

Indian Health Service

RPMS Reports that Impact the Revenue Generation Process

GINA CARLTON

RPMS USER SUPPORT

SANDRA SEALEY, CPB

BUSINESS OFFICE

COORDINATOR, OKC AREA

CINDY STOUT

TRAINING SPECIALIST,

MID

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Understanding the Data

- RPMS Applications That Affect Revenue
 - Patient Registration
 - Practice Management Application Suite (BPRM)
 - ADT/Scheduling (PIMS)
 - Electronic Health Record (EHR)
 - Patient Care Component
 - Dentrix
 - Pharmacy Point of Sale
 - Third Party Billing
 - Accounts Receivable
- Claims vs. Bills
- Provider Counts
 - Primary Provider
- Allowance Category vs. Insurer Type
- Clinic Code vs. Visit Type vs. Department
- Calculating the Aged Date
 - Aging begins when a claim is approved
 - Claim approval creates a bill, which is sent over to Accounts Receivable

Report Schedules and Storage

- Identify a schedule for running reports
 - Daily
 - Monthly
 - Quarterly
 - Yearly
- Generation and Storage
 - Printed
 - Session log saved as a document or file
 - Exported to Host File Server and imported to Excel
 - Tasked Reports option (A/R > MAN > RTSK)
 - Allows for having certain A/R reports automatically generate and export to Host File Server
 - Reference A/R Patch 31 and 35 addendums for details
<https://www.ihs.gov/rpms/applications/administrative/>

Patient Registration and Eligibility



Summary of 3rd Party Resources

(PTRG > THR > AGSM)

- Provides eligibility counts by payer category based on user-defined eligibility start date for patients having visits within the past three years
- Provides the number of patients with Medicare, Medicaid, and Private Insurance or a combination of these insurers
- Used to measure enrollment by category

Summary of 3rd Party Resources

3rd Party eligibility Stats
For Patients with Eligibility: Feb 25, 2023
and having a visit in the past 3 years.
Report Date/Time: FEB 25,2023@09:36:40

UNDUPLICATED PATIENT COUNTS

Medicaid Only:	85
Private Insurance Only:	4315
Medicare A Only:	135
Medicare B Only:	98
Medicare Part A & B Only:	348
Medicare Part D:	396
Medicaid & Medicare:	598
Medicaid & Private Ins.:	243
Medicare & Private Ins.:	65
Medicaid, Medicare, & PI:	112

TOTAL	6385

Listing of Patient Eligibility Counts

(3PB > ELTP > RPEL > PORP)

- Lists entries by patient for visits within a user-defined period and may identify potential third-party eligibility
 - CHS Status
 - VA Eligibility Status
 - Third Party Eligibility
- Displays counts for Billable and Unbillable visits
 - Billable Service Categories: Ambulatory, Hospitalization, Day Surgery, In-Hospital, Telemedicine
 - Unbillable Service Categories: Not Found, Chart Review, Nursing Home, Event, Other

Listing of Patient Eligibility Counts Exported to HFS and Imported to Excel

=====																		
PATIENT ELIGIBILITY STATUS REPORT																		
AUG 20,2022@15:22:12																		
For Visit Dates from 06/01/2021 to 06/30/2022																		
Billing Location(s): 2017 DEMO HOSPITAL																		
* - AGE AS OF REPORT DATE																		
=====																		
REG LOC	HRN	NAME	DEC	BIRTH DATE	SEX	AGE*	BEN	MCR	MCD	PVT	VET	CHS	RESIDENCE	VET Y/N	DATE OF LAST UPD	EMPL STATUS	BILL VISIT	UNBILL VISIT
MHS	135951	LAST NAME, FIRST NAME J		9/8/1951	M	70	33	A		A		C	ALBUQUERQUE		4/20/2022	FULL-TIME	6	1
MHS	102462	MASON, CAMERON JAMES		1/7/1946	M	76	1	A	A			C	LAS VEGAS		10/15/2021	FULL-TIME	1	
MHS	113001	LAST NAME, FIRST NAME		1/12/1973	F	49	1	T	A	A		C	ALBUQUERQUE		8/5/2022	FULL-TIME	9	4
MHS	136546	THOMAS, ANDY		7/1/1956	M	66	1			A		D	RENO	Y	5/25/2022	FULL-TIME	1	
MHS	136679	LAST NAME, FIRST NAME D		8/17/1966	F	56	1		A	A		C	ALBUQUERQUE		1/18/2022	FULL-TIME	3	1
MHS	112233	LAST NAME, DEMO PT		5/28/1982	F	40	1			A		C	MARKLEEVILLE		1/19/2022	FULL-TIME	5	1
MHS	137806	TEEWEE, SEAN		9/10/2008	M	13	1					D	RENO		4/13/2021		6	
MHS	111102	LAST NAME, FIRST NAME M		2/24/1987	M	35	1			A		C	ALBUQUERQUE		12/17/2021	FULL-TIME	2	
MHS	138638	LAST NAME, FIRST NAME B		9/1/1970	F	51	1	A		A	T	D	DUCKWATER		4/29/2022	FULL-TIME	14	7
MHS	138724	LASHURE, BILLY SCOTT		7/30/1933	M	89	18	A				I	OWYHEE		7/31/2022	RETIRED	2	
MHS	120147	EWING, DEBRA A		12/12/1952	F	69	33					I	LAS VEGAS		6/17/2021	FULL-TIME	5	
MHS	125689	LAST NAME, FIRST NAME T		3/7/1996	F	26	33	A	A			C	MOAPA	N	12/10/2021	UNEMPLOYED	5	1
MHS	13569	WEATHERS, STORMY		2/12/1970	F	52	1	A	A	A		C	ALBUQUERQUE	N	12/28/2018		8	2
MHS	116258	JALAPENO, ARIEL		3/4/1950	F	72	1		A	A		C	ALBUQUERQUE	N	7/16/2021		2	
MHS	113116	COFFEE, LEON		3/17/1936	M	86	1	A		A		C	ALBUQUERQUE	N	9/1/2020		1	
MHS	126963	AIRMAN, SHELBY		5/30/1990	F	32	1				A	C	ALBUQUERQUE	Y	8/29/2019		3	
MHS	144781	LAST NAME, FIRST NAME		5/12/1950	M	72	33			A	T	I	ALBUQUERQUE	N	6/23/2022	FULL-TIME	13	3
MHS	521185	REACHER, JACK		1/1/1960	M	62	1	A				P	BAD NATION	N	6/24/2021		2	
MHS	133556	DEMO, MEDICAL		12/2/1960	M	61	1	T		A		C	ALBUQUERQUE	N	9/20/2021		1	1
MHS	15948	LAST NAME, FIRST NAME		9/8/1940	M	81	1	A	A			C	ALBUQUERQUE	Y	4/29/2022	RETIRED	2	1
MHS	18622	DEMO, UFT G		12/12/1980	F	41	1			A		C	ALBUQUERQUE	N	8/8/2022		1	
PATIENT COUNT: 21																		
VISIT COUNT: 83																		

Visit Counts by Veterans

(3PB > ELTP > RPEL > VTRP)

- Provides a list of patient names identified as veterans from page 6 of Patient Registration
- May be used to capture VAMB eligibility
- Locked with a security key: ABMDZ VET VISITS

Visit Counts by Veterans

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=====
VET LISTING of VISITS                                AUG 18,2022@09:43:35   Page 1
For VISIT DATES: 01/01/2022 thru 06/30/2022
Billing Location: DEMO HOSP
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PATIENT NAME	HRN	DOB		VISIT CNT
DEMO, JANE	12543	02/16/1945	111111111	1
DEMO, JOHN	12356	01/01/1950	222222222	2
DEMO, PATIENT	12233	06/03/2003	333333333	11
DEMO, TEST	17631	01/09/1947	444444444	1
PATIENT, ONE	15531	09/06/1945	555555555	1
PATIENT, THREE	12345	08/02/1967	666666666	1
PATIENT, TWO	17649	12/14/1964	777777777	1
VETERAN, PATIENT	15161	04/01/1945	888888888	2

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      DEMO HOSPITAL  18 visits    7 registered
      AMBULANCE     2 visits     0 registered

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(REPORT COMPLETE):

Visits by Commissioned Officers and Dependents

(PCC > MANG > BILL > VIS)

- Located in the Billing Reports section of the PCC Management Reports option, this report provides a list of visits for commissioned officers and their dependents seen within a user-specified date range
 - Generated by Inpatient, Outpatient or Dental
- Classification/Beneficiary Status = Commissioned Officer or Dependents of Comm Officer
- A list is generated and submitted to the Beneficiary Medical Program. Visit is processed and paid at the Medicaid All-Inclusive Rate.

Visits by Commissioned Officers and Dependents

2017 DEMO HOSPITAL

Page 1

POTENTIALLY BILLABLE VISITS FOR: Commissioned Officers/Dependents

Visit Dates: JAN 1,2023 and AUG 7,2023

SERVICE CATEGORY OF VISIT: ALL VISIT SERVICE CATEGORIES

HRCN	Patient Name	Date of Birth			
123456	DEMO,MISTER PHS COMMISSIONED OFFICER	DEC 20, 1950			
	Visit Date	Category	PRV ICD DX	PROVIDER NARRATIVE	
	MAR 05, 2023	AMBULATORY	52 K02.3	Arrested Dental Cari	
	APR 11, 2023	AMBULATORY	00 J45.998	ASTHMA	
654321	PATIENT,DEMO PHS COMMISSIONED OFFICER	JAN 10, 1971			
	Visit Date	Category	PRV ICD DX	PROVIDER NARRATIVE	
	JAN 16, 2023	AMBULATORY	21 523.9	Gum pain, bilateral	
	JAN 28, 2023	AMBULATORY	09 V68.1	Dispensing medicatio	

Total Number of Visits for Commissioned Officers/Dependents: 4

RUN TIME (H.M.S): 0.0.4

End of report. HIT RETURN:

Claims Reports



Brief (single-line) Claim Listing

(3PB > RPTP > BRRP)

- Also known as the “Flagged as Billable” or BRRP report
- Worksheet of active claims ready to be billed (billable status)
 - Payer
 - Service
- Identifies claims that have been ‘rolled’ from Accounts Receivable to be billed to the next payer
- Claims on the report represent potential revenue
- Summarized listing generated at month end to display open claims ready to be billed

