **Company** dialog box is displayed.
3. Click **Industrial Account Info** tab as shown below.



The screenshot shows a window titled "Company" with a menu bar containing "File" and a toolbar with "New", "Open", "Save", "Previous", "Next", and "Delete". The "Industrial Account Info" tab is selected. The form contains the following fields:

- Company is an Industrial Account:** A checkbox that is currently unchecked.
- Account Number:** A text field containing "STI".
- Service Type Contact Info:**
  - Service Type:** A dropdown menu.
  - Copy Data From:** A dropdown menu with a "Copy" button next to it.
  - Address 1:** A text field.
  - Address 2:** A text field.
  - City:** A text field.
  - State:** A dropdown menu.
  - Zip:** A text field.
  - Phone:** A text field.
  - Fax:** A text field.
- Service Type Contact Person:**
  - First Name:** A text field.
  - Middle Name:** A text field.
  - Last Name:** A text field.
  - Suffix:** A text field.
  - Phone:** A text field with a note: "(Use this format for Ext number: X1234)".

The following are the section available under **Industrial Account Info** tab:

1. Company is an Industrial Account
2. Service Type Contact Info
3. Service Type Contact Person

## Company is an Industrial Account

1. Click the **Company is an Industrial Account** check box to highlight the following tabs. If the **Company is an Industrial Account** is unchecked, all the subsequent tabs are greyed out.

Company is an Industrial Account

Account Number: STI

Service Type Contact Info

Service Type:

Copy Data From:

Address 1:

Address 2:

City:  State:  Zip:

Phone:  Fax:

Service Type Contact Person

First Name:  Middle Name:  Last Name:  Suffix:

Phone:  (Use this format for Ext number: X1234)

2. Enter/Type the account number.

## Service Type Contact Info

1. Select the required **Service Type** from the drop down menu. If the service type is not selected, the subsequent tabs are greyed out. The two options available under service type are:
  - Physical Exam
  - Drug Screening



### Physical Exam

Select **Physical Exam**, the **Copy Data From** menu displays the following options:

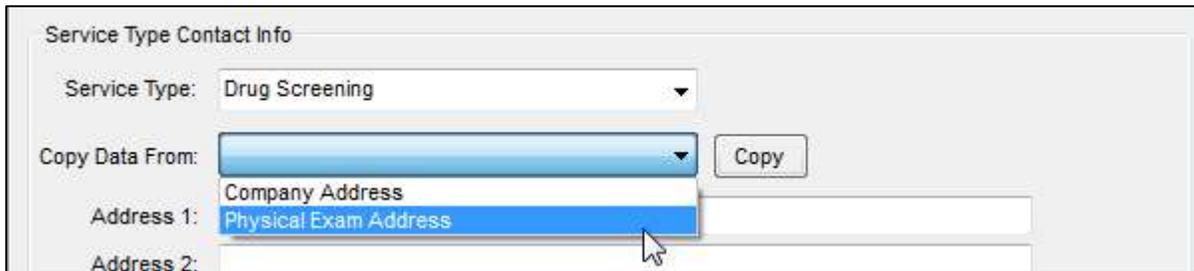
- Company Address
- Drug Screening Address



### Drug Screening

Select **Drug Screening**, the **Copy Data From** menu displays the following options:

- Company Address
- Physical Exam Address



2. Select the required options and click **Copy**. The subsequent field's information is copied from the selected source.  
**OR**
3. Manually enter/type each field as shown below.

Address 1:	<input type="text"/>		
Address 2:	<input type="text"/>		
City:	<input type="text"/>	State:	<input type="text" value="▼"/>
Zip:	<input type="text"/>		
Phone:	<input type="text"/>	Fax:	<input type="text"/>
Service Type Contact Person			
First Name:	Middle Name:	Last Name:	Suffix:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone:	<input type="text"/> (Use this format for Ext number: X1234)		

Field	Description
Address 1	Enter/Type the first line of the company address.
Address 2	Enter/Type the second line of the company address.
City	Enter/Type the name of the city where the company is located.
State	Select the state where the company is located from the provided drop down menu.
Zip	Enter/Type the company's zip code.
Phone	Enter/Type the company's phone number.
Fax	Enter/Type the company's fax number.

## Service Type Contact Person

Service Type Contact Person

First Name: 
 Middle Name: 
 Last Name: 
 Suffix:

Phone:  (Use this format for Ext number: X1234)

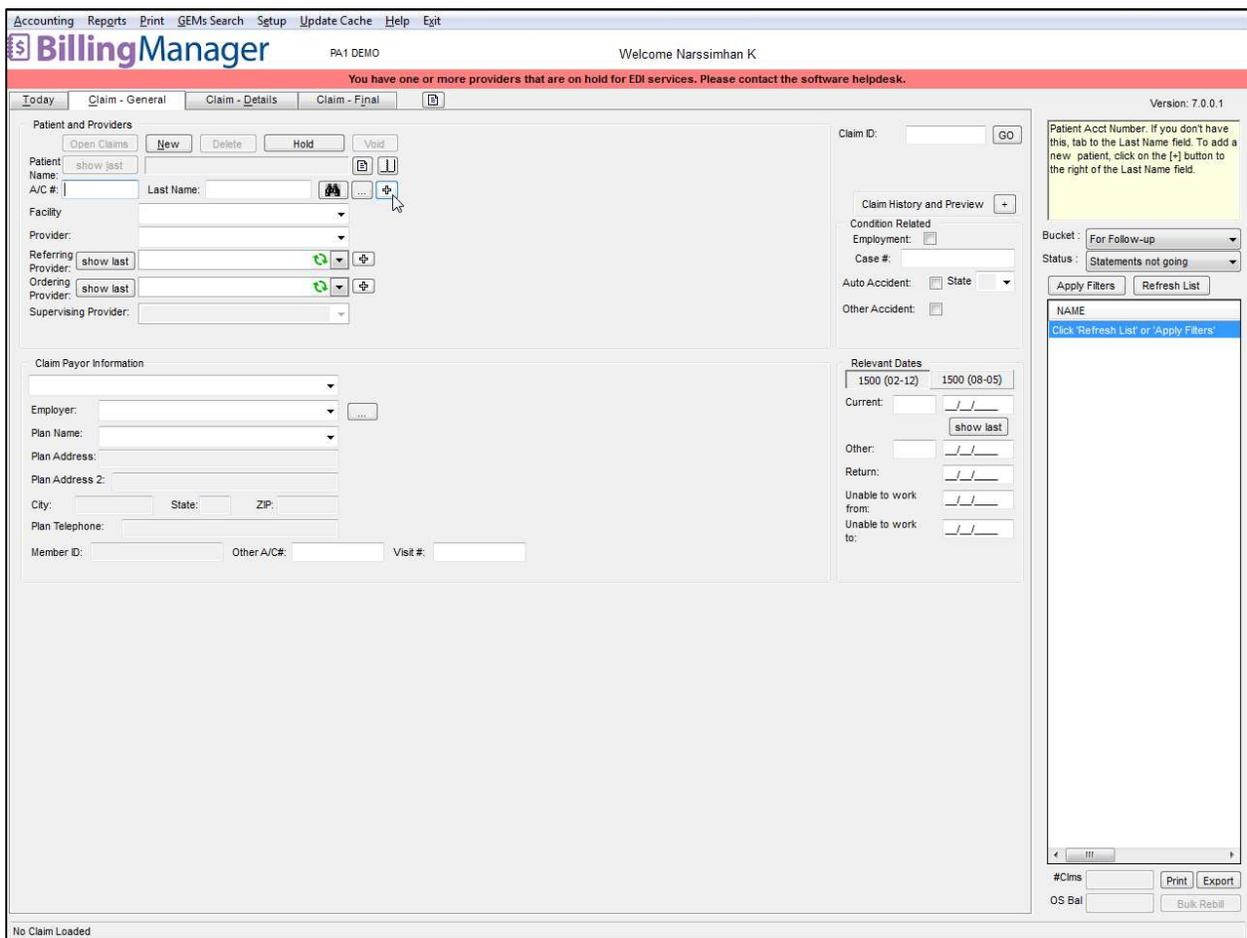
Field	Description
First Name	Enter/Type the first name of the service type contact person in the provided text box.
Middle Name	Enter/Type the middle name of the service type contact person.
Last Name	Enter/Type the last name of the service type contact person.
Suffix	Enter/Type additional information about the service type contact person, like letters that indicate the position held by the individual, or educational degree, accreditation, office, or honour.
Phone	Enter/Type the phone number of the service type contact person. The format for entering the extension number is X1234.

# Setting-Up Patients

Setting up patients is one of the most important tasks of the **Billing Manager** application. This is the screen used to record information including patient information, insurance, workers compensation, pre-authorization, statements, collections, contacts and other custom fields.

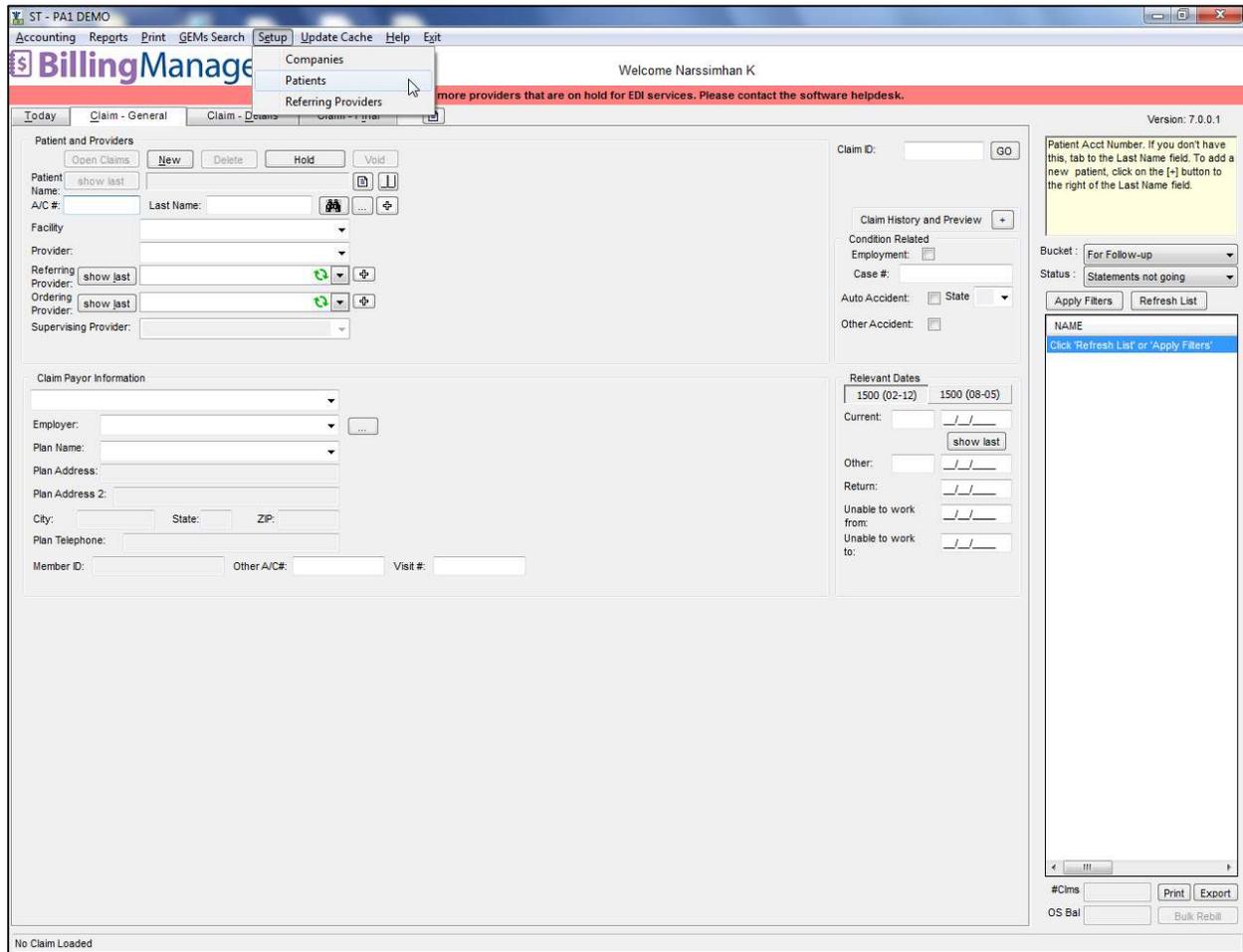
The following is the procedure to set up patients or to add a patient record. There are two ways to access the **Patients** screen:

