

Exa® PACS/RIS

Feature Summary

Sending Claims to Collections

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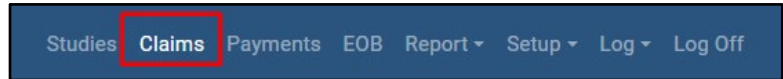
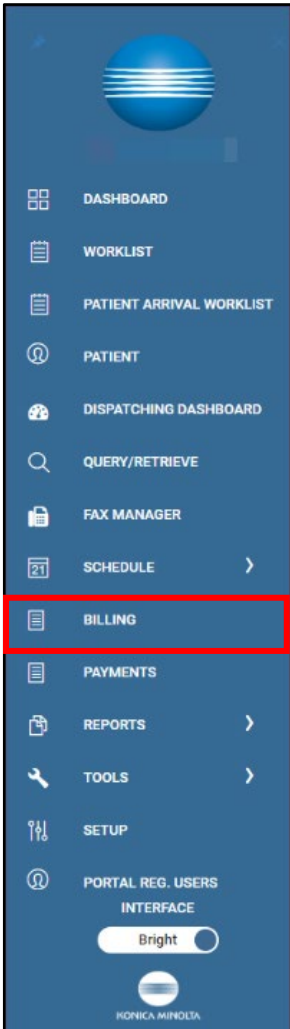
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Introduction to collections

Providers may send a claim to collections when a patient has an outstanding balance for medical services rendered and has yet to make the required payments or arrangements to settle the debt. This typically happens after the medical provider and the patient have gone through a series of billing and collection efforts to resolve the unpaid balance.

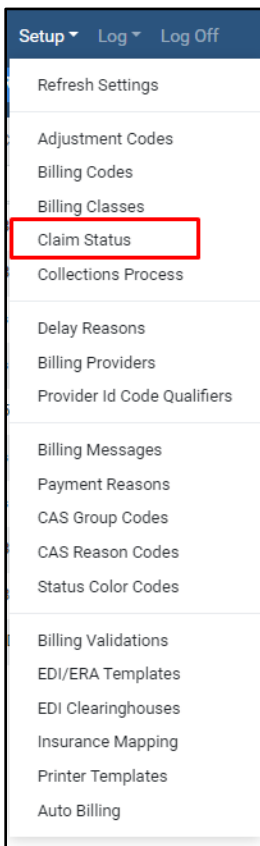
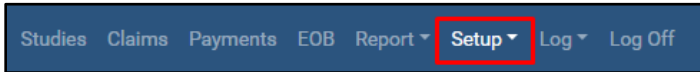
Burger > Billing > Claims



Claim status

To submit a claim to collections, the claims status must be set to **Collections Review**. If the claim status is not available, you can add it as follows:

On the **Claims** screen, on the **Setup** menu, select **Claim Status**.



Select the **Claim Status** option, then select **ADD**.

The image shows a form with three fields: 'Code *' with the value 'CR' and an 'Inactive' checkbox; 'Description *' with the value 'Collections Review'; and 'Display Order *' with the value '1'.

Code: An internal code for the new status.

Description: Type a description for the status. This will be how the new claim status appears.

Display Order: The order in which the new status appears when you right-click a claim.

Send a claim to collections

The claims listed under the "collections review" claim status are now available for placement with a third-party agency.

ALL CLAIMS FOLLOW-UP QUEUE INVOICES DENIED CLAIMS OUTSTANDING											
FOLLOW-UP DATE	BILLING FEE	ORDERING FACILITY	FACILITY	BALANCE	CLAIM STATUS	PATIENT NAME	CLAIM NUMBER	STUDY DATE	CLAIM DATE	DATE OF INJURY	
	\$600.00	KMHA Garner	Garner	\$610.00	Collections Review	Rader, Jessica	3041	09/11/2019	09/11/2019		
	\$100.00	KMHA Garner	Garner	\$0.00	Collections Review	Anderson, Margan	3045	09/18/2019	09/18/2019		
	\$5,980.00	KMHA Garner	Garner	\$5,930.00	Collections Review	Niewind, Danielle	I3055	02/07/2020	04/22/2020		
	\$100.00	KMHA Garner	Garner	\$0.00	Collections Review	American, Chestn	3076	11/01/2020	11/30/2020		
	\$100.00	KMHA Garner	Garner	\$0.00	Collections Review	American*Larch**	3075	11/02/2020	11/30/2020		
	\$0.00	KMHA Garner	Garner	\$0.00	Collections Review	Sam, Smith	3081	02/10/2021	06/02/2021		
11/18/2022	\$2,440.00	KMHA Garner	Garner	\$840.00	Collections Review	Smith, Suzie	3094	09/30/2022	09/30/2022		