Brief (single-line) Claim Listing

Brief Listing

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BRIEF LISTING of CLAIMS Flagged as Billable AUG 21,2022@11:31:14 Page 1
 for ALL BILLING SOURCES with VISIT DATES from 01/01/2022 to 08/21/2022
 Billing Location: DEMO HOSP

=====

ST Patient	HRN	Active Insurer	Claim Number	Visit Date	Clinic

Visit Location: DEMO HOSPITAL					
Visit Type: INPATIENT					
FAB	PATIENT,ONE	1502 LIGHTING INSURANCE C	31705	01/07/2022	GENERAL

Subtotal:1					
Visit Type: OUTPATIENT					
EDT	PATIENT,TWO	654210 NEVERPAY INSURANCE	31713	03/28/2022	GENERAL
EDT	DEMO,PATIENT	2 BS OF MASSACHUSETTS	31714	04/04/2022	IMMUNIZAT
EDT	DEMO,PATIENT	2 BS OF MASSACHUSETTS	31717	07/05/2022	GENERAL
EDT	DEMO,PATIENT	2 BS OF MASSACHUSETTS	31722	07/03/2022	GENERAL
FAB	PATIENT,THREE	99090 MEDICARE	31718	06/08/2022	HYPERTENS

Subtotal:5					
Visit Type: PROFESSIONAL COMPONENT					
EDT	PATIENT,FIVE	1122 BCBS OF NEW MEXICO	31709	01/09/2022	EMERGENCY
EDT	PATIENT,SIX	99090 MEDICARE	31719	06/08/2022	HYPERTENS

Subtotal:2					
=====					
Total:8					

(REPORT COMPLETE):

Brief (single-line) Claim Listing

Statistical Summary

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BRIEF LISTING of CLAIMS Flagged as Billable JUL 31,2022@11:36:09 Page 1
for ALL BILLING SOURCES
Billing Location: DEMO HOSP

=====

Location	Visit Type	Number of Claims
DEMO HOSPITAL	INPATIENT	14
	OUTPATIENT	140
	MENTAL HEALTH	2
	OBSERVATION	2
	PHYSICAL THERAPY	2
	EMERGENCY ROOM	3
	TELEMED ORIGINATING	1
	CHIROPRATIC	1
	VIRTUAL CHECK-IN	2
	E-VISIT	1
	TELEMED DISTANT	1
	AMBULATORY SURGERY	9
	NON-EMERG TRANSPORT	1
	RADIOLOGY	1
	LABORATORY	2
	PHARMACY	3
	DENTAL	7
	PROFESSIONAL COMPONENT	49

	Total:	242

(REPORT COMPLETE):

Cancelled Claims Report

(3P > RPTP > CCRP)

- Counts the number of claims that have been cancelled
 - Cancelling official's name
 - Cancellation reason
- Claim is permanently deleted
- Indicates potential system issues
- Indicates additional training might be needed for staff
- May also indicate potential performance issues
- Recommended to run weekly and at month end

Cancelled Claims Report

Brief Listing

=====

CANCELLED CLAIMS LISTING for ALL BILLING SOURCES AUG 21,2022@16:22:38 Page 1
 with CANCELLATION DATES from 08/01/2022 to 08/21/2022
 Billing Location: DEMO HOSP

=====

Patient	HRN	Active Insurer	Claim Number	Visit Date	Rsn

Cancelling Official: BILLER,SUPER					
Visit Location: DEMO HOSPITAL					
Visit Type: INPATIENT					
PATIENT,ONE	3049	MINNESOTA MEDICAID	30933	04/12/2021	14

Subcount: 1					
Visit Type: OUTPATIENT					
PATIENT,TWO	5194	BC/BS OF MICHIGAN	31627	01/17/2021	33
PATIENT,THREE	99095	MUTUAL OF OMAHA	31555	03/27/2020	11
PATIENT,FOUR	1501	PRUDENTIAL HEALTHCARE	31703	12/11/2021	2
PATIENT,FIVE	81021	MEDICARE	30665	08/22/2018	3
PATIENT,SIX	7653	EXTERNA	31585	07/07/2020	1

Subcount: 6					

Count: 7					

Reasons on report:

Rsn	Description	#times on report
1	ORPHAN CLAIM CREATED IN ERROR	1
2	DUPLICATE CLAIM CREATED	2
3	ELIGIBILITY NOT FOUND	1
11	OTHER	1
14	LEFT WITHOUT BEING SEEN	1
33	CANCELLED DUE TO MERGED CLAIM	1

(REPORT COMPLETE):

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CANCELLED CLAIMS LISTING for ALL BILLING SOURCES AUG 21,2022@16:26:16 Page 1
 with CANCELLATION DATES from 01/01/2020 to 08/21/2022
 Billing Location: DEMO HOSP

=====

Location	Visit Type	Number of Claims
Cancelling Official: BILLER,SUPER		
DEMO HOSPITAL	OUTPATIENT	2
	Subtotal:	2
Cancelling Official: USER,ONE		
DEMO HOSPITAL	INPATIENT	3
	PROFESSIONAL COMPONENT	1
	Subtotal:	4
Cancelling Official: BILLER,FAST		
DEMO HOSPITAL	OUTPATIENT	3
	DENTAL	1
	Subtotal:	4
	Total:	10

E N D O F R E P O R T

Cancelled Claims Report

Statistical Summary

Closed Claims Report

(3PB > RPTP > CLRP)

- Counts the number of claims that have been closed
 - Closing official's name
 - Closed reason
- Indicates potential system issues
- Indicates additional training might be needed for staff
- May also indicate potential performance issues

Closed Claims Report

Brief Listing

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BRIEF LISTING of CLAIMS Closed Claims Report AUG 25,2022@10:48:13 Page 1
for ALL BILLING SOURCES with CLOSED DATES from 01/01/2020 to 08/25/2022
Billing Location: 2017 DEMO HO

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An "*" beside the claim number means the claim has been closed multiple times

Patient	HRN	Active Insurer	Claim Number	Visit Date	Reason
---------	-----	----------------	--------------	------------	--------

Closing Official: BILLER,SUPER

Visit Location: 2017 DEMO HOSPITAL

Visit Type: INPATIENT

LAST NAME,FIRST	144781	VA MEDICAL B	402560*	10/11/2021	UNBILLABLE DUE TO
LAST NAME,FIRST	144781	AETNA HEALTH	402609*	04/19/2022	UNBILLABLE VISIT T

Subcount: 2

Visit Type: OUTPATIENT

DEMO, 139614 R/S	MEDI-CAL	402258*	12/22/2018	ORPHAN CLAIM CREAT	
LAST NAME,FIRST	138638	DENTAL PLAN	402434*	06/30/2020	ORPHAN CLAIM CREAT
LAST NAME,FIRST	136679	NEW MEXICO M	402509*	06/19/2021	UNBILLABLE DUE TO

Subcount: 3

Count: 5

(REPORT COMPLETE):

Pending Claims Status Report

(3PB > RPTP > PCRCP)

- Counts the number of claims that have been placed into a Pending status
 - Pended claims are waiting to be billed
 - Missing data
 - Pending provider applications
- Identifies coding or data entry backlogs
- Identifies administrative backlogs

Pending Claims Status Report

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=====
PENDING CLAIMS STATUS LISTING                      AUG 25,2022@10:59:25   Page 1
for ALL BILLING SOURCES with PENDED DATES from 01/01/2020 to 08/25/2022
Billing Location: 2017 DEMO HO
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Patient           HRN           Claim  Visit  Clinic  Reason
Number  Date
-----
Visit Location: 2017 DEMO HOSPITAL
  
```

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Status Updater: BILLER,SUPER
Visit Type: OUTPATIENT
  
```

```

Active Insurer: BLUE CROSS/BLUE SHIELD
LAST NAME,FIRST  138638  402421  05/01/2020  GENERAL  8-PIN# License Missi
LAST NAME,FIRST  138638  402422  05/28/2020  GENERAL  8-PIN# License Missi
LAST NAME,FIRST  113001  402261  12/28/2018  GENERAL  14-Missing Referring
  
```

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Active Insurer: MEDICARE
LAST NAME,FIRST  113001  402424  06/01/2020  GENERAL  5-Missing POV
  
```

```

-----
Subtotal: 4
-----
Total: 4
  
```

```

REASONS:
5-Missing POV
8-PIN# License Missing
14-Missing Referring Provider information
  
```

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E N D   O F   R E P O R T
  
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Claim Generator Productivity Report

(3P > TMTP > TMRP > CGTM)

- Released in 3PB Patch 35, provides information on the visits that the claim generator has reviewed
 - Total visit count
 - How many claims were generated
 - Count of visits that were rechecked – rechecked visits are visits that were initially checked but never generated a claim and will continue to be checked until a claim is generated or designated unbillable
- Indicates whether the claim generator ran automatically (AUTO) or if it was run manually (CG1P)
- Identifies dates that the claim generator did not run
- Provides information on Initiate Back Billing Check option (MGTP > BKMG)
 - Who ran it, when, date entered for backbilling check
- Allows for viewing detailed claim generator activity and identifying issues with claims not being generated
 - May also compare to the coding backlog

Claim Generator Productivity Report

Printer

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=====
CLAIM GENERATOR PRODUCTIVITY REPORT                                AUG 7,2023@14:24:51   Page 1
GENERATED BY: BILLER,SUPER
  for Claim Generator Run Dates 07/01/2023 to 07/10/2023
Parent Location: 2017 DEMO HOSP
For Visit Locations: 2017 DEMO HOSP
=====
  
```

CG Run Date	Loc	Type	Backbill Check?	# Visits	# Claims Generated	# Visits Recheckd
07/01/2023	DHSP	AUTO		426	387	128
07/02/2023	DHSP	AUTO		2878	186	2314
07/03/2023	DHSP	AUTO		123	101	0
07/04/2023	DHSP	AUTO		226	214	0
07/04/2023	DHSP	CG1P		73	64	22
07/05/2023	DHSP	AUTO		96	85	0
07/06/2023	DHSP	AUTO		43	38	9
07/07/2023	DHSP	AUTO		87	81	0
07/08/2023	<<CLAIM GENERATOR NOT RUN - NO DATA TO PRINT>>					
07/09/2023	DHSP	AUTO		214	206	0
07/10/2023	DHSP	AUTO		92	87	4
Totals for 2017 DEMO				276	31	244
GRAND TOTAL				276	31	244