1. Navigate through **Billing Manager** and select the **Claim-General** tab. Click  as shown below.

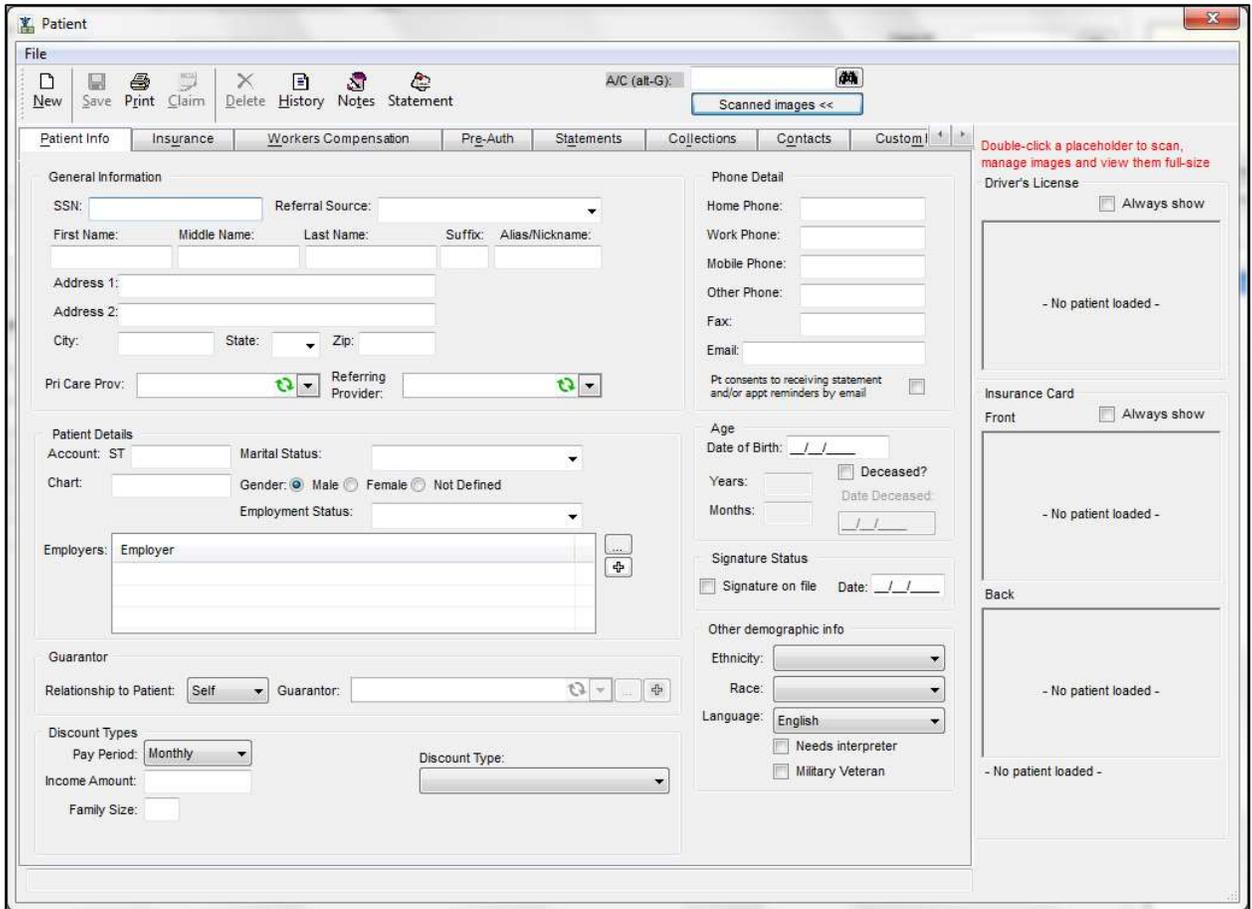


OR

2. Or on the **Setup** menu, click **Patients** as shown below:



3. The **Patient** screen is displayed as shown below.



The screenshot shows the 'Patient' window with the following sections:

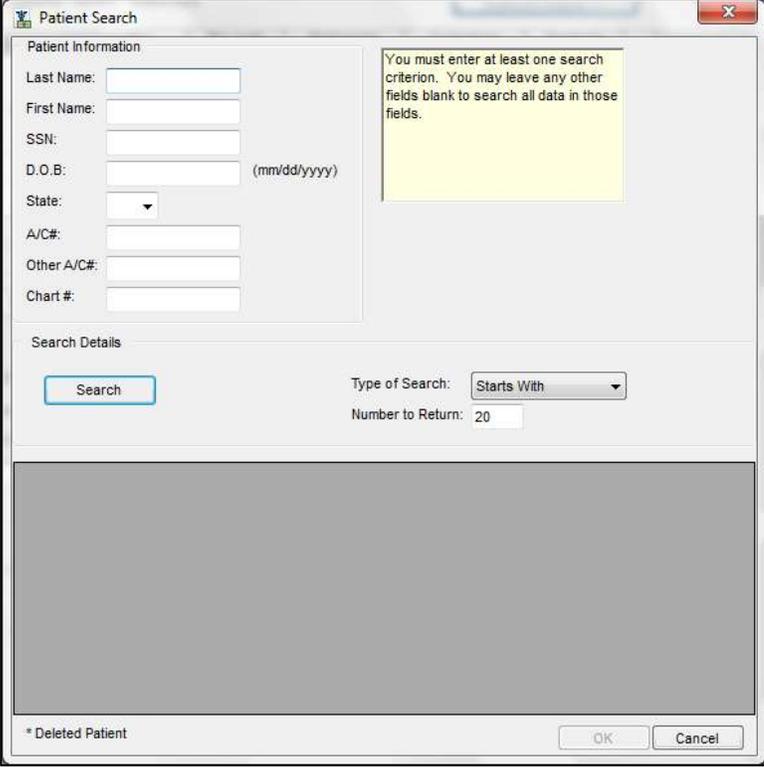
- File Menu:** New, Save, Print, Claim, Delete, History, Notes, Statement. Includes 'A/C (alt-G):' and 'Scanned images <<'.
- Tabs:** Patient Info, Insurance, Workers Compensation, Pre-Auth, Statements, Collections, Contacts, Custom.
- General Information:** SSN, Referral Source, First Name, Middle Name, Last Name, Suffix, Alias/Nickname, Address 1, Address 2, City, State, Zip, Pri Care Prov., Referring Provider.
- Phone Detail:** Home Phone, Work Phone, Mobile Phone, Other Phone, Fax, Email, Pt consents to receiving statement and/or appt reminders by email.
- Patient Details:** Account, Marital Status, Chart, Gender (Male, Female, Not Defined), Employment Status, Employers.
- Guarantor:** Relationship to Patient, Guarantor.
- Discount Types:** Pay Period, Income Amount, Family Size, Discount Type.
- Age:** Date of Birth, Deceased?, Years, Months, Date Deceased.
- Signature Status:** Signature on file, Date.
- Other demographic info:** Ethnicity, Race, Language, Needs interpreter, Military Veteran.
- Insurance Card:** Driver's License, Front, Back.

The following are the common features applicable to the entire **Patient** section.



Click	To
<b>New</b>	Record details of a new patient.
<b>Save</b>	Record any new information or modify existing information.  If the account number is not assigned, save will prompt you to assign the account number. Save also validates to

Click	To
	prevent duplicate account numbers and will also not allow account numbers from deleted records to be re-used.
<b>Print</b>	Generate a hard copy of the patient demographic information.
<b>Claim</b>	Save a new record, and also to go directly to the claim form to record the claim for a patient.
<b>Delete</b>	Delete the patient record. The delete option does not actually delete the patient record, but marks it as deleted, so it no longer shows. It also prevents the deleted account number from being reassigned. Deleted patients records can be accessed normally in the system, but no changes can be made to them. If a deleted patient record needs to be retrieved, go to the patient form, and click <i>Undelete</i> .
<b>History</b>	View the Patient Transaction History. This option is highlighted only for the existing patients or a newly recorded patient.
<b>Notes</b>	Open the Claim and Patient Notes form, which is used to enter notes related to the patient's claim. The previous notes recorded can also be accessed.
<b>Statement</b>	Print a current patient statement. Use the transaction history page to reproduce a copy of a previous statement.

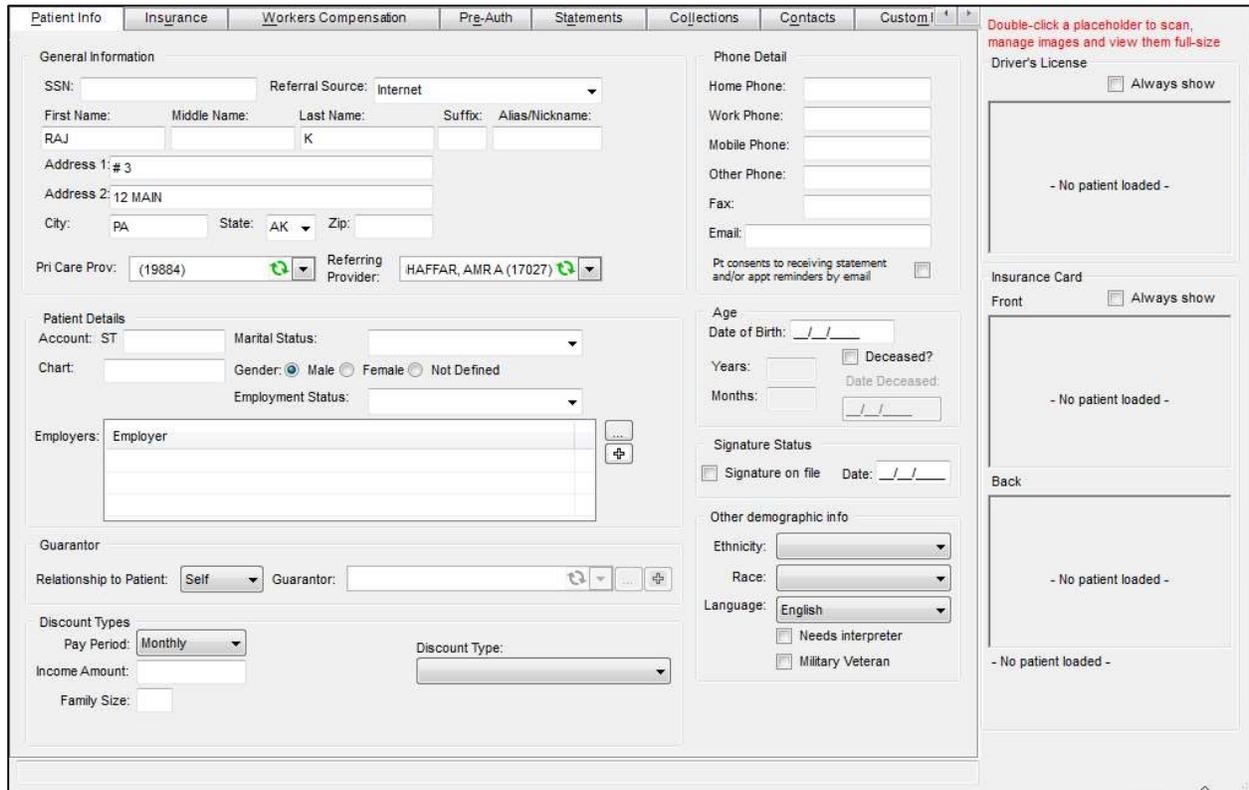
Click	To
	<p>Search for a patient record using any of the parameters on the form.</p> 
<p><b>Scanned Images</b></p>	<p>View the images of driver's license and insurance card copy.</p> <p><b>Scanned images</b> button is placed on the top-right corner of the <b>Patient</b> window, this acts as an expand/collapse feature, which is used for scanning of the Drivers Licenses and Insurance Cards.</p> <p>Billing Manager now allows to scan driver's license and insurance cards directly from the scanner interface. This will work only with TWAIN compatible scanners.</p>