Collections agencies typically require a collections report to be submitted. The collections report can be found under the label "Collections" in the Reports Module.

Burger > Billing > Report > Collections

Claim Date * Facilities Billing Provider

01/01/2023 - 12/31/2023 NONE SELECTED - NONE SELECTED - Send claims to collections

VIEW PDF EXCEL CSV XML

The following options are available:

Claim Date: Select a date range.

Facilities: Multiple facilities can be run in one report, or run individually

Billing Provider: This will pull from what will be billed in Box 33 of the CMS -1500 claim form

Send Claims to Collections: Select to change the claim status from Collections Review to Claim in Collections.

When running this report and selecting 'view' or PDF report, you can see a list of the accounts/claims affected.

Claim Date * Facilities Billing Provider

01/01/2023 - 12/31/2023 NONE SELECTED - NONE SELECTED - Send claims to collections

VIEW PDF EXCEL CSV XML

exa Reports » Konica Minolta Healthcare Americas » Collections

Report shows claims that are in the 'Collections Review' claim status.

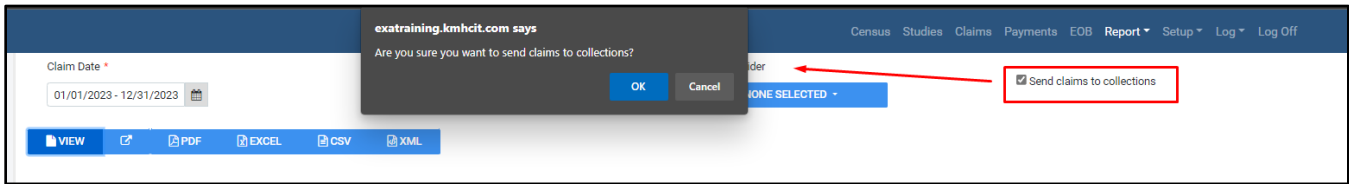
Filter:

Company: Konica Minolta Healthcare Americas Facilities: Billing Provider: Date From: 01/01/2023 Date To: 12/31/2023

Found 2 results

Account #	Claim #	Patient Last Name	Patient First Name	DOB	Account Balance	Service Date
TesN1007	36	Test	Nicole	01/01/2000	\$1,725.00	06/16/2023
TesN1007					\$1,725.00	

If you select the Send Claims to Collections checkbox, a prompt appears when you run the report asking for your confirmation before sending the claim to collections.



To send the necessary information to the third-party placement agency, you can generate a report by selecting either EXCEL or CSV format. This will provide you with the required data for the placement process.

Account #	Claim #	Claim Date	Attending	Referring	Patient Name	Patient Address	Patient City/State/Zip	Patient SSN	Patient Phone	Patient DOB	Guarantor Name	Guarantor Address	Guarantor City/State/Zip	Guarantor SSN
1870389	3081	02/10/2021	Dr. Smith, J	Kumaravel Sam	Smith					08/24/1958				
SS123	3094	09/30/2022	Dr. Smith, J	Demo, Ref: Smith	Suzie	123 Main St	Garner NC	12345		03/04/1992	Niewind Danielle	123 Main St	Garner NC	

The fields in this report include, by each specific encounter:

- Account number
- Claim number
- Claim date
- Attending (rendering) provider
- Referring provider
- Patient name (FML)
- Address, City, State, Zip
- Patient SSN
- Patient Phone number
- DOB
- Guarantor information (address, SSN, Phone
- Total charges
- Total adjustments
- Total paid
- Diagnosis code
- Procedure codes
- Insurance information (primary, secondary, tertiary) name and policy #