BACKBILLING CHECKS

Date	Queued From Location	Initiated By	Backbill Date
07/01/2023@08:08:54	2017 DEMO	BILLER,SUPER	06/01/2023

End of report

Claim Generator Productivity Report

Delimited Detail Imported to Excel Columns A - L

=====											
CLAIM GENERATOR PRODUCTIVITY REPORT AUG 1,2023@09:46:22 Page 1											
GENERATED BY: CARLTON,GINA											
for Claim Generator Run Dates 07/30/2021 to 08/01/2023											
Parent Location: 2017 DEMO											
For Visit Locations: 2017 DEMO, DSAT											
=====											
CG Run Date	Visit Location	Type	Who Ran Option	Visit IEN	Visit Date/Time	Patient	HRN	BKMG'd Visit	Rechecked Visit	Hospital Location	Clinic
10/12/2021@15:30:44	8241-2017 DEMO	CG1P	BILLER,SUPER	1507197	08/12/2021@09:00:00	DEMO,BCBS AUTOSPLIT	143220	N	N		GENERAL
12/27/2022@08:45:01	8241-2017 DEMO	AUTO	BILLER,SUPER	1506972	03/31/2021@12:20:00	DEMO,MEDICAL	143225	N	Y	DEMO CLINIC	
05/18/2023@09:45:00	8241-2017 DEMO	AUTO	BILLER,SUPER	1507322	02/12/2023@09:00:00	DEMO,MMC PATIENT	148915	N	Y		GENERAL
05/18/2023@09:45:00	8241-2017 DEMO	AUTO	BILLER,SUPER	1507323	03/10/2023@09:00:00	DEMO,MMC PATIENT	148915	N	Y		GENERAL
05/18/2023@11:56:21	8241-2017 DEMO	CG1P	BILLER,SUPER	1507326	05/01/2023@09:00:00	DEMO,NARRY	13578	N	N		GENERAL

Claim Generator Productivity Report

Delimited Detail Imported to Excel

Columns M - T

Service Category	Claim Status (THIRD PARTY BILLED)	Claims	Active Insurer	Primary Provider	DXs	Review/Chart Audit Status Date	Review/Chart Audit Status
AMBULATORY	24-CLAIM CREATED	402860	NEW MEXICO BC/BS INC	COOPER,STEVEN	G43.111/I15.9/R11.2	10/12/2021@10:59:13	R
HOSPITALIZATION	60-VISIT IN REVIEW STATUS	NO CLAIM					
AMBULATORY	25-EXISTING CLAIM MODIFIED	NO CLAIM		COOPER,STEVEN	I15.9	05/15/2023@09:47:28	R
AMBULATORY	25-EXISTING CLAIM MODIFIED	NO CLAIM		COOPER,STEVEN	I15.9	05/15/2023@12:04:26	R
IN HOSPITAL	24-CLAIM CREATED	403091	NARRATIVE INSURANCE	COOPER,STEVEN	I15.9	05/18/2023@11:56:08	R

Productivity



Employee Productivity Report

(3PB > RPTP > PRRP)

- Provides counts on all billing activity for each billing and/or Point of Sale technician including
 - The number of claims approved
 - The number of bills exported
 - The number of claims cancelled
 - The number of bills cancelled
 - The number of claims that have been pended
 - The number of claims that have been opened and closed
- Security key ABMDZ EMP PROD REPORT allows user to run report for other employees
 - Without the security key assigned, users can only run for themselves
- Aids in monitoring biller performance
 - Medicare/Medicaid vs Private Insurance
 - Inpatient vs Outpatient
- May provide justification for additional positions
- Monitors performance improvement

Employee Productivity Report

Statistical Summary

WARNING: Confidential Patient Information, Privacy Act Applies

EMP PRODUCTIVITY REPORT run by SUPERVISOR,SUSIE JUNE 03,2022@12:40:49 Page 1
 for ALL BILLING SOURCES with ACTIVITY DATES from 06/01/2022 to 06/02/2022
 for Both Billing and POS staff
 Billing Location: 2017 DEMO HO

BILLING TECHNICIAN	APPRV BILLS	EXPORT BILLS	CXL'D CLAIMS	CXL'D BILLS	PEND CLAIMS	OPEN CLAIMS	CLOSE CLAIMS
2017 DEMO HOSPITAL							
BILLER,ONE	0	0	0	0	0	1	0
BILLER,TWO	2	1	0	0	0	0	0
BILLER,THREE	2	2	0	0	0	0	0
BILLER,FOUR	32	15	1	0	0	1	1
2017 DEMO HOSPITAL totals:	36	18	1	0	0	2	1
ALL LOCATIONS GRAND TOTAL							
BILLER,ONE	0	0	0	0	0	1	0
BILLER,TWO	2	1	0	0	0	0	0
BILLER,THREE	2	2	0	0	0	0	0
BILLER,FOUR	32	15	1	0	0	1	1
ALL LOCATIONS totals:	36	18	1	0	0	2	1

(REPORT COMPLETE):

Employee Productivity Report

Brief Listing

WARNING: Confidential Patient Information, Privacy Act Applies

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EMP PRODUCTIVITY REPORT run by SUPERVISOR,SUSIE JUN 03,2022@12:42:58 Page 1
 for ALL BILLING SOURCES with ACTIVITY DATES from 06/01/2022 to 06/02/2022
 for Both Billing and POS staff
 Billing Location: 2017 DEMO HO

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BILLING TECHNICIAN	APPRV BILLS	EXPORT BILLS	CXL'D CLAIMS	CXL'D BILLS	PEND CLAIMS	OPEN CLAIMS	CLOSE CLAIMS
BILLER, ONE	0	0	0	0	0	1	0
BILLER, ONE 06/01/2022 MHS	0	0	0	0	0	1	0
BILLER, TWO	2	1	0	0	0	0	0
BILLER, TWO 06/01/2022 MHS	2	1	0	0	0	0	0
BILLER, THREE	2	2	0	0	0	0	0
BILLER, THREE 06/02/2022 MHS	2	2	0	0	0	0	0
BILLER, FOUR	32	15	1	0	0	1	1
BILLER, FOUR 06/01/2022 MHS	1	0	0	0	0	0	0
06/02/2022 MHS	31	15	1	0	0	1	1

(REPORT COMPLETE):

EMP PRODUCTIVITY REPORT run by LUJAN,ADRIAN AUG 20,2022@12:25:36 Page 1
 for ALL BILLING SOURCES with ACTIVITY DATES from 06/01/2021 to 06/30/2021
 for Both Billing and POS staff
 Billing Location: 2017 DEMO HO

Location	Billing Technician	Activity Date	Claim/Bill Number	Visit Type	Clinic	Service Date	Active Insurer	Record Type	Amount Billed	Patient	Insurer Type	Eligibility Status
2017 DEMO HOSPITAL	CARLTON,GINA	06/01/2021@10:45:28	402241	111-INPATIENT	1-GENERAL	11/1/2018	O/P MEDI-CAL 9	Open		0WEATHERS,STORMY	MEDICAID FI	CHS & DIRECT
2017 DEMO HOSPITAL	LUJAN,ADRIAN	06/17/2021@11:19:51	402500A	131-OUTPATIENT	1-GENERAL	5/18/2021	MUTUAL OF OMAHA	Approved	295.73	EWING,DEBRA A	PRIVATE	INELIGIBLE
2017 DEMO HOSPITAL	LUJAN,ADRIAN	06/17/2021@11:21:40	402500A	131-OUTPATIENT	1-GENERAL	5/18/2021	MUTUAL OF OMAHA	Exported	295.73	EWING,DEBRA A	PRIVATE	INELIGIBLE
2017 DEMO HOSPITAL	LUJAN,ADRIAN	06/17/2021@11:36:35	402501A	131-OUTPATIENT	1-GENERAL	5/18/2021	MEDICARE	Approved		414LASHURE,BILLY SCOTT	MEDICARE FI	INELIGIBLE
2017 DEMO HOSPITAL	PINTO-YAZZIE,ANGELA	06/30/2021@10:24:52	402505A	131-OUTPATIENT	102-AMBULANCE	6/9/2021	NEW MEXICO BC/BS INC	Approved		500JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	PINTO-YAZZIE,ANGELA	06/30/2021@10:24:53	402505B	131-OUTPATIENT	102-AMBULANCE	6/9/2021	NEW MEXICO BC/BS INC	Approved		25JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	PINTO-YAZZIE,ANGELA	06/30/2021@10:25:08	402505A	131-OUTPATIENT	102-AMBULANCE	6/9/2021	NEW MEXICO BC/BS INC	Exported		500JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	PINTO-YAZZIE,ANGELA	06/30/2021@10:28:02	402505B	131-OUTPATIENT	102-AMBULANCE	6/9/2021	NEW MEXICO BC/BS INC	Exported		25JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/11/2021@12:23:11	402478A	111-INPATIENT	1-GENERAL	4/19/2021	MEDICARE	Approved	25,417.00	LAST NAME,FIRST NAME	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:43:58	402431B	100-SECONDARY PAYOR (OUTPT)	1-GENERAL	6/29/2020	MEDICARE	Approved	103.5	LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:44:33	402431B	100-SECONDARY PAYOR (OUTPT)	1-GENERAL	6/29/2020	MEDICARE	Exported	103.5	LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:44:37	402478A	111-INPATIENT	1-GENERAL	4/19/2021	MEDICARE	Exported	25,417.00	LAST NAME,FIRST NAME	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:46:42	402489A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Approved	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:49:14	402490A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Approved	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:49:34	402489A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Exported	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:49:59	402490A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Exported	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@10:55:39	402489B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Approved	475	LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@11:00:17	402490B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Approved	475	LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@11:00:52	402489B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Exported	475	LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/15/2021@11:01:20	402490B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Exported	475	LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	6/16/2021@15:40:33	402491A	131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Exported	285.31	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:40:33	402491A	131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Approved	285.31	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:40:54	402492A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Approved	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:41:27	402493A	131-OUTPATIENT	1-GENERAL	6/2/2021	BLUE CROSS/BLUE SHIELD	Approved	263.02	LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:41:49	402494A	131-OUTPATIENT	1-GENERAL	6/14/2021	BLUE CROSS/BLUE SHIELD	Approved	179	LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:42:12	402495A	131-OUTPATIENT	1-GENERAL	6/2/2021	UNITED HEALTHCARE	Approved	183.02	LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:42:23	402496A	131-OUTPATIENT	1-GENERAL	6/7/2021	UNITED HEALTHCARE	Approved	263.02	LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:42:31	402497A	131-OUTPATIENT	1-GENERAL	6/11/2021	UNITED HEALTHCARE	Approved	183.02	LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:43:32	402493A	131-OUTPATIENT	1-GENERAL	6/2/2021	BLUE CROSS/BLUE SHIELD	Exported	263.02	LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:43:43	402494A	131-OUTPATIENT	1-GENERAL	6/14/2021	BLUE CROSS/BLUE SHIELD	Exported	179	LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:43:46	402492A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Exported	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:43:50	402495A	131-OUTPATIENT	1-GENERAL	6/2/2021	UNITED HEALTHCARE	Exported	183.02	LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:43:50	402496A	131-OUTPATIENT	1-GENERAL	6/7/2021	UNITED HEALTHCARE	Exported	263.02	LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:43:50	402497A	131-OUTPATIENT	1-GENERAL	6/11/2021	UNITED HEALTHCARE	Exported	183.02	LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:48:46	402498A	131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Approved	285.31	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:49:04	402499A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Approved	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:49:17	402498A	131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Exported	285.31	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/16/2021@15:49:17	402499A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Exported	263.02	LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/17/2021@10:55:56	402497B	131-OUTPATIENT	1-GENERAL	6/11/2021	AETNA HEALTH PLANS	Approved	94	LAST NAME,DEMO PT	HMO	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/17/2021@11:10:59	402495B	131-OUTPATIENT	1-GENERAL	6/2/2021	AETNA HEALTH PLANS	Approved	50	LAST NAME,DEMO PT	HMO	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/17/2021@11:51:56	402491	131-OUTPATIENT	1-GENERAL	6/7/2021	MEDICARE	Closed		0LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/17/2021@11:53:01	402491	131-OUTPATIENT	1-GENERAL	6/7/2021	MEDICARE	Open		0LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
2017 DEMO HOSPITAL	STOUT,CINDY	06/28/2021@11:07:09	402506	131-OUTPATIENT	1-GENERAL	6/1/2021	BENEFICIARY PATIENT (INDIAN)	CxlClaim		0DEMO,PATIENT B	INDIAN PATIENT	CHS & DIRECT