The following tabs are available within the **Patient** dialog box:

- Patient Information
- Insurance
- Workers Compensation
- Pre-Authorization
- Statements
- Collections
- Contacts
- Custom Fields

## Patient Info

The basic information required to record the details on the **Patient Info** screen is First Name, Last Name, Gender and Date of Birth. The following is a brief explanation of each field on the **Patient Info** tab:



The screenshot displays the 'Patient Info' tab with the following sections and fields:

- General Information:** SSN, Referral Source (Internet), First Name (RAJ), Middle Name, Last Name (K), Suffix, Alias/Nickname, Address 1 (# 3), Address 2 (12 MAIN), City (PA), State (AK), Zip, Pri Care Prov (19884), Referring Provider (HAFFAR, AMRA (17027)).
- Phone Detail:** Home Phone, Work Phone, Mobile Phone, Other Phone, Fax, Email, Pt consents to receiving statement and/or appt reminders by email.
- Patient Details:** Account (ST), Marital Status, Chart, Gender (Male, Female, Not Defined), Employment Status, Employers (Employer).
- Guarantor:** Relationship to Patient (Self), Guarantor.
- Discount Types:** Pay Period (Monthly), Income Amount, Family Size, Discount Type.
- Age:** Date of Birth, Years, Months, Deceased?, Date Deceased.
- Signature Status:** Signature on file, Date.
- Other demographic info:** Ethnicity, Race, Language (English), Needs interpreter, Military Veteran.
- Insurance Card:** Front, Back (all placeholders show '- No patient loaded -').
- Driver's License:** Placeholder shows '- No patient loaded -'.

**Note:** All the tabs on **Billing Manager** are separated into different sections with the related features displayed under the appropriate sections for easy navigation.

The following are the sections available on the **Patient Info** tab:

- General Information
- Patient Details
- Guarantor
- Discount Types

- Phone Detail
- Age
- Signature Status
- Other demographic info.

### General Information

**General Information**

SSN:  Referral Source:

First Name:  Middle Name:  Last Name:  Suffix:  Alias/Nickname:

Address 1:

Address 2:

City:  State:  Zip:

Pri Care Prov:  Referring Provider:

Field	Description
SSN	Enter the social security number of the patient.
Referral Source	By default, in a new practice, this section is blank. Please contact support if your referral source dropdown is blank. Select the referral source from the drop down menu.
First Name	Enter/Type the first name of the patient. This is a mandatory field, or the basic information needed to record Patient Info details.
Middle Name	Enter/Type the middle name of the patient, if any.

Field	Description
<b>Last Name</b>	Enter/Type the patient's last name. This is a mandatory field, or one of the basic information needed to record Patient Info details.
<b>Suffix</b>	Enter/Type additional information about the person, like letters that indicate the position held by the individual, or educational degree, accreditation, office, or honour.
<b>Alias/Nickname</b>	Enter/Type the patient's nick name, pet name or any specific name used to address the person.
<b>Address 1</b>	Enter/Type the first line of the patient address.
<b>Address 2</b>	Enter/Type the second line of the patient address.
<b>City</b>	Enter/Type the name of the patient's city.
<b>State</b>	Select the patient's state using the drop down menu.
<b>Zip</b>	Enter/Type the patient's zip code.
<b>Pri Care Prov</b>	Select the primary care provider from the drop down menu.
<b>Referring Provider</b>	Select the referring provider from the drop down menu.

## Patient Details

**Patient Details**

Account: ST  Marital Status:

Chart:  Gender:  Male  Female  Not Defined

Employment Status:

Employers: 

Employer

... +

**Guarantor**

Relationship to Patient:  Guarantor:  ↺ ... +

**Discount Types**

Pay Period:  Discount Type:

Income Amount:

Family Size:

Field	Description
<b>Account</b>	By default <b>Automatically Assign Account number</b> checkbox is selected under Setup - General. The system will automatically assign account number for the patient. The account number can be manually changed, if necessary.
<b>Marital Status</b>	Select the marital status of the patient from the drop down menu.
<b>Chart</b>	Enter the chart number. If the old patient chart number needs to be cross referenced to the new system, the chart number needs to be entered in this field. This is entered only for informational purpose.

Field	Description
<b>Gender</b>	Select the patient's gender by clicking on the required radio button. This is a mandatory field, or one of the basic information needed to record Patient Info details.
<b>Employment Status</b>	Select the patient's employment status from the drop down menu.
<b>Employers</b>	Select the employer from the drop down menu. The employers section allows to search from the employers existing list or add new employer details. To edit, or add a company, use the buttons to the right of the company drop down. Click <input type="button" value="..."/> to modify the existing details of an employer or click <input type="button" value="⊕"/> to add an employer. This will open the Company dialog box. Edit or add any information as necessary.

### Guarantor

Guarantor

Relationship to Patient:   Guarantor:

Field	Description
<b>Relationship to Patient</b>	Select the guarantor's relationship with the patient using the drop down menu. The options available in the drop down menu are: <ul style="list-style-type: none"> <li>• <b>Self</b>: Select <b>Self</b>, if the patient and the guarantor are the same person.</li> </ul>

Field	Description
	<ul style="list-style-type: none"> <li><b>Other:</b> Use <b>Other</b>, if the patient is a child, spouse or if the patient's section of the bill needs to be sent to some other person.</li> </ul>
<b>Guarantor</b>	<p>Select the guarantor from the drop down menu. Click  to modify the existing details of a guarantor or click  to add a guarantor. For family billing make sure you enter the Guarantor only once and then select that Guarantor for all family members.</p>

### Phone Detail

**Phone Detail**

Home Phone:

Work Phone:

Mobile Phone:

Other Phone:

Fax:

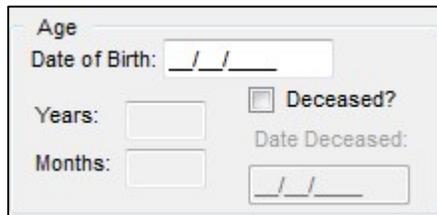
Email:

Pt consents to receiving statement and/or appt reminders by email

Field	Description
<b>Home Phone</b>	Enter/Type the patient's home phone number.
<b>Work Phone</b>	Enter/Type the patient's work phone number.
<b>Mobile Phone</b>	Enter/Type the patient's mobile phone number.
<b>Other Phone</b>	Enter/Type the patient's alternative or additional phone number.

Field	Description
Fax	Enter/Type the patient's fax number.
Email	Enter/Type the patient's email address.
Pt consents to receiving statement and/or appt reminders by email	Receive statement and reminders by email. Click the Pt consents to receive statement and/or apt reminders by email checkbox. Currently this box is for informational purposes only and does not control any statement settings.

### Age



Age  
 Date of Birth:   
 Years:   Deceased?  
 Months:  Date Deceased:

Field	Description
Date of Birth	Enter the patient's date of birth. This is a mandatory field, or one of the basic information needed to record Patient Info details.
Years	Enter the age, i.e., numbers of years. For example if the patient was born on 01/01/1990, then as of 07/03/2016, enter 26 in the <b>Years</b> field.
Months	Enter the number of months if any. For example if the patient was born on 01/01/1990, then as of 07/03/2016, enter 2 in the <b>Months</b> field.

<b>Deceased</b>	<p>Click the deceased checkbox if the patient is deceased.</p> <p>The <b>Date Deceased</b> field gets highlighted; enter the deceased date in the appropriate field.</p>
-----------------	--

### Signature Status

Signature Status

Signature on file    Date:

Field	Description
<b>Signature on file</b>	<p>Click the <b>Signature on File</b> checkbox, if the signature of the patient is available on file. Signature on file refers to the signature of the patient or an authorized person, authorizing the release of any medical or other information necessary to process the claim. This is also used to request payment of government benefits to self or to the party who accepts the assignment.</p>
<b>Date</b>	<p>Enter the date of the signature recorded on file.</p>

### Other demographic info

Other demographic info

Ethnicity:

Race:

Language:

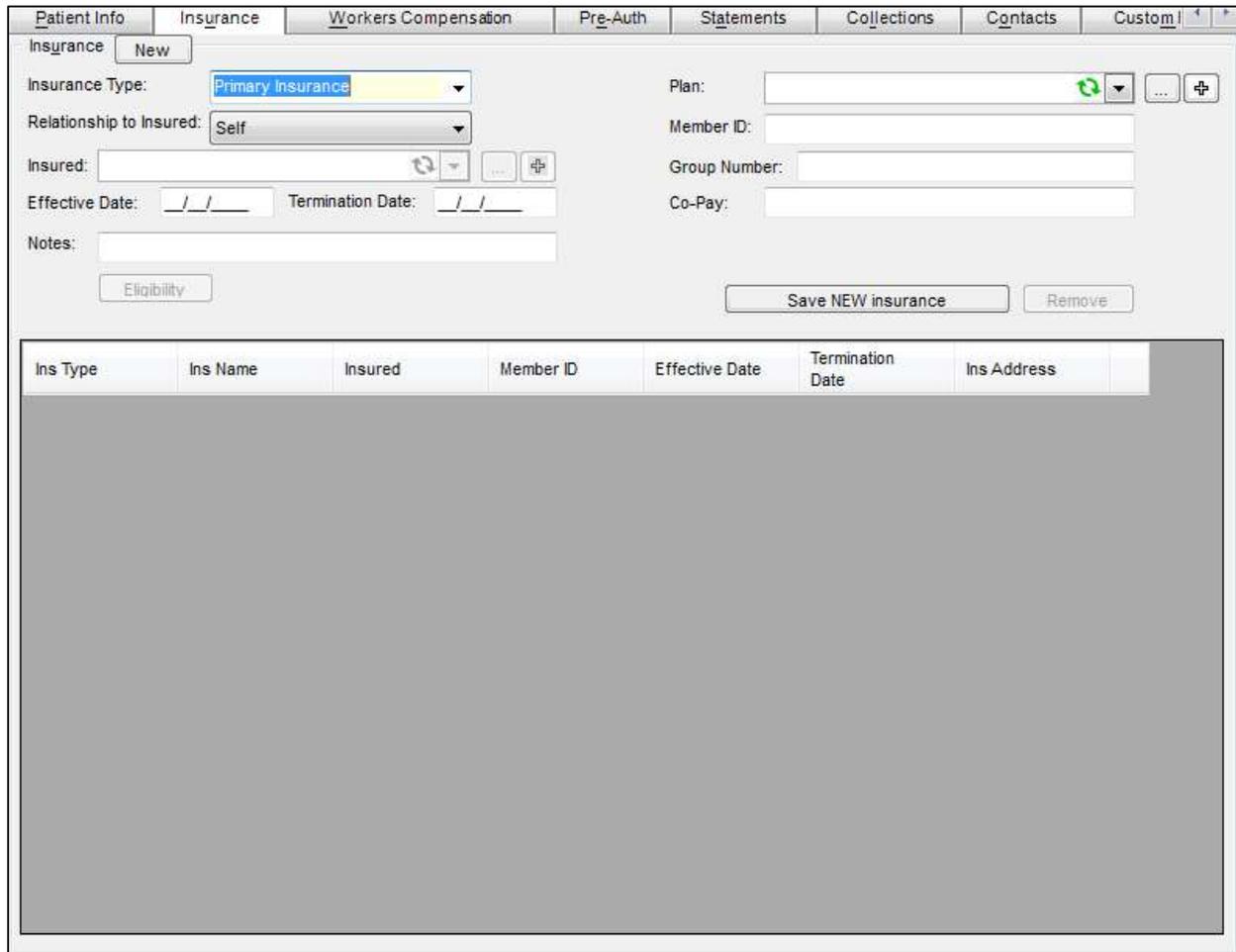
Needs interpreter

Military Veteran

Field	Description
<p><b>Ethnicity</b></p>	<p>Select the patient ethnicity from the drop down menu.</p> <p>The options available are:</p> <ul style="list-style-type: none"> <li>• Hispanic or Latino</li> <li>• Non-Hispanic or Latino</li> <li>• Unknown: Select unknown if the patient does not know his/her ethnicity, or if the patient does not belong to any of the options mentioned above.</li> </ul>
<p><b>Race</b></p>	<p>Select the patient race from the drop down menu. Select <b>Other</b>, if none of the options match the patient's race.</p>
<p><b>Language</b></p>	<p>Select the patient language from the drop down menu.</p> <p>Click the <b>Needs interpreter</b> checkbox, if the patient requires an interpreter.</p> <p>Click the <b>Military Veteran</b> checkbox if the patient is a retired military veteran.</p>

## Insurance

The existing Patient's insurance details can be modified from this screen. The new insurance details can also be recorded using this screen.



Ins Type	Ins Name	Insured	Member ID	Effective Date	Termination Date	Ins Address

Field	Description
<b>Insurance Type</b>	<p>Select the type of insurance from the drop down menu.</p> <p>The options available to choose from are:</p> <ul style="list-style-type: none"> <li>• Primary Insurance</li> <li>• Secondary Insurance</li> <li>• Tertiary Insurance</li> </ul>

Field	Description
	<ul style="list-style-type: none"> <li>Liability Insurance.</li> </ul>
<b>Plan</b>	<p>Select the insurance plan from the drop down menu. Click  to modify the existing details of the insurance plan or click  to add a new insurance plan. This will open the Insurance Plan Lookup. Edit or add any information as necessary.</p>
<b>Relationship to insured</b>	<p>Select the patient's relationship with the insured from the drop down menu.</p>
<b>Member ID</b>	<p>Enter the patient's member identification number. Member ID is provided to the patient when an insurance plan is activated.</p>
<b>Insured</b>	<p>Select the insured from the drop down menu. This field is not highlighted if self is selected as relationship to insured.</p>
<b>Group number</b>	<p>Enter the patient's group number, if any. A group number is provided when a group of people are covered under one health insurance plan. Self-employed individuals can also make their own health insurance group for themselves and their dependents.</p>
<b>Effective date</b>	<p>Enter the effective date of the insurance. Effective date is the date on which an agreement, insurance policy, takes effect.</p>
<b>Termination date</b>	<p>Enter the termination date of the insurance. A termination date is the day an insurance policy ends. It</p>

Field	Description
	can be a scheduled date, such as the end of a one-year auto insurance policy. It may also be unscheduled in the event one party no longer wants coverage or if the insured is no longer eligible, such as an employee who is fired.
<b>Co-Pay</b>	Enter the co pay amount, if any. Co-pay is an amount of money that a person with health insurance is required to pay at the time of each visit to a doctor or when purchasing medicine.
<b>Notes</b>	Enter any insurance relation information or additional notes, for reference.

- Enter the details and click **Save** New Insurance.
- The saved details are displayed in the section as shown below.

## Eligibility

On the Insurance tab of the Patient window, you will see a column in the grid with insurances. An E icon is shown for every insurance in the grid to show its eligibility status. You can double-click an insurance line in the grid or click the new Eligibility button to view or perform eligibility inquiries (a patient must be loaded in the Patient window). This will open the new Eligibility Inquiries window.

Icon	Description
<b>Yellow E</b>	Not available-The icon is yellow if the insurance does not offer online eligibility

<b>Red E</b>	Denied-The last eligibility inquiry was denied or required more information.
<b>Green E</b>	Eligible-The last eligibility inquiry was confirmed.
<b>Grey E</b>	No results yet- The insurance offices eligibility inquires but no valid results have been received yet.

Patient Info
Insurance
Workers Compensation
Pre-Auth
Statements
Collections
Contacts
Custom

**Insurance** New

Insurance Type: Primary Insurance ↕

Relationship to Insured: Self ↕

Insured:   ↻

Effective Date: \_\_/\_\_/\_\_ Termination Date: \_\_/\_\_/\_\_

Notes:  

Eligibility

Double-click a line in the grid to view or generate eligibility inquiries

Plan:   ↻

Member ID:  

Group Number:  

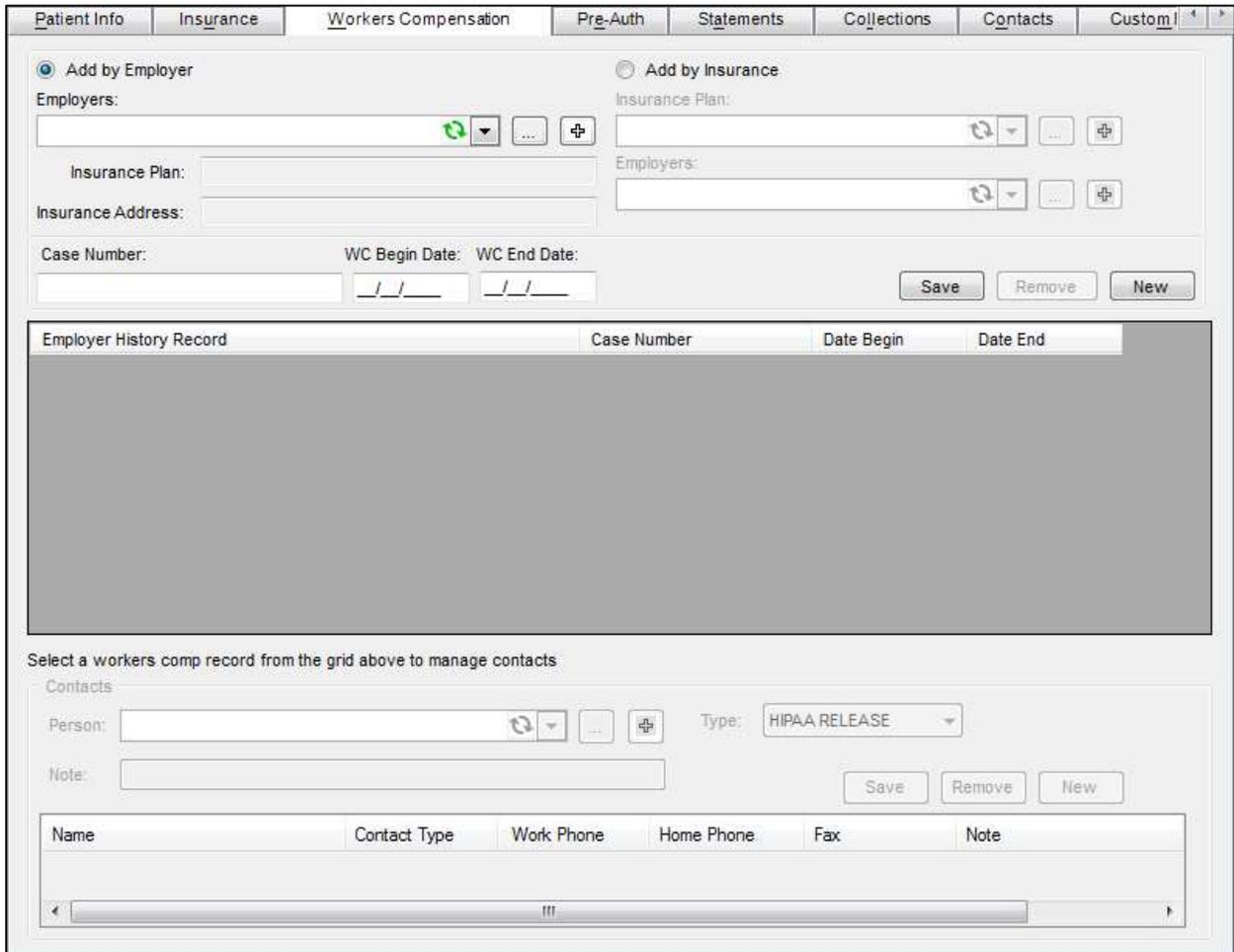
Co-Pay:  

Save NEW insurance
Remove

Ins Type	Ins Name	Insured	Member ID	Effective Date	Termination Date	Ins Address
Primary Ins	UTICA NATIONAL...	ARC, JACK	2546			P O BOX 530,UTI...

## Workers Compensation

Workers compensation is when the insurance is covered by the employer because an employee was injured while at work. This screen is used to modify existing insurance details provided by the employer and also to record new insurance details.



The screenshot shows the 'Workers Compensation' form with the following sections:

- Add by Employer (Selected):** Includes fields for Employers, Insurance Plan, Insurance Address, Case Number, WC Begin Date, and WC End Date.
- Add by Insurance:** Includes fields for Insurance Plan and Employers.
- Employer History Record:** A table with columns for Case Number, Date Begin, and Date End.
- Contacts:** Includes a Person field, a Note field, and a Type dropdown menu set to 'HIPAA RELEASE'.
- Contact Table:** A table with columns for Name, Contact Type, Work Phone, Home Phone, Fax, and Note.

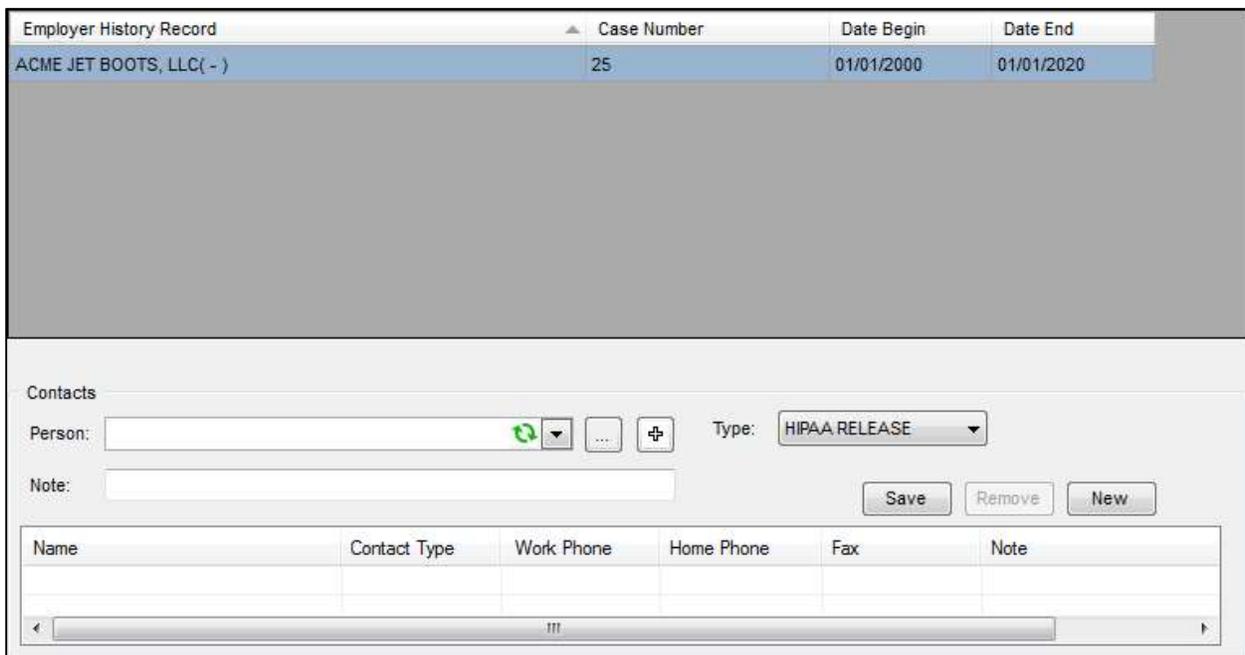
The two sections on the workers compensation are:

- Add by Employer
- Add by Insurance

Add by Employer

Field	Description
<b>Employers</b>	<p>Select the required employer from the drop down menu. Click <input type="text" value="..."/> to modify the existing details of the employer or click <input type="button" value="+"/> to add an employer. This will open the <b>Company</b> dialog box. Edit or add any information as necessary.</p> <p>The insurance plan and insurance address details get automatically populated when the employer is selected.</p>
<b>Case number</b>	<p>Enter the worker compensation case number. Enter the worker compensation begin date and end date.</p>

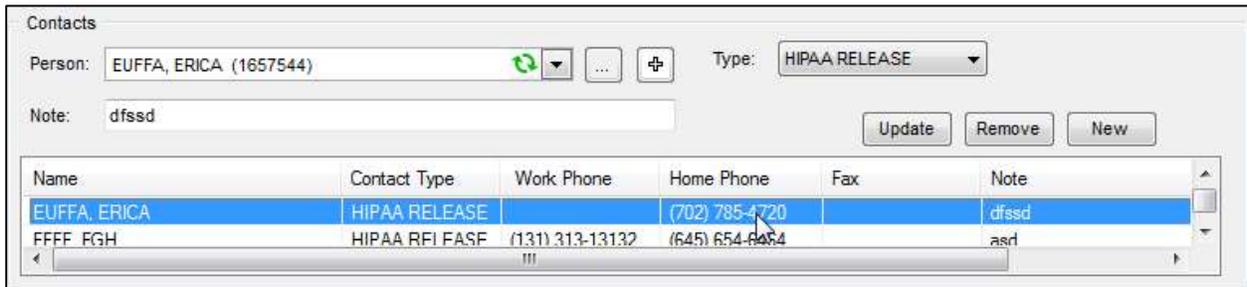
1. Enter the details and click **Save**. The details are displayed in the **Employer History Record**.
2. Click the employer from the **Employer History Record**.
3. The **Contacts** section is highlighted as shown below.