Posting Productivity Report

(A/R > RPT > FRM > PPR)

- Scheduled for release in A/R patch 35 (currently in development and testing)
- Provides counts and dollar amounts for each A/R technician
 - Posting date
 - Number of payments posted with total dollar amount
 - Number of adjustments posted with total dollar amount
 - Number of refunds posted with total dollar amount
- Security key BARZ EMP PROD RPT allows user to run report for other employees
 - Without the security key assigned, users can only run for themselves
- Aids in monitoring A/R technician performance
- May provide justification for additional positions
- Monitors performance improvement

Posting Productivity Report

Statistical Summary Only

WARNING: Confidential Patient Information, Privacy Act Applies

EMP PRODUCTIVITY REPORT run by POSTER,ONE

AUG 9,2023@15:38 Page 1

STATISTICAL SUMMARY ONLY for POSTER,ONE

at ALL visit location regardless of Billing Location with ACTIVITY DATES

from 03/01/2023 to 03/02/2023

A/R TECHNICIAN	ADJUSTMENTS		UN- ALLOC	REFUND	MESSGE	
	PAYMNT	CREDIT				DEBIT
2017 DEMO POSTER,ONE	11	19	4	3	1	1
2017 DEMO totals:	11	19	4	3	1	1
ALL LOCATIONS GRAND TOTAL POSTER,ONE	11	19	4	3	1	1
ALL LOCATIONS totals:	11	19	4	3	1	1

<END OF REPORT>

Posting Productivity Report

Brief Listing

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EMP PRODUCTIVITY REPORT run by POSTER,ONE          AUG 9,2023@15:37   Page 1
Brief Listing for POSTER,ONE
at ALL Visit location regardless of Billing Location with ACTIVITY DATES
from 03/01/2023 to 03/02/2023
* - Denotes entries were posted using the ERA
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A/R TECHNICIAN		PAYMENTS	ADJUSTMENTS		REFUNDS				
DATE	LOC		CREDITS	DEBITS					
POSTER,ONE		11	995.00	19	12,069.93	4	1,504.00	1	100.00
POSTER,ONE									
03/01/23	DMH	7	0.00	1	1,000.00	0	0.00	0	0.00
03/02/23*	DMH	4	4.00	4	2.00	0	0.00	0	0.00
TOTALS:		11	995.00	19	12,069.93	4	1,504.00	1	100.00

<END OF REPORT>

Posting Productivity Report - Validator

WARNING: Confidential Patient Information, Privacy Act Applies													
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EMP PRODUCTIVITY REPORT run by POSTER,ONE AUG 9,2023@15:41 Page 1													
VALIDATOR (delimited HFS file) for POSTER,ONE													
at ALL Visit Location regardless of Billing Location with ACTIVITY DATES													
from 03/01/2023 to 03/02/2023													
=====													
Session ID	Transaction IEN	Transaction Date	Location	A/R Technician	Bill Number	Patient	Transaction Type	Transaction Adjustment Amount Category	Adjustment Type	A/R Account	Insurer Type	Allowance Category	ERA Flag
NO CASH SESS	3230301.140418.42	3/1/2023	2017 DEMO	POSTER,ONE	NO BILL	NO PATIENT	UN-ALLOCATED	\$50.00		NEW MEXICO BC/BS INC			
3230104.101842	3230301.093014.47	3/23/2023	2017 DEMO	POSTER,ONE	402490A-DH-13578	DEMO,PATIENT	ADJUST ACCOUNT	\$1,000.00 (4)NON PAYMENT	(21)Chrgs Excd Max Allowable Amt	DEMO,NARRY	PRIVATE INSURANCE	PRIVATE INSURANCE	
3230104.101842	3230324.104126.58	3/24/2023	2017 DEMO	POSTER,ONE	402489A-DH-13578	DEMO,NARRY	PAYMENT	\$5.00		NARRATIVE INSURANCE	PRIVATE INSURANCE	PRIVATE INSURANCE	
3230104.101842	3230331.150239.60	3/31/2023	2017 DEMO	POSTER,ONE	402481A-DH-13578	DEMO,NARRY	ADJUST ACCOUNT	\$299.00 (4)NON PAYMENT	(21)Chrgs Excd Max Allowable Amt	NARRATIVE INSURANCE	PRIVATE INSURANCE	PRIVATE INSURANCE	
3230104.101842	3230331.150308.61	3/31/2023	2017 DEMO	POSTER,ONE	402481C-DH-13578	DEMO,NARRY	ADJUST ACCOUNT	\$295.00 (4)NON PAYMENT	(21)Chrgs Excd Max Allowable Amt	NEW MEXICO MEDICAID	MEDICAID FI	MEDICAID	
3230104.101842	3230331.150335.62	3/31/2023	2017 DEMO	POSTER,ONE	402487A-DH-13578	DEMO,NARRY	ADJUST ACCOUNT	\$3,221.72 (13)DEDUCTIBLE	(726)Deductible - Major Medical	NARRATIVE INSURANCE	PRIVATE INSURANCE	PRIVATE INSURANCE	
3230104.101842	3230403.092755.73	4/3/2023	2017 DEMO	POSTER,ONE	402461A-DH-13578	DEMO,NARRY	ADJUST ACCOUNT	\$0.50 (4)NON PAYMENT	(645)Chgs exceed fee schd/max allow	NEW MEXICO BC/BS INC	PRIVATE INSURANCE	PRIVATE INSURANCE	ERA
3230104.101842	3230403.092755.74	4/3/2023	2017 DEMO	POSTER,ONE	402461A-DH-13578	DEMO,NARRY	PAYMENT	\$1.00		NEW MEXICO BC/BS INC	PRIVATE INSURANCE	PRIVATE INSURANCE	ERA
NO CASH SESS	3230403.102643.79	4/3/2023	2017 DEMO	POSTER,ONE	402284A-DH-143225	DEMO,MEDICAL	ADJUST ACCOUNT	\$0.50 (4)NON PAYMENT	(645)Chgs exceed fee schd/max allow	O/P MEDI-CAL 9	MEDICAID FI	MEDICAID	ERA
NO CASH SESS	3230403.102643.80	4/3/2023	2017 DEMO	POSTER,ONE	402284A-DH-143225	DEMO,MEDICAL	PAYMENT	\$1.00		O/P MEDI-CAL 9	MEDICAID FI	MEDICAID	ERA
NO CASH SESS	3230405.151825.107	4/5/2023	2017 DEMO	POSTER,ONE	402262A-DH-13578	DEMO,NARRY	ADJUST ACCOUNT	\$1,545.00 (4)NON PAYMENT	(21)Chrgs Excd Max Allowable Amt	NARRATIVE INSURANCE	PRIVATE INSURANCE	PRIVATE INSURANCE	
3230405.152116	3230405.152153.108	4/5/2023	2017 DEMO	POSTER,ONE	402489A-DH-13578	DEMO,NARRY	ADJUST ACCOUNT	-\$5.00 (4)NON PAYMENT	(21)Chrgs Excd Max Allowable Amt	NEW MEXICO BC/BS INC	PRIVATE INSURANCE	PRIVATE INSURANCE	

Bills Awaiting Export Report

(3PB > PRTP > AWPR)

- Number of bills by export mode or by payer that have been approved but not exported (printed)
- Detail will print a list of bills not yet printed with the oldest bill listed first
- Affects aging

Bills Awaiting Export Report

Summarized Report by EXPORT MODE

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BILLS AWAITING EXPORT for ALL BILLING SOURCES AUG 17,2023@14:35:52 Page 1
 Billing Location: 2017 DEMO