The screenshot shows the 'Employer History Record' window with a table containing one record for 'ACME JET BOOTS, LLC (-)' with Case Number 25, Date Begin 01/01/2000, and Date End 01/01/2020. Below the table is the 'Contacts' section, which is highlighted. The 'Contacts' section includes a 'Person' dropdown menu, a 'Type' dropdown menu set to 'HIPAA RELEASE', a 'Note' text field, and 'Save', 'Remove', and 'New' buttons. At the bottom, there is a table with columns: Name, Contact Type, Work Phone, Home Phone, Fax, and Note.

Field	Description
<b>Person</b>	Select the required person from the drop down menu. Click <input type="text" value="..."/> to modify the existing details of the contact persons or click <input type="button" value="+"/> to add a contact person. This will open the <b>Contact Person</b> dialog box. Edit or add any information as necessary.
<b>Type</b>	Select the contact type from the drop down menu.
<b>Note</b>	Enter any note regarding the contact, if needed.

1. Enter the required details and click **Save**.
2. The saved contact is displayed in the section as shown below:



The screenshot shows a 'Contacts' interface. At the top, there is a form with the following fields: 'Person' (EUFFA, ERICA (1657544)), 'Type' (HIPAA RELEASE), and 'Note' (dfssd). Below the form are three buttons: 'Update', 'Remove', and 'New'. Below the buttons is a table with the following data:

Name	Contact Type	Work Phone	Home Phone	Fax	Note
EUFFA, ERICA	HIPAA RELEASE		(702) 785-4720		dfssd
FFFF EGH	HIPAA RELEASE	(131) 313-1313	(645) 654-654		asd

1. Select the required contact and click **Update** to update existing contact information.
2. Click **Remove** to delete the recorded contact details.
3. Click **New** to add a new contact.

### [Add by Insurance](#)

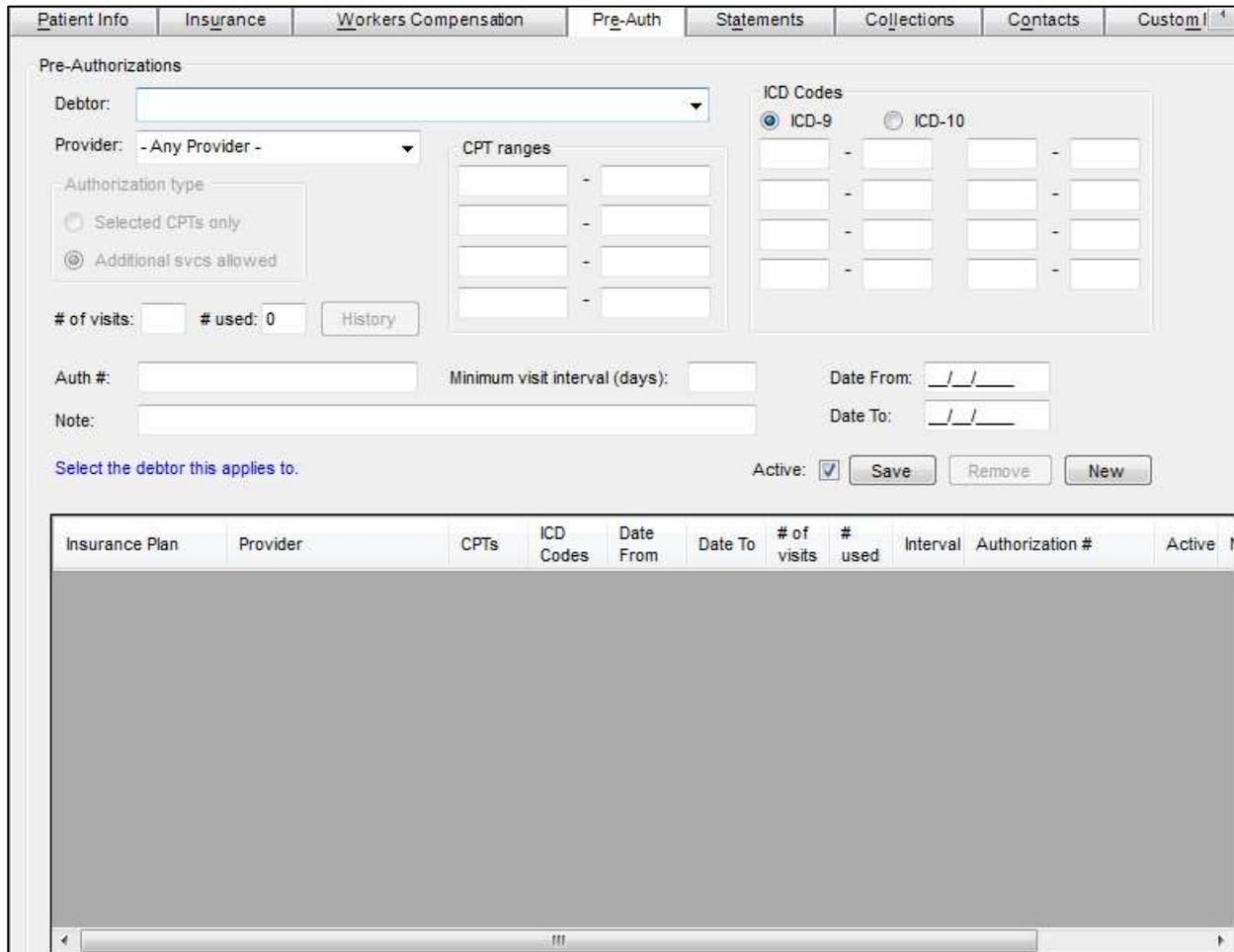
Field	Description
<b>Insurance plan</b>	Select the required insurance plan from the drop down menu. Click <input type="text" value="..."/> to modify existing details of the insurance or click <input type="button" value="+"/> to add an insurance. This will open

Field	Description
	the Insurance Plan Detail dialog box. Edit or add any information as necessary.
<b>Employers</b>	Select the employer name from the drop down menu. Click <input type="button" value="..."/> to modify existing details of the employers or click <input type="button" value="+"/> to add an employer. This will open the <b>Company</b> dialog box. Edit or add any information as necessary.

1. Enter the details and click **Save** to record the details entered.
2. Click **New** to record new employer details.

## Pre-Auth

Pre-Authorization is when a patient needs to get a procedure done and the doctor verifies the insurance company will authorize that procedure.



Field	Description
<b>Debtor</b>	Select the required debtor from the drop down menu. Any debtor including the patient will be displayed on the <b>Debtor</b> drop down menu.
<b>Provider</b>	Select the required provider from the drop down menu. Select <b>Any Provider</b> , if none of the options matches the requirement.

Field	Description
<b>ICD Codes</b>	Select the appropriate ICD by clicking on the text box. The options available under the ICD codes are displayed, click the required ICD code. ICD codes are entered to know the problem of the patient, after diagnosing the patient.
<b>CPT ranges</b>	Select the required CPT ranges by clicking in the text box. The options available under the CPT codes are displayed. Click the required CPT code. CPT codes are entered for the insurance company to know what procedure has been performed by the doctor. Selecting the CPT ranges will highlight the <b>Authorization Type</b> . Select the required authorization type, i.e., <b>Selected CPTs only</b> or <b>Additional svcs allowed</b> .
<b># of visits</b>	Enter the number of visits. The insurance company also authorizes the number of visits.
<b># used</b>	Enter the number of visits used. The number of visits used can be changed manually.
<b>Auth#</b>	Enter the authorization number.
<b>Minimum visit interval(days)</b>	Enter the number of minimum visit interval days or leave the field blank if there are no restrictions. Minimum visit interval days is entered if there is a restriction on how often the patient can be seen.
<b>Date from</b>	Enter the valid start date of the period, since the authorisation will be valid only for a certain time period.

Field	Description
<b>Date to</b>	Enter the valid end date of the period, since the authorisation will be valid only for a certain time period.
<b>Active</b>	Click the <b>Active</b> checkbox to activate a record. Or keep it clear to deactivate the record.
<b>Note</b>	Enter any additional information regarding pre-authorization, for future reference.

- Enter the details and click **Save** to record the information entered.
- Click **Remove** to delete a pre-authorization record.
- Click **New** to record a new pre-authorization.

**Note:** When the details are saved, the saved information is displayed in the section below.

Insurance   Workers Compensation   Pre-Auth   Statements   Collections   Contacts   Custom Fields

Pre-Authorizations

Debtor:

Provider:

Authorization type

Selected CPTs only

Additional svcs allowed

# of visits:  # used:

CPT ranges

<input type="text"/>	-	<input type="text"/>
<input type="text"/>	-	<input type="text"/>
<input type="text"/>	-	<input type="text"/>
<input type="text"/>	-	<input type="text"/>

ICD Codes

ICD-9    ICD-10

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>

Auth #:  Minimum visit interval (days):  Date From:

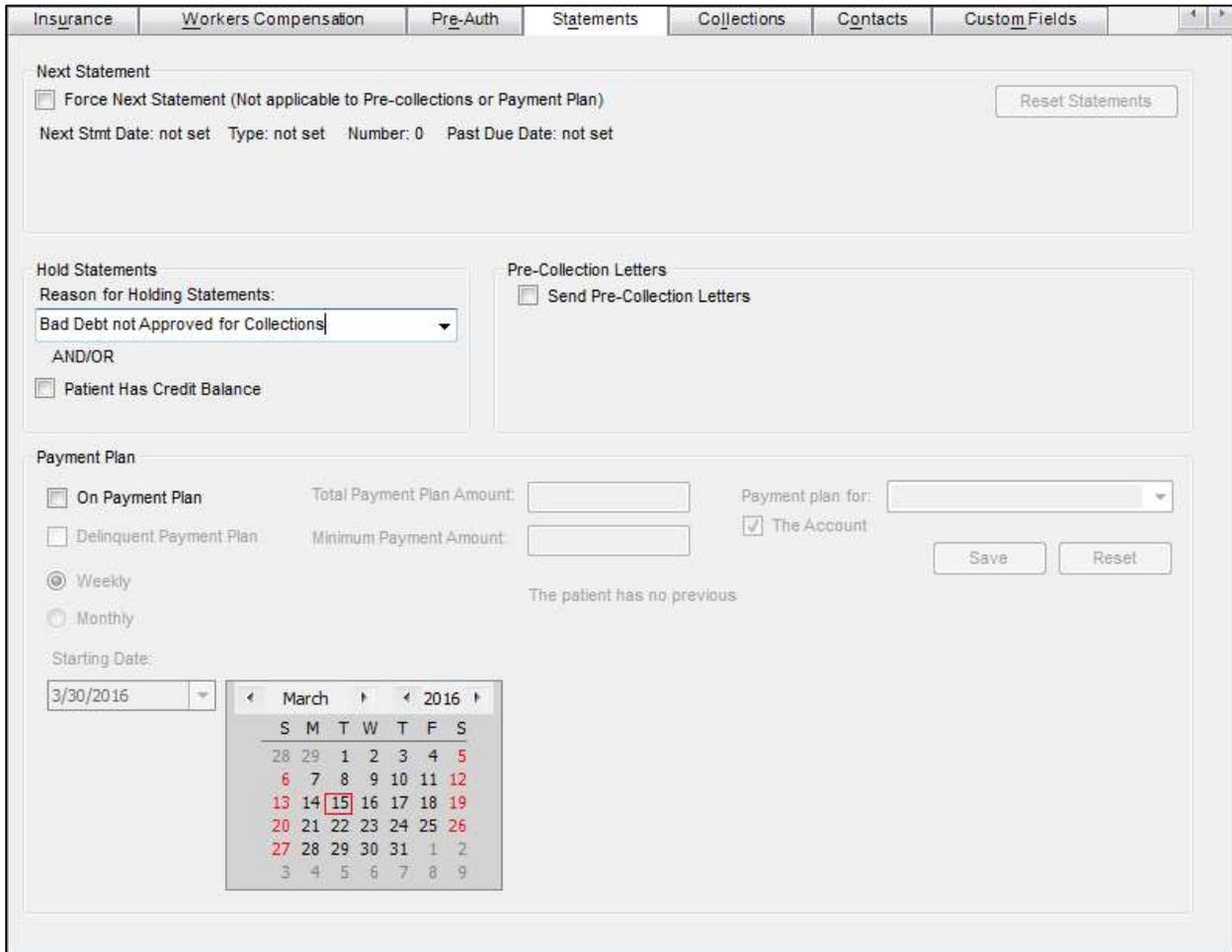
Note:  Date To:

Select the debtor this applies to.   Active:

Insurance Plan	Provider	CPTs	ICD Codes	Date From	Date To	# of visits	# used	Interval	Authorization #	Active
RUTH, JOY	ARABI, ARASH * (32892)	000000	001.1	1/1/2000	1/1/2020	5	0	0		x

## Statements

Statement is a bill provided by the doctor for services rendered. The physician sends a statement if the patient still owes him/her money even after the insurance company has paid. The statement displays the amount which is still owed to the doctor.



Field	Description
<b>Force Next Statement</b>	<p>Force statements are sent to the patients interrupting the normal statement cycle, when the bill needs to be settled immediately.</p> <p>For example: A patient gets a statement once in 20 days, but clicking this checkbox will force send a statement</p>

Field	Description
	<p>immediately, without waiting for the completion of the 20 days statement cycle.</p>
<p><b>Reset Statements</b></p>	<p>The <b>Reset Statements</b> button will be always available if the currently loaded patient can receive statements. Claims already written off to collections do not count, so the patient must have at least one active claim for the Reset Statements button to be available.</p> <p>Statement reset will start statement sequence anew, and next statement number will always be 1 after the reset, and the next statement type will be determined according to the current balance of the patient and to the Send statements for balance type setting.</p> <p>Next statement date will be assigned depending on the date last statement sent was created. The period between two statements thus cannot be less than the number of days specified for the <b>Number of days between statements</b> setting for the current account.</p> <p>It is possible to reset statements for a patient set to receive pre-collection letters, automatically unchecking the corresponding checkbox on the Statements tab.</p> <p>Patient with reset statements can once again reach the Pre-Collection status once claims of the patient age past the new 'Past Due Date' calculated at the moment of statement reset. The actual past due date used to</p>

Field	Description
	determine the age of claim balances is not affected though.
<b>Hold Statements</b>	The statements can be placed on hold for any of the reasons mentioned in the drop down menu. When the statements are placed on hold, then the patients will not be receiving any more statements. Select the reason from <b>Reason for Holding Statements</b> from one of the options from the drop down menu.
<b>Pre Collection Letters</b>	Click the <b>Pre Collection Letters</b> checkbox to send the letters to the patient. The pre collection letter can be configured to send the letter to everyone at a time, or to an individual person.

- Click the **On Payment Plan** checkbox and the **Payment Plan** section is highlighted as shown below:

**Payment Plan**

On Payment Plan      Total Payment Plan Amount:       Payment plan for:

Delinquent Payment Plan      Minimum Payment Amount:        The Account

Weekly      The patient has no previous

Monthly

Starting Date:

◀ March ▶ 2016 ▶

S	M	T	W	T	F	S
28	29	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2
3	4	5	6	7	8	9

Unavailable due to \$0 balance.

**Payment plan** is setting up a plan to pay the amount that is pending.

Field	Description
<b>On Payment Plan</b>	Click the <b>On Payment Plan</b> checkbox to activate the payment plan.
<b>Delinquent Payment Plan</b>	<<Need more Information>>
<b>Weekly</b>	Select the weekly payment plan by selecting the <b>Weekly</b> radio button. Paying weekly means making a minimum payment every week, towards clearing the total payment amount.
<b>Monthly</b>	Select the monthly payment plan by selecting the <b>Monthly</b> radio button. Paying monthly is making a minimum amount every month (usually on the same day every month), towards clearing the total payment.
<b>Total Payment Plan Amount</b>	Enter the total amount owed as a payment plan. The plan will end automatically when the total amount of payments made by patient equals or exceeds the specified Total amount.
<b>Minimum Payment Amount</b>	Enter the minimum amount that can be paid monthly/weekly as per the individual payment plan. If the amount is not met for any payment plan period, the payment plan will be marked as delinquent.
<b>Payment plan for</b>	Activate payment plan. Payment plan can also be chosen for a certain facility by checking <b>The Account</b> checkbox.

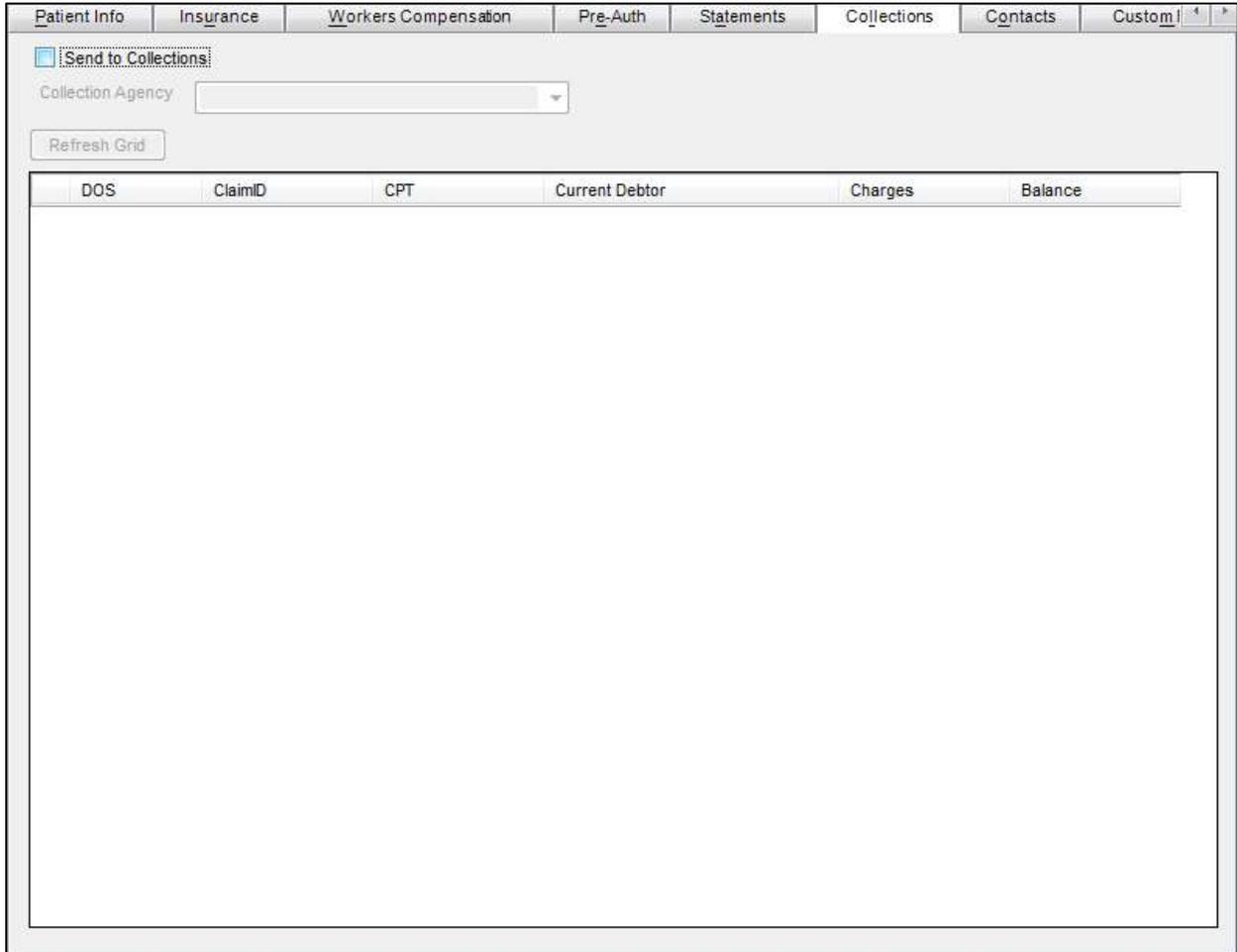
Field	Description
<p><b>Starting Date</b></p>	<p>Enter the start date of the payment plan. The start date for the payment plan can be chosen using the date from the calendar. By default, Starting Date is set to 15 days after the current date when the payment plan is activated.</p>
<p><b>Previous Payment Plans</b></p>	<p>View the previous payment plans. All the previous plans if any are displayed in the previous payment plan section.</p>
<p><b>Calendar</b></p>	<ul style="list-style-type: none"> <li>- <b>Calendar</b> control will allow more flexible due dates of the payment plan and will allow specifying <b>payment exceptions</b>. To create a payment exception, double-click on the desired due date in the Calendar control and enter the desired payment amount for this due date.</li> </ul> <p>Payment exceptions allow specifying a custom amount of the expected payment for any due date of a payment plan.</p> <p>The specified exception will be used to determine the amount of payment patient has to pay within the corresponding period.</p> <p>Exceptions are marked up with red background on the Calendar control.</p>
<p><b>Resetting Statements</b></p>	<ul style="list-style-type: none"> <li>- Statement reset can also be performed for payment plans: in this case the payment plan will be re-calculated starting from the current date, using the same pattern as before. Total plan amount and Minimum payment</li> </ul>

Field	Description
	amount will be recalculated automatically using the current patient balance. All exceptions will be lost, if any were created before the reset. A payment plan will be cancelled automatically while attempting a statement reset for a patient with no actual balance.

- Enter all the details and click **Save** to record payment plan details.

## Collections

The patient has been given time and options to make the payment and if the patient defaults, they are sent to a collection agency to recover the pending amount.