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Export Mode	Number Bills	Avg Days Awaiting Export	Total Charges
CMS-1500 (08/05)	1	63	100.00
837I (UB) 5010	5	21	2,337.00
837P (HCFA) 5010	5	43	760.00
837D (ADA) 5010	3	16	188.00
ADA-2012	1	123	95.00
CMS-1500 (02/12)	8	11	2,643.72
	=====		=====
	23		6,123.72

(REPORT COMPLETE):

Bills Awaiting Export Report Summarized Report by INSURER

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BILLS AWAITING EXPORT for ALL BILLING SOURCES NOV 3,2021@10:34:05 Page 1
Billing Location: INDIAN HOSP

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Insurer	Number Bills	Avg Days Awaiting Export	Total Charges
BC/BS OF KC	1	31	61.00
NEW MEXICO BC/BS INC	1	71	138.00
NEW MEXICO MEDICAID	1	82	256.00
WASHINGTON MEDICAID	1	6	488.00
CONCORD GENERAL GRP	5	1	720.30
NON-BENEFICIARY PATIENT	6	8	3,864.14
MAIL HANDLERS BENEFIT PLAN	3	72	34,511.00
TIME INSURANCE	1	31	61.00
BC/BS OF OKLAHOMA	2	74	34.00
BC/BS ON NM (2)	1	9	62.00
BCBS OF NEW MEXICO	15	7	998.25
UNITED HEALTHCARE [ATL]	2	65	139.00
REVOLVING SQUARE INSURANCE CO	1	31	61.00
NEVERHAPPY INSURANCE CO.	1	31	61.00
CARPENTER'S FOUNDATION	1	31	61.00
THE PEOPLES HEALTH PLAN	1	31	61.00
SUN INSURANCE PLANS	1	31	61.00
WORKITOUT AGENCY	17	39	2,346.00
DIAMOND SIGN HEALTH PLAN	1	17	138.00
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	62		44,121.69

Bills Awaiting Export Report

Listing of UNPRINTED BILLS

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BILLS AWAITING EXPORT for ALL BILLING SOURCES AUG 7,2023@16:54:23 Page 1
 Billing Location: 2017 DEMO HO

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Bill Number	Patient	Export Mode	Billing Source
29054A	JONES,CHIPPER	HCFA-1500B	UNITED HEALTHCARE [ATL]
29055A	JONES,CHIPPER	HCFA-1500B	UNITED HEALTHCARE [ATL]
29345A	BUDGET,BEN	HCFA-1500	Y2KREVOLVING SQUARE INSURANCE
29355A	POWER,MAX	HCFA-1500	Y2KTIME INSURANCE
29356A	SHARK,MAUREEN	HCFA-1500B	THE PEOPLES HEALTH PLAN
402485A	LAST NAME,DEMO PT	837I (UB)	5010AETNA HEALTH PLANS
402631A	LAST NAME,FIRST NAME	837I (UB)	5010AETNA HEALTH PLANS
402632A	LAST NAME,FIRST NAME	837I (UB)	5010AETNA HEALTH PLANS
402633A	LAST NAME,FIRST NAME	837D (ADA)	5010AETNA HEALTH PLANS
402551A	WEATHERS,STORMY	837P (HCFA)	5010NEW MEXICO BC/BS INC
395018C	TILDEN,THERESA ANN	837P (HCFA)	5010MEDICARE
402579B	WEATHERS,STORMY	837P (HCFA)	5010MEDICARE
402404B	DEMO,HALEY KELIS	CMS-1500	(02/12)MAILHANDERS BENEFIT PLAN

(REPORT COMPLETE) :

CPT Charge Report

(3PB > RPTP > CPRP)

- Prints a list of bills along with the billed CPT or ADA codes, the charge amount and the total amount billed
- Paid and denied amounts will also print, if rolled back from A/R
- May be printed by payer or provider

CPT Charge Report

Printer Output

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Bill Status Report for ALL BILLING SOURCES      MAY 30,2022@09:40:29   Page 1
with VISIT DATES from 04/12/2022 to 04/12/2022 provided by WELBY,MARCUS
Billing Location: INDIAN HOSP
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Bill#	DOS	CPT	Active Insurer	Billed	Paid	Denied	SAR
Provider: WELBY,MARCUS							
31296A	04/12/2022	99203	MEDICARE	106.00	48.20	36.80	2
						21.00	42
Total for Bill: 31296A				106.00	48.20	57.80	
31296B	04/12/2022	99203	MONTANA MEDI	106.00	0.00	0.00	
Total for Bill: 31296B				106.00	0.00	0.00	
				=====			
				Total:2			

(REPORT COMPLETE):

CPT Charge Report

Delimited to HFS file and Imported to Excel

Bill Status Report for ALL BILLING SOURCES AUG 18,2022@15:27:03 Page 1																						
with VISIT DATES from 01/01/2022 to 08/18/2022																						
Billing Location: 2017 DEMO HO																						
Visit Location	Bill#	Bill Status	HRN	Patient	Date of Service	Visit Type#	Visit Type	Clinic#	Clinic	Insurer Type	Active Insurer	Provider	Billed	Bill Type	Export Mode	Primary DX	CPT/HCPCS /ADA	Revenue Code	NDC	CPT Amount	Payment	Denied /SAR~
DEMO HOSP	402580A	COMPLETED	163412	DEMO, NONBEN	1/3/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	NEW MEXICO BC/BS INC	COOPER, STEVEN	521	131	CMS-1500 (02/12)	I15.9	99244	0		521	400	50;/71
DEMO HOSP	402580B	COMPLETED	163412	DEMO, NONBEN	1/3/2022	131	OUTPATIENT	01	GENERAL	NON-BEN (NON-INDIAN)	NON-BENEFICIARY PATIENT	COOPER, STEVEN	50	131	CMS-1500 (02/12)	I15.9	99244	0		521	50	
DEMO HOSP	402366C	BILLED	13569	WEATHERS, STORMY	1/3/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	NEW MEXICO BC/BS INC	COOPER, STEVEN	226	131	UB-04	I15.9	99214	510		226	0	
DEMO HOSP	402607A	BILLED	13569	WEATHERS, STORMY	1/20/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	NEW MEXICO BC/BS INC	COOPER, STEVEN	693	131	837P (HCFA) 5010	I15.9	10061	0		593	0	
DEMO HOSP	402607A	BILLED	13569	WEATHERS, STORMY	1/20/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	NEW MEXICO BC/BS INC	COOPER, STEVEN	693	131	5010	I15.9	00162	0		100	0	
DEMO HOSP	402583A	BILLED	112233	LASTNAME, DEMO	4/15/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS, LINDA E	6,143.40	131	837P (HCFA) 5010	I95.9	99214	0				
DEMO HOSP	402583A	BILLED	112233	LASTNAME, DEMO	4/15/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS, LINDA E	6,143.40	131	5010	I95.9	A0431	540				
DEMO HOSP	402583A	BILLED	112233	LASTNAME, DEMO	4/15/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS, LINDA E	6,143.40	131	837P (HCFA) 5010	I95.9	A0436	540				
DEMO HOSP	402583A	BILLED	112233	LASTNAME, DEMO	4/15/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS, LINDA E	6,143.40	131	837P (HCFA) 5010	I95.9	A0398	540				
DEMO HOSP	402583A	BILLED	112233	LASTNAME, DEMO	4/15/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS, LINDA E	6,143.40	131	837P (HCFA) 5010	I95.9	A0394	540				
DEMO HOSP	402583A	BILLED	112233	LASTNAME, DEMO	4/15/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS, LINDA E	6,143.40	131	837P (HCFA) 5010	I95.9	A0422	540				
DEMO HOSP	402610A	BILLED	138638	LASTN, FIRSTN	4/5/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	474.02	131	837I (UB) 5010	J00.	J3490	250	00045-0513-60	11.9	0	
DEMO HOSP	402610A	BILLED	138638	LASTN, FIRSTN	4/5/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	474.02	131	837I (UB) 5010	J00.	J3490	250	00121-0419-04	5.02	0	
DEMO HOSP	402610A	BILLED	138638	LASTN, FIRSTN	4/5/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	474.02	131	837I (UB) 5010	J00.	99213	510		179	0	
DEMO HOSP	402610A	BILLED	138638	LASTN, FIRSTN	4/5/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	474.02	131	837I (UB) 5010	J00.	71010	324		250	0	
DEMO HOSP	402610A	BILLED	138638	LASTN, FIRSTN	4/5/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	474.02	131	837I (UB) 5010	J00.	81000	300		20.02	0	
DEMO HOSP	402610A	BILLED	138638	LASTN, FIRSTN	4/5/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	474.02	131	837I (UB) 5010	J00.	86588	300		25	0	
DEMO HOSP	402592A	COMPLETED	138638	LASTN, FIRSTN	6/11/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	299.27	131	CMS-1500 (02/12)	I95.9	99212	0		140	182.32	25;/91 .95/
DEMO HOSP	402592A	COMPLETED	138638	LASTN, FIRSTN	6/11/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	299.27	131	CMS-1500 (02/12)	I95.9	71045	0		114	182.32	25;/91 .95/
DEMO HOSP	402592A	COMPLETED	138638	LASTN, FIRSTN	6/11/2022	131	OUTPATIENT	01	GENERAL	PRIVATE	DEMO INSURANCE ONE	MATTHEWS, LINDA E	299.27	131	CMS-1500 (02/12)	I95.9	J2001	0		45.27	182.32	25;/91 .95/

Account Management



Large Balance List

(A/R > RPT > AMRM > LBL)

- Calculates and displays bills that have open balances of more than \$5000
 - Remaining balance of \$5,000.00 may be changed by user

Select ONE or MORE of the above INCLUSION PARAMETERS: 4 LARGE BALANCE
Large Balance: 5000// **10000**

- Sorted by insurer
- Allows for follow-up of accounts that have a remaining balance greater than a certain balance
- Prints Date-to-Billed (DTB), number of days from the time the patient was seen to when the report was generated

(New) Bill Negative Balance List

(A/R > RPT > AMRM > NEG)

- Prints bills that contain a negative balance
 - By Allowance Category
- For Federal locations, may indicate system issues
 - Negative balances are not allowed
- Affects the overall aging of the accounts receivable system

(New) Bill Negative Balance List

(New) Bill Negative Balance List for MEDICARE ALLOWANCE CATEGORY(S) at ALL Visit location under INDIAN HEALTH HOSPITAL Billing Location				AUG 17,2022@21:57	Page 1	
BILL NUMBER	DOS	DT BILLED	BILLED AMT	PYMTS	ADJS	BALANCE
VISIT LOCATION: INDIAN HEALTH HOSPITAL						
ALLOWANCE CATEGORY: MEDICARE						
A/R ACCOUNT: MEDICARE						
17597A	03/26/20	04/07/20	138.00	127.00	171.00	-160.00
17273B	03/09/20	04/29/20	138.00	110.40	29.60	-2.00
21111A	05/22/20	06/13/20	124.00	138.00	32.00	-46.00
21464A	06/24/20	07/24/20	175.00	128.00	69.00	-22.00
21710A	08/01/20	08/14/20	175.00	276.00	74.00	-175.00
23068A	01/14/20	12/04/20	175.00	156.00	38.00	-19.00
23069A	08/27/19	12/04/19	175.00	156.00	38.00	-19.00
30076A	06/09/20	08/20/20	201.00	0.00	263.00	-62.00
30074A	06/11/19	08/20/19	201.00	125.00	101.00	-25.00
AR Account Subtotal (\$):			1,502.00	1,216.40	815.60	-530.00
All. Cat. Subtotal (\$):			1,502.00	1,216.40	815.60	-530.00
Visit Loc Subtotal (\$):			1,502.00	1,216.40	815.60	-530.00
Report Total (\$):			1,502.00	1,216.40	815.60	-530.00

Aging



Age Day Letter & List

(A/R > RPT > ARM > ADL)

- Locked with BARZ ADL REPORT key due to patient's social security number being displayed
- Used to follow up on outstanding payers
 - Provides a cover letter to accompany bills list
 - Provides a listing of bills that can be sent to the payer
- May not work with all payers, use accordingly based on success rate with payers
- May also be used as a worksheet for manual follow-up of unpaid bills

Age Day Letter & List Cover Letter

Department of Health and Human Services
Indian Health Service
ALBUQUERQUE
Business Office

DATE: 8 AUG 2023
TO: NARRATIVE INSURANCE
PO BOX 1234
DALLAS
TEXAS
75021
(404)444-4444
PRIVATE

FROM: BUSINESS OFFICE address for payments
5300 HOMESTEAD NE
ALBUQUERQUE
NEW MEXICO
87110

Regarding Past due bills over 120 days totaling \$ 12,677.51

The above past due has been calculated as of this date. A detailed listing of claims is attached for your reference and information. Please review and advise us as to the status of the past due claims.

If you have questions or concerns, please call the Business Office at 907-329-3456. we appreciate your cooperation.

Sincerely

Susie B Manager
Chief of Business Operations

Age Day Letter & List Bill List

NARRATIVE INSURANCE		over 120 days		08/08/2023		PAGE: 1
Policy Holder PT. SS #	Policy #	Claim #	DOS DOB	Amt Bld	Balance	
DEMO,NARRY Pat: DEMO,NARRY 555447777	ABC12345678	402262B DH-13578	10/14/2018 12/12/1970	1545.00	1545.00	Comment: _____
DEMO,NARRY Pat: DEMO,NARRY 555447777	ABC12345678	402290A DH-13578	11/24/2018 12/12/1970	433.00	433.00	Comment: _____
DEMO,NARRY Pat: DEMO,NARRY 555447777	ABC12345678	402296A DH-13578	11/15/2018 12/12/1970	114.00	112.50	Comment: _____
DEMO,NARRY Pat: DEMO,NARRY 555447777	ABC12345678	402332A DH-13578	02/20/2019 12/12/1970	382.00	382.00	Comment: _____

Age Detail Report

(A/R > RPT > ARM > ADT)

- Provides an itemized listing of all outstanding bills
- Allows for specifying a billing entity, payer, patient, provider, or run for all
- Can sort by Visit Type or Clinic

Age Detail Report

WARNING: Confidential Patient Information, Privacy Act Applies

=====
 Detail Age Detail Report for ALL BILLING SOURCE(S) AUG 8,2023@08:00 Page 1
 at ALL Visit location under 2017 DEMO HOSPITAL Billing Location
 =====

Patient	Bill Number	DOS	Amount Billed	Balance
---------	-------------	-----	---------------	---------

=====

Visit Location: 2017 DEMO HOSPITAL

Visit Type: OUTPATIENT

A/R Account: MEDICAID

DEMO,PATIENT	401329A-DH-251	APR 06, 2022	13.68	13.68
--------------	----------------	--------------	-------	-------

A/R Account	Count: 1	Total:	13.68	13.68
-------------	----------	--------	-------	-------

Visit Type	Count: 1	Total:	13.68	13.68
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Visit Type: INPATIENT

A/R Account: LOVELACE HEALTH PLAN

LAST NAME,FIRST NA	402467A-DH-321123	JAN 01, 2021	1,210.00	1,210.00
--------------------	-------------------	--------------	----------	----------

LAST NAME,FIRST NA	402466A-DH-321123	JAN 01, 2021	1,810.00	1,810.00
--------------------	-------------------	--------------	----------	----------

A/R Account	Count: 2	Total:	3,020.00	3,020.00
-------------	----------	--------	----------	----------

A/R Account: MEDICARE

WEATHERS,STORMY	402261B-DH-13577	NOV 01, 2018	2,960.00	2,960.00
-----------------	------------------	--------------	----------	----------

A/R Account	Count: 1	Total:	2,960.00	2,960.00
-------------	----------	--------	----------	----------

Age Summary Report

(A/R > RPT > ARM > ASM)

- Provides an aging summary by
 - Allowance category
 - Insurer Type
 - Clinic or Visit Type
 - Claim counts were recently added to the report
- Used for month-end reconciliation
 - Used with Period Summary Report to 'balance to RPMS'
- Shows trends in outstanding balances for individual allowance categories or for individual payers

Age Summary Report

Summarized Report by Allowance Category

WARNING: Confidential Patient Information, Privacy Act Applies

=====
 Age Summary Report for ALL ALLOWANCE CATEGORY(S) AUG 25,2022@15:24 Page 4
 at ALL Visit location(s) under INDIAN HEALTH HOSPITAL Billing Location
 =====

ALLOWANCE CATEGORY	CURRENT	31-60	61-90	91-120	120+	BALANCE
*** VISIT Location: INDIAN HEALTH HOSPITAL						
MEDICAID	0.00	640.00	0.00	519.00	202819.25	203978.25
# of Claims		1		1	734	736
MEDICARE	0.00	0.00	0.00	0.00	633879.26	633879.26
# of Claims					562	562
OTHER	0.00	114.00	0.00	0.00	27584.83	27698.83
# of Claims		1			107	108
PRIVATE INSURANCE	0.00	0.00	0.00	0.00	809855.82	809855.82
# of Claims					1241	1241
VETERANS	0.00	0.00	0.00	0.00	3576.45	3576.45
# of Claims					22	22

*** VISIT Loc Total	0.00	754.00	0.00	519.00	1677715.61	1678988.61
# of Claims		2		1	2666	2669

UFMS Age Summary Report

(A/R > RPT > ARM > USM)

- Identical to Age Summary Report (ASM) **but** allows for running by user-specified Fiscal Year(s)

- Used for reconciliation with the AR UFMS Dashboard Reports

UFMS Age Summary Report

Summarized Report by Allowance Category

WARNING: Confidential Patient Information, Privacy Act Applies

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=====
UFMS Age Summary Report for FY 2022                AUG 03,2023@15:27   Page 1
for ALL ALLOWANCE CATEGORY(S)
at ALL visit location(s) under INDIAN HEALTH HOSPITAL Billing Location
=====
ALLOWANCE CATEGORY      CURRENT      31-60      61-90      91-120      120+      BALANCE
=====
*** VISIT Location: INDIAN HEALTH HOSPITAL
MEDICAID                0.00        0.00        0.00        0.00        998.00     998.00
# of Claims              2           2           2           2           2           2
MEDICARE                 0.00        0.00        0.00        0.00        2772.99    2772.99
# of Claims              8           8           8           8           8           8
OTHER                    0.00        0.00        0.00        0.00        1219.00    1219.00
# of Claims              4           4           4           4           4           4
PRIVATE INSURANCE       0.00        0.00        0.00        0.00        5495.97    5495.97
# of Claims              20          20          20          20          20          20
VETERANS                 0.00        0.00        0.00        0.00        715.84     715.84
# of Claims              6           6           6           6           6           6
-----
*** VISIT Loc Total     0.00        0.00        0.00        0.00        11201.80   11201.80
# of Claims              40          40          40          40          40          40
=====
# of Claims              0.00        0.00        0.00        0.00        11201.80   11201.80
# of Claims              40          40          40          40          40          40
=====

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Batch Reports



Batch Statistical Report

(A/R > RPT > BRM > BSL)

- Provides a list of collection batches for user-specified date range
- Sorted by A/R Collection Point
- Provides
 - Amount batched
 - Amount posted
 - Amount(s) in unallocated cash
 - Amount refunded
 - Balance remaining to be posted
- Unallocated Amounts
 - True Unallocated - amount remaining to post
 - Total Unallocated - amount originally placed in Post Un-Allocated Cash
- Used for month-end reporting

Batch Statistical Report

DATE:	BATCH STATISTICS FOR				PAGE 1	
AUG 25,2022 15:35	2017 DEMO HOSPITAL					
	1-JAN-2022 TO 25-AUG-2022					
BATCH DATE -SEQ-BS	BATCH TOTAL	COLLECTIONS PROCESSED	UNALLOCATED TRUE	TOTAL	REFUNDED FROM BATCH	BALANCE
=====						
	COLLECTION ID: PRIVATE					
02/15/2022-1- P	5000.00	0.00	3000.00	5000.00	0.00	0.00
02/16/2022-1- P	5000.00	452.32	0.00	0.00	0.00	4547.68
03/01/2022-1- P	1000.00	500.00	0.00	0.00	0.00	500.00
03/24/2022-1- P	500.00	0.00	0.00	0.00	0.00	500.00
04/18/2022-1- P	275970.11	0.00	0.00	0.00	0.00	275970.11
04/18/2022-2- P	263063.75	0.00	0.00	0.00	0.00	263063.75
05/18/2022-1- P	5000.00	3.00	0.00	0.00	0.00	4997.00
05/25/2022-1- P	2000.00	0.00	0.00	0.00	0.00	2000.00
07/05/2022-1- P	1133459.85	0.00	0.00	0.00	0.00	1133459.85
07/29/2022-1- P	650.00	0.00	0.00	0.00	0.00	650.00
08/10/2022-1- P	500.00	0.00	0.00	0.00	0.00	500.00