DOS	ClaimID	CPT	Current Debtor	Charges	Balance
-----	---------	-----	----------------	---------	---------

1. Click the **Send to Collections** checkbox and the following screen is displayed.

Patient Info Insurance Workers Compensation Pre-Auth Statements Collections Contacts Custom

Send to Collections not transferred yet

Collection Agency agency2 (301)

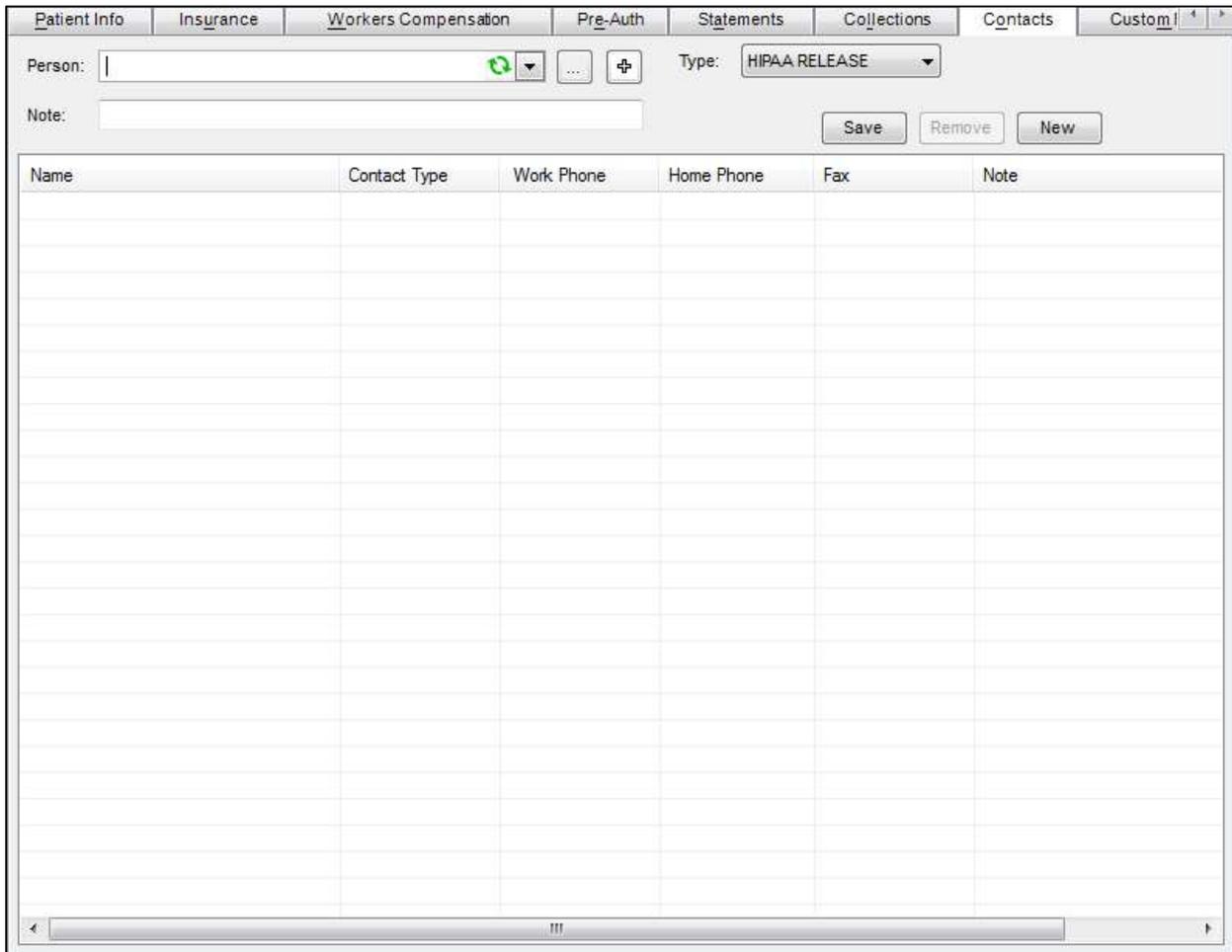
Refresh Grid

DOS	ClaimID	CPT	Current Debtor	Charges	Balance
-----	---------	-----	----------------	---------	---------

2. Select the required collection agency from the **Collection Agency** drop down menu.

## Contacts

Contacts tab is used to save emergency contact details of patients, especially in case of elderly or minor patients.



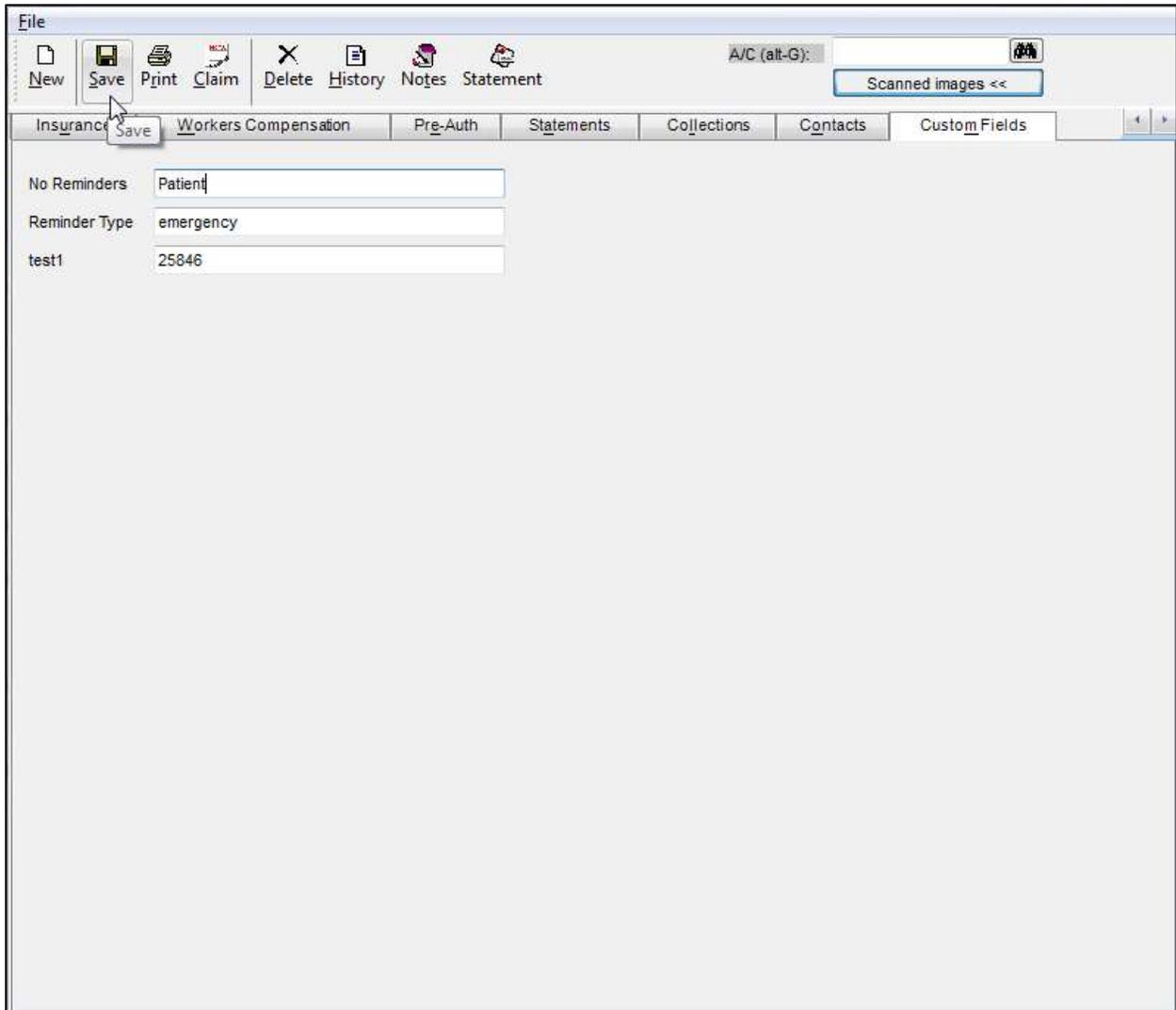
Field	Description
<p><b>Person</b></p>	<p>Select the required person from the drop down menu.</p> <p>Click  to modify the existing details of a contact person or click  to add a new contact person. This will open the <b>Contact Person</b> dialog box. Edit or add any information as necessary.</p>



- Click **New** to save a new contact person information.

## Custom Fields

Custom field is a configurable field which is used only for informational purposes. The required field can be configured from **Setup=>Patient Custom Fields**. The fields recorded here are displayed on the **Custom Fields** tab in **Billing Manager** as shown below:



No Reminders	Patient
Reminder Type	emergency
test1	25846

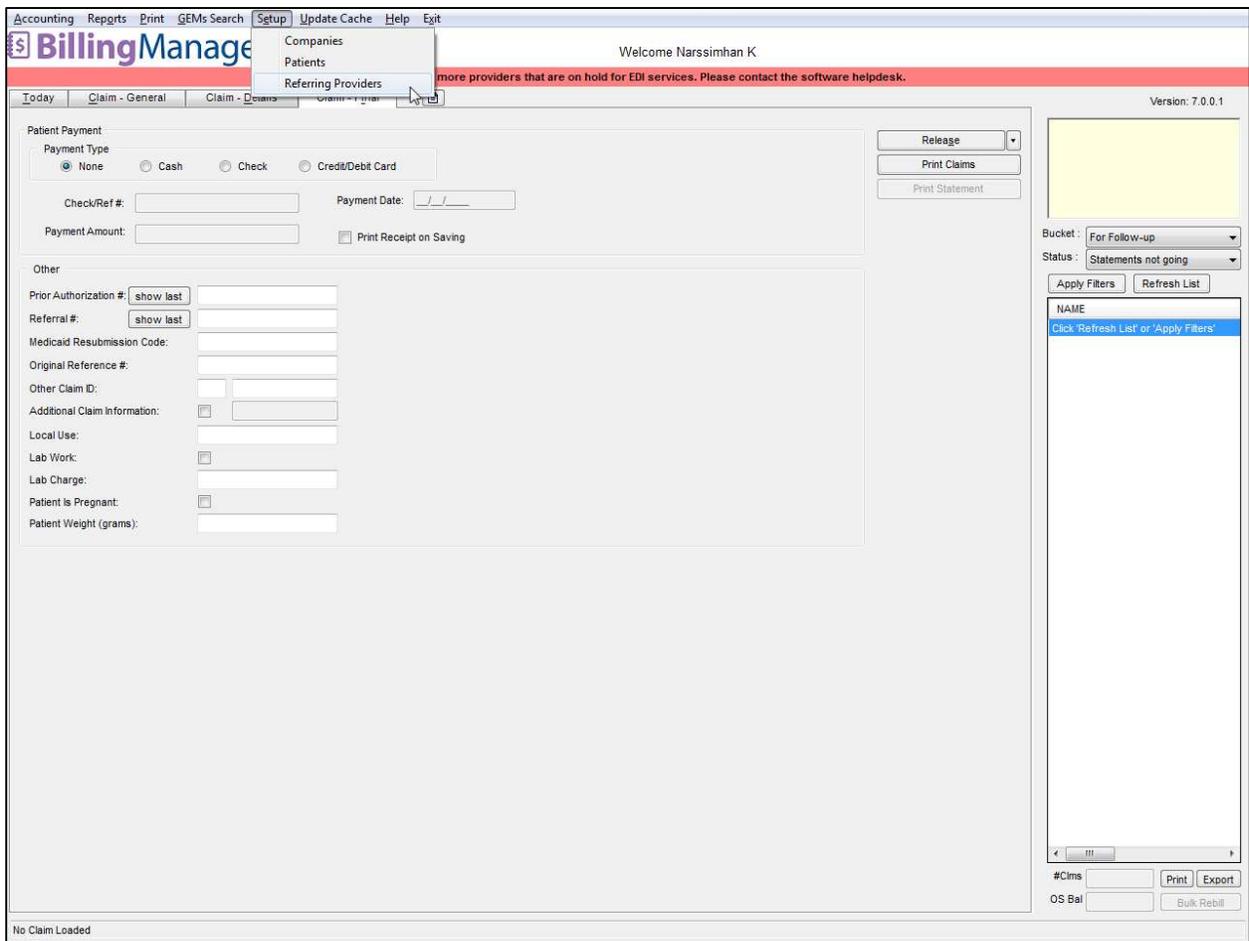
- Enter the required details and click **Save**.
- Custom fields may store strings up to 250 symbols long.

- Custom fields are reported on the Custom Fields tab of the Patient window only; no reports are set up to retrieve custom fields' data and they are not saved into claim information.