SUBTOTAL	1692143.71	955.32	3000.00	5000.00	0.00	1686188.39

Treasury Deposit/Batch Statistical Report

(A/R > RPT > BRM > TBSL)

- Similar to Batch Statistical Report but breaks down the information by Collection Batch Item
- Sorted by Allowance Category, TDN/IPAC, or a combination of both
- Provides
 - Amount batched
 - Amount posted
 - Amount(s) in unallocated cash
 - Amount refunded
 - Amount transferred
 - Balance remaining to be posted

Treasury Deposit/Batch Statistical Report

Sorted by Allowance Category

DATE: AUG 8,2023@08:30:33

PAGE 1

TREASURY DEPOSIT/BATCH STATISTICS FOR
 2017 DEMO HOSPITAL
 FROM JAN 1,2023 TO AUG 8,2023
 SORTED BY ALLOWANCE CATEGORY
 ALLOWANCES CHOSEN: ALL

ITEM TOTAL	COLLECTIONS PROCESSED	UNALLOCATED TRUE	TOTAL	REFUNDED FROM ITEM	ITEM TRANSFER	BALANCE
=====						
ALLOWANCE CATEGORY: MCR						
COLLECTION ID: MEDICARE						
04/17/2023-1- P TDN: 403049						
ITEM 1: 403049						
2000.00	496.00	0.00	504.00	0.00	0.00	1000.00
ITEM 2: 403049						
2000.00	0.00	2000.00	2000.00	0.00	0.00	0.00
BATCH TOTAL:						
----- 4000.00	----- 496.00	----- 2000.00	----- 2504.00	----- 0.00	----- 0.00	----- 1000.00

Batch Posted Payments

(A/R > RPT > BRM > BPP)

- Printed when a batch has been completely posted
- Provides a list of all posted payments by bill number
- Kept as proof/record of all posting for the collection batch

Batch Posted Payments

POSTINGS FOR: PVT INS OPV-05/26/2022-1 ***CONFIDENTIAL PATIENT INFORMATION***

MAY 26,2022 15:07 PAGE 1

IT	BILL (A/R)	PMT	DT / DOS	BILLED TO	PATIENT
----	------------	-----	----------	-----------	---------

A/R ACCOUNT: NEW MEXICO BC/BS INC

1	31267A-IH-34602	40.41	05/26/2022	NEW MEXICO BC/B	DEMO, PATIENT
			01/25/2022		
	31268A-IH-34602	985.00	05/26/2022	NEW MEXICO BC/B	DEMO, PATIENT
			01/25/2022		
	31282A-IH-35984	174.82	05/26/2022	NEW MEXICO BC/B	PATIENT, ONE
			01/18/2022		
	31534A-IH-34985	593.29	05/26/2022	NEW MEXICO BC/B	PATIENT, TWO
			01/11/2022		
	31554A-IH-33744	0.00	05/26/2022	NEW MEXICO BC/B	PATIENT, THREE
			01/15/2022		

SUBTOTAL		-----			1793.52
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TOTAL		-----			1793.52
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Batch Lockdown Report

(A/R > RPT > BRM > BLDR)

- Scheduled for release in A/R patch 35 (currently in development and testing)
- Provides a list of collection batches that are locked down or will be locked down
 - Applies to Federal locations only
 - Tribal/Urban/non-IHS locations will not see data on the report
- Based on user-specified date range
 - Date Batch Finalized
 - Lockdown Date
- Allows for posting collection batches before they are locked down
- Indicates if a batch item is in the Post Unallocated Cash option

Batch Lockdown Report Summary (Printer)

=====

SUMMARY REPORT OF LOCKED BATCHES

JUN 2, 2023@10:50 Page 1

For LOCKDOWN DATES 10/01/2005 to 11/29/2023

Location: 2017 DEMO HOSPITAL

LOCKDOWN PERIOD: 6 MO

=====

COLLECTION BATCH NAME	TDN/IPAC	TOTAL ITEM	TOTAL BATCHED	BALANCE
=====				
COLLECTION ID: MEDICARE				
02/18/2022-1	TDN111111	1	1724.16	1253.22
02/28/2022-1	TDN222222	1	750.00	750.00
			-----	-----
2 BATCHES			2474.16	2003.22
COLLECTION ID: PRIVATE				
03/27/2021-1	IPAC11111	1	618.24	618.24
07/01/2021-1*	TDN3333333	1	500.00	250.00
07/13/2021-1	IPAC22222	1	783.19	783.19
05/25/2022-1	IPAC333333	5	5,000.00	5,000.00
06/09/2022-1	TDN44444444	1	500.00	274.00
11/01/2022-1	TDN555555	1	4,624.83	1,258.21
			-----	-----
6 BATCHES			12,026.26	8,183.64
TOTAL			=====	=====
			14,500.42	10,186.86

An '*' after the batch name means at least part of it is in Unallocated Cash

<END OF REPORT>

Batch Lockdown Report

Delimited Detail Imported to Excel

COLLECTION ID	LOCATION	ALLOWANCE CATEGORY	COLLECTION BATCH NAME	TDN/IPAC	ITEM COUNT	TOTAL BATCHED	BALANCE	ITEM NUMBER	PAYER	CHECK NUMBER	ITEM AMOUNT	ITEM BALANCE
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-12/13/2022-1	12132022	1	\$100.00	\$100.00	2	MEDICARE	CHKNBR12132022	\$100.00	\$100.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-03/24/2023-1	3242034	1	\$200.00	\$200.00	1	MEDICARE	CHKNBR324234	\$200.00	\$200.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-03/24/2023-2	3242333	1	\$200.00	\$200.00	2*	MEDICARE	NEWCHKNBR324235	\$200.00	\$200.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-03/31/2023-1	33120233	2	\$15,000.00	\$15,000.00	1	MEDICARE	MCRCHKNBR1	\$10,000.00	\$10,000.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-03/31/2023-1	10102345				2	MEDICARE	MCRCHKNBR2	\$5,000.00	\$5,000.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-04/04/2023-1	4042023	1	\$100.00	\$100.00	1	MEDICARE	CHKNBR040420234	\$100.00	\$100.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-04/05/2023-1	4052023	1	\$500.00	\$500.00	1	MEDICARE	CHKNBR04052023	\$500.00	\$500.00
MEDICARE	2017 DEMO HOSPITAL	Medicare	MEDICARE-04/11/2023-1	4112023	1	\$2,632.14	\$2,632.14	1*	MEDICARE	MCRCHKNBR04112023	\$2,632.14	\$2,632.14
PRIVATE	2017 DEMO HOSPITAL	Private Insurance	PRIVATE-05/25/2022-1	5252022	5	\$5,000.00	\$5,000.00	1	NARRATIVE INSURANCE	CHKNBRITEM1	\$1,000.00	\$1,000.00
PRIVATE	2017 DEMO HOSPITAL	Private Insurance	PRIVATE-05/25/2022-1	52520226				2	NARRATIVE INSURANCE	CHKNBRITEM2	\$1,000.00	\$1,000.00
An '**' after the item number means at least part of it is in Unallocated Cash												
<END OF REPORT>												

Treasury Deposit # Reconciliation Report

(A/R > RPT > BRM > TDR)

- Provides a list of payments posted to a user-specified Treasury Deposit Number (TDN) or IPAC and posted date range
- Includes information on UFMS transmission
- If not transmitted to UFMS, includes reason why from Not Sent Report
- Useful for reconciling RPMS to UFMS

Treasury Deposit # Reconciliation Report

Exported to HFS and Imported to Excel

LOCATION	A/R BILL	TRANSACTION	COLLECTION BATCH	COLLECTION ITEM	TREASURY DEP/IPAC	DOLLAR AMOUNT	TRANSMITTED?	REASON	NO APPLY TO	DT TX'ED TO UFMS
2017 DEMO HOSPITAL	12345A	3210759	PRIVATE-03/31/2023-1	1	TDN03312023	\$123.15	Y		6064156064156100	4/5/2023@15:23:18
2017 DEMO HOSPITAL	11223A	3210761	PRIVATE-03/31/2023-1	1	TDN03312023	\$44.20	Y		6064156064155940	4/5/2023@15:23:18
2017 DEMO HOSPITAL	22334A	3210763	PRIVATE-03/31/2023-1	1	TDN03312023	\$44.20	N	22	0	4/5/2023@15:23:18
2017 DEMO HOSPITAL	33445A	3210765	PRIVATE-03/31/2023-1	1	TDN03312023	\$11.14	N	22	0	4/5/2023@15:23:18
2017 DEMO HOSPITAL	44556A	3210786	PRIVATE-03/31/2023-1	1	TDN03312023	\$5.23	Y		6064156064156130	4/5/2023@15:23:18
2017 DEMO HOSPITAL	55667A	3210811	PRIVATE-03/31/2023-1	1	TDN03312023	\$800.00	Y		6064156064156130	4/27/2023@09:23
2017 DEMO HOSPITAL	77889A	3210833	PRIVATE-03/31/2023-1	1	TDN03312023	\$10.87	Y		6064156064156120	
2017 DEMO HOSPITAL	88990A	3210839	PRIVATE-03/31/2023-1	1	TDN03312023	\$6.78	Y		6064156064156110	
2017 DEMO HOSPITAL	99887A	3210848	PRIVATE-03/31/2023-1	1	TDN03312023	\$143.62	Y		6064156064156090	
2017 DEMO HOSPITAL	88776A	3210850	PRIVATE-03/31/2023-1	1	TDN03312023	\$23.65	Y		6064156064156100	
TOTAL TRANSACTIONS SENT TO UFMS: 8										
TOTAL DOLLARS SENT TO UFMS: 1157.50										
TOTAL 'NOT SENT' TRANSACTIONS: 2										
TOTAL 'NOT SENT' DOLLARS: 55.34										
TOTAL PAYMENT TRANSACTIONS: 10										
TOTAL PAYMENT DOLLARS: 1212.84										