## Setting up Referring Provider

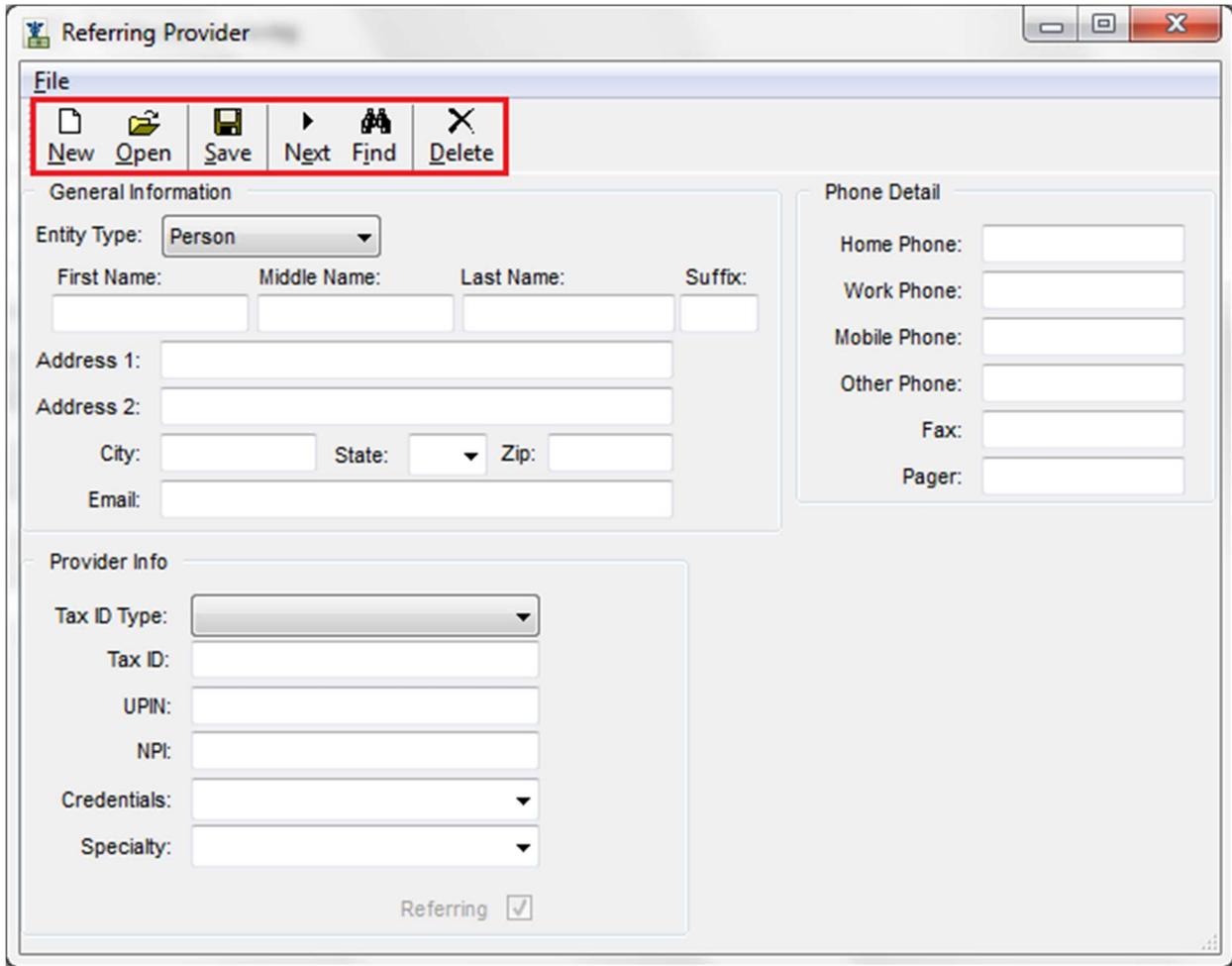
This allows you to record general information about the company, and record Industrial account information. Using this option, you can add a new client record or edit an existing record.

3. Navigate through the **Setup** tab, and click **Referring Provider**.



The screenshot shows the BillingManager software interface. The top menu bar includes Accounting, Reports, Print, GEMs Search, Setup, Update Cache, Help, and Exit. The Setup menu is open, showing options for Companies, Patients, and Referring Providers. The Referring Providers option is highlighted. The main window displays the 'Patient Payment' section with radio buttons for Payment Type (None, Cash, Check, Credit/Debit Card) and input fields for Check/Ref #, Payment Date, and Payment Amount. Below this is the 'Other' section with various input fields and checkboxes for Prior Authorization #, Referral #, Medicaid Resubmission Code, Original Reference #, Other Claim ID, Additional Claim Information, Local Use, Lab Work, Lab Charge, Patient is Pregnant, and Patient Weight (grams). On the right side, there are buttons for Release, Print Claims, and Print Statement. Below these are dropdown menus for Bucket (For Follow-up) and Status (Statements not going), along with Apply Filters and Refresh List buttons. At the bottom right, there are input fields for #Cms and OS Bal, and buttons for Print, Export, and Bulk Rebill. The status bar at the bottom left indicates 'No Claim Loaded'.

4. The **Referring Provider** dialog box is displayed as shown below:



The screenshot shows a web application window titled "Referring Provider". At the top, there is a "File" menu with the following options: New, Open, Save, Next, Find, and Delete. These options are highlighted with a red rectangular box. Below the menu, the form is divided into three main sections:

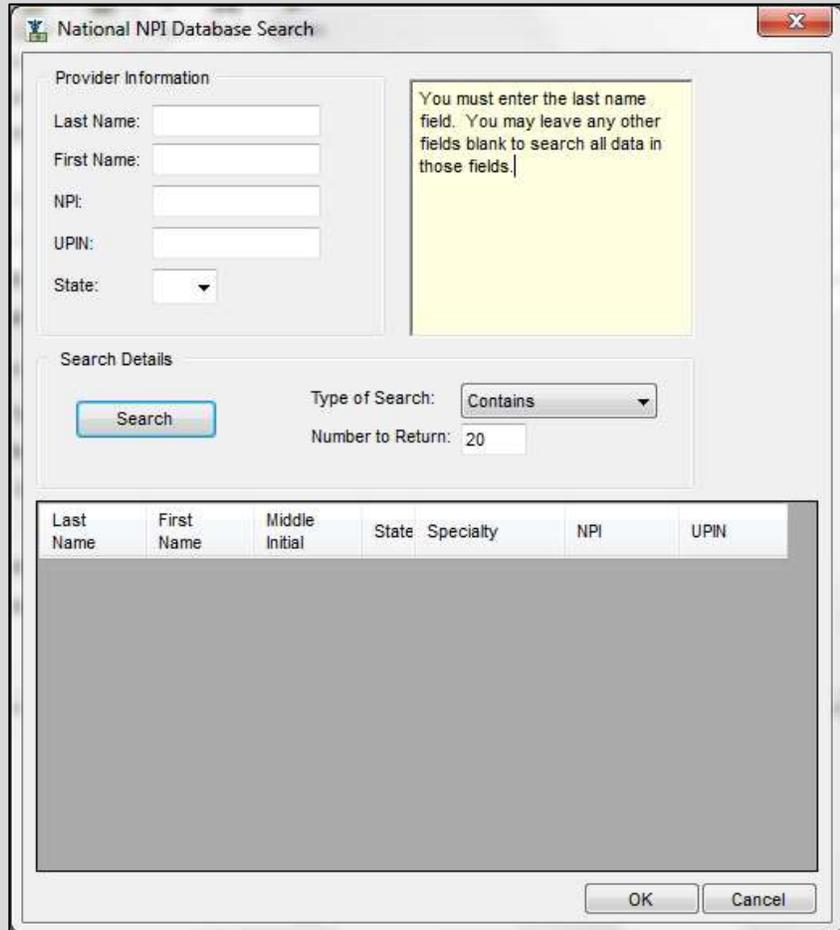
- General Information:** Includes a dropdown for "Entity Type" (set to "Person"), input fields for "First Name", "Middle Name", "Last Name", and "Suffix", "Address 1", "Address 2", "City", "State" (dropdown), "Zip", and "Email".
- Phone Detail:** Includes input fields for "Home Phone", "Work Phone", "Mobile Phone", "Other Phone", "Fax", and "Pager".
- Provider Info:** Includes a dropdown for "Tax ID Type", input fields for "Tax ID", "UPIN", and "NPI", dropdowns for "Credentials" and "Specialty", and a checked checkbox for "Referring".

The highlighted tabs are the common tabs applicable to the entire **General Information** section.

Field	Description
New	Click <b>New</b> to record details of a new company
Open	Click <b>Open</b> to access the details of the existing company. Click <b>Open</b> and select the required company and click <b>OK</b> .
Save	Click <b>Save</b> to save the details of the company information entered.
Next	Click <b>Next</b> to access the previously accessed company information.

Find

Click find and the **National NPI Database Search** dialog box is displayed as shown below.



Last Name	First Name	Middle Initial	State	Specialty	NPI	UPIN
-----------	------------	----------------	-------	-----------	-----	------

**Last Name:** Enter the last name of the person you are looking for.

**First Name:** Enter the first name of the person.

**NPI:** Enter the NPI.

**UPIN:** Enter the UPIN.

**State:** Select the state from the drop down menu.

**Search:** Enter all the details and click search, the information matching the description are displayed.

	<p><b>Type of Search:</b> Enter the type of search, the options available are:</p> <ul style="list-style-type: none"> <li>• Starts with</li> <li>• Equal</li> <li>• Contains</li> </ul> <p><b>Number to Return:</b> Enter the required number of search results which is displayed.</p> <p><b>OK:</b> Select the required provider information from the displayed search results and click OK.</p> <p><b>Cancel:</b> Select cancel to close the <b>National NPI Database Search</b> dialog box.</p>
Delete	Click <b>Delete</b> to permanently remove the details entered.

The following are sections available under the Referring Provider dialog box:

- General Information
- Phone Detail
- Provider Info

## General Information

**General Information**

Entity Type: Person ▼

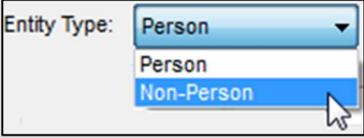
First Name:  Middle Name:  Last Name:  Suffix:

Address 1:

Address 2:

City:  State: ▼ Zip:

Email:

Field	Description
Entity Type	<p>Select the required entity type from the drop down menu. The options available in the drop down menu are:</p> <ul style="list-style-type: none"> <li>• Person</li> <li>• Non-Person.</li> </ul> 
First Name	Enter/Type the first name of the person representing the company in the provided text box.
Middle Name	Enter/Type the middle name of the person representing the company.
Last Name	Enter/Type the last name of the person representing the company.
Suffix	Enter/Type additional information about the person, like letters that indicate the position held by the individual, or educational degree, accreditation, office, or honour.

Address 1	Enter/Type the first line of the company address.
Address 2	Enter/Type the second line of the company address.
City	Enter/Type the name of the city where the company is located.
State	Select the state where the company is located from the provided drop down menu.
Zip	Enter/Type the company's zip code.
Email	Enter/Type the email address.

## Phone Details

Phone Detail	
Home Phone:	<input type="text"/>
Work Phone:	<input type="text"/>
Mobile Phone:	<input type="text"/>
Other Phone:	<input type="text"/>
Fax:	<input type="text"/>
Pager:	<input type="text"/>

Field	Description
Home Phone	Enter/Type the provider's home phone number.
Work Phone	Enter/Type the provider's work phone number.
Mobile Phone	Enter/Type the provider's mobile phone number.
Other Phone	Enter/Type the provider's alternative or additional phone number.
Fax	Enter/Type the provider's fax number.
Pager	Enter/Type the provider's pager number.

## Provider Info

**Provider Info**

Tax ID Type:

Tax ID:

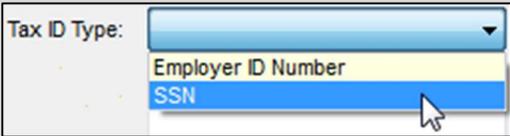
UPIN:

NPI:

Credentials:

Specialty:

Referring

Field	Description
Tax ID Type	<p>Select the provider's tax identification type from the drop down menu. The options available in the drop down menu are:</p> <ul style="list-style-type: none"> <li>• Employer identification number</li> <li>• SSN (Social Security Number).</li> </ul> 
Tax ID	Enter/Type the provider's tax identification number.
UPIN	Enter/Type the provider's UPIN.
NPI	Enter/Type the provider's NPI.
Credentials	Select the provider's credentials from the drop down menu.
Specialty	Select the provider's specialty from the drop down menu.