Financial Management



Payment Summary Report by Collection Batch

(A/R > RPT > FRM > PRP)

- Provides payment summary information by
 - User-specified Collection Point or Insurer Type, or all
 - Collection Batch Opened Date
 - User-specified date range, not to exceed 31 days

- Provides a summary list of
 - Number of Bills Posted
 - Month and Year of the bills' dates of service
 - Collection Batches used for posting within the selected parameters

Payment Summary Report by Collection Batch

WARNING: Confidential Patient Information, Privacy Act Applies			
PAYMENT SUMMARY REPORT		AUG 9,2023@09:39 Page 1	
FOR COLLECTION POINT: MEDICARE			
BATCH DATES OF 04/01/2023 TO 04/30/2023			
BATCHED AMOUNT: \$ 6,000.00			
MONTH	#	BILLED AMOUNT	PAYMENTS
VISIT LOCATION: 2017 DEMO HOSPITAL			
APR 2023	3	1,367.00	1,076.80
VISIT LOC TOTAL		1,367.00	1,076.80
REPORT TOTAL		1,367.00	1,076.80
Enter RETURN to continue or '^' to exit:			
WARNING: Confidential Patient Information, Privacy Act Applies			
PAYMENT SUMMARY REPORT		AUG 9,2023@09:39 Page 2	
FOR COLLECTION POINT: MEDICARE			
BATCH DATES OF 04/01/2023 TO 04/30/2023			
BATCHED AMOUNT: \$ 6,000.00			
** BATCH LISTING **			
COLLECTION BATCHES	BATCHED AMOUNT	POSTED AMOUNT	UNPOSTED AMOUNT
MEDICARE-04/14/2023-1	2,000.00	432.80	1,567.20
MEDICARE-04/17/2023-1	4,000.00	644.00	3,356.00
TOTALS	6,000.00	1,076.80	4,923.20

Period Summary Report

(A/R > RPT > FRM > PSR)

- Provides summary of
 - Billed Amounts
 - Posted Payments
 - Posted Adjustments
 - Refunds
- Used for month-end reconciliation
 - Age Summary Report
- May be used to balance payments received with what has been posted in RPMS

Period Summary Report by Allowance Category

WARNING: Confidential Patient Information, Privacy Act Applies

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 Period Summary Report for ALL ALLOWANCE CATEGORY(S)AUG 03,2023@15:45 Page 1
 with TRANSACTION DATES from 06/01/2023 to 06/30/2023
 at ALL Visit location(s) regardless of Billing Location
 =====

ALLOWANCE CATEGORY	Billed Amt	Payment	Adjustment	Refund
*** VISIT Location: 2017 DEMO HOSPITAL				
MEDICAID	21,226,750.30	2,973.40	1,054.59	427.00
MEDICARE	566,900.70	7,055.11	610.53	0.00
OTHER	144,431.18	150.00	2,480.70	0.00
PRIVATE INSURANCE	48,729.74	5,065.18	4,099.06	325.00
VETERAN ADMINISTRAT	4,470.53	0.00	0.00	0.00
*** VISIT Loc Total	21,991,282.45	15,243.69	8,244.88	752.00
*** VISIT Location: TRIBAL HEALTH CENTER				
MEDICAID	3,956.00	0.00	1,204.00	0.00
OTHER	110.84	0.00	100.36	0.00
PRIVATE INSURANCE	4,851.45	0.00	2,425.18	0.00
*** VISIT Loc Total	8,918.29	0.00	3,729.54	0.00
*** VISIT Location: IHS CLINIC H S				
PRIVATE INSURANCE	1,209.50	0.00	598.00	0.00
*** VISIT Loc Total	1,209.50	0.00	598.00	0.00
***** REPORT Total	22,001,410.24	15,243.69	12,572.42	752.00

AR Statistical Report

(A/R > RPT > FRM > STA)

- Provides summary of
 - Billed Amounts
 - Posted Payments
 - Posted Adjustments
 - Refunds
- Different than Period Summary Report as this report provides visit statistics
- May be used to provide stats by Clinic or Visit type
 - RPMS set-up critical for best report results
 - Consider using Clinics and Visit Types that are specific to the service(s) provided, rather than using General Clinic and Outpatient 131 Visit Type for all services

A/R Statistical Report

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A/R STATISTICAL REPORT for ALL BILLING SOURCE(S)   AUG 8,2023@11:19   Page 1
at ALL Visit location under INDIAN HEALTH HOSPITAL Billing Location
with APPROVAL DATES from 06/01/2023 to 06/30/2023
at ALL Visit location(s) under INDIAN HEALTH HOSPITAL Billing Location
=====
  
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VISIT TYPE	NUMBER VISITS	UNDUP PATIENTS	BILLED AMOUNT	PAID AMOUNT	ADJ AMOUNT	UNPAID AMOUNT
INDIAN HEALTH HOSPITAL						
INPATIENT	1	1	3,452.00	0.00	0.00	3,452.00
OUTPATIENT	77	31	14,956.39	1,222.25	2,427.45	11,306.69
IMMUNIZATION	1	1	221.00	78.00	143.00	0.00
CROSSOVER (O	1	1	40.20	0.00	0.00	40.20
CROSSOVER (P	1	1	100.00	0.00	0.00	100.00
EMERGENCY RO	1	1	698.00	0.00	0.00	698.00
AMBULATORY S	2	1	2,868.00	0.00	0.00	2,868.00
Pharmacy POS	3	1	191.94	0.00	0.00	191.94
MEDICAL SUPP	1	1	1,711.00	0.00	0.00	1,711.00
PHARMACY	1	1	77.75	0.00	77.75	0.00
DENTAL	33	9	1,855.00	253.00	0.00	1,602.00
PROFESSIONAL	7	7	2,415.50	391.20	295.80	1,728.50
	-----	-----	-----	-----	-----	-----
	129	56	28,586.78	1,944.45	2,944.00	23,698.33

TOTAL COVERED INPATIENT DAYS 2

Days in AR

(A/R > RPT > FRM > DAYS)

- Tracks 'life cycle' averages for all visits within a user-specified range
- Provides average days from Date of Service to
 - PCC visit created
 - PCC visit reviewed
 - Claim approval date
 - Receipt of check
 - Date first payment posted
 - Date second payment posted, etc.
- Identifies
 - Coding/data entry backlogs
 - Billing bottlenecks
 - Potential revenue loss and delays

Days in A/R Report

Summary Report Exported to HFS and Opened with Notepad

WARNING: Confidential Patient Information, Privacy Act Applies

for ALL BILLING SOURCE(S)
 at ALL Visit location regardless of Billing Location with VISIT DATES
 from 01/01/2022 to 12/31/2022

AUG 02,2023@17:14 Page 1

Month of DOS	# of Visits	# Visits with Bills	# of Bills	Billed Amount	AVG Visits Checked in	AVG Days to PCC CREATED	AVG Days to Reviewed	AVG Days 3p Bill APPROVED	AVG Date Export EXPORTED	AVG Days to Payment	AVG Days First Posting	AVG Days Last Posting	Total Posted Amounts
JAN 2022	3398	3398	4293	2206673.96	0.74	5.80	91.79	106.44	109.47	119.42	123.76	126.72	1074626.44
FEB 2022	3371	3371	4115	2178446.10	0.74	6.06	94.73	106.67	109.88	118.62	123.28	125.32	1206997.78
MAR 2022	4163	4163	5091	4543440.95	0.64	4.48	67.22	87.30	90.69	97.24	101.79	104.06	1655289.23
APR 2022	4202	4202	5096	1966673.27	0.65	0.75	39.52	64.31	67.42	74.37	78.73	80.78	1254039.74
MAY 2022	3792	3792	4691	1963684.90	0.71	1.74	36.28	58.82	61.98	71.97	74.72	75.48	1241220.08
JUN 2022	4009	4009	5053	2186101.35	0.73	1.61	25.23	51.55	54.82	66.82	68.58	67.81	1330442.32
JUL 2022	3932	3932	5010	2135197.92	0.75	1.28	18.99	51.81	54.55	62.69	65.33	66.47	1284379.47
AUG 2022	4714	4714	5790	2706728.99	0.77	1.74	23.21	61.99	70.55	74.06	76.84	79.30	1706729.50
SEP 2022	3995	3995	4988	2032569.27	0.71	1.24	12.39	52.41	61.55	64.50	67.89	70.43	1289576.52
OCT 2022	4958	4958	6139	2409695.32	0.67	1.75	18.97	51.77	59.81	65.28	68.23	72.39	1517011.70
NOV 2022	4510	4510	5660	2354099.87	0.74	1.28	17.12	45.30	50.37	56.22	57.28	60.61	1427012.50
DEC 2022	4328	4328	5556	2345278.90	0.78	1.21	19.84	43.30	47.84	52.35	53.53	56.48	1436044.96
GRAND TOTAL:	49372	49372	61482	29028590.80	0.72	2.28	36.59	63.42	68.35	75.58	78.34	80.54	16423370.24
TOTAL BILLS WITH NO EXPORT: 0													

Days in A/R Report

Detail XML Report Exported to HFS

Columns A - N

VISIT IEN	MONTH YEAR	VISIT LOC	VISIT ADMIT DATE	DATE CREATED	PCC	CREATED	DATE REVIEWED	REVIEWED	BILL NUM	APPROVAL DATE 1	APPROVAL	EXPORT DATE 1	EXPORT NUM	DAYS 1	FINALIZED BATCH DATE 1
1507288	1/1/22	2017 DEMO	1/9/2022	1/19/2022	10	1/19/2022	10	403002A	3/14/2023	429	3/14/2023	429			
1507293	8/1/22	2017 DEMO	8/12/2022	12/1/2022	111	12/1/2022	111								
1507296	6/1/22	2017 DEMO	6/2/2022	12/2/2022	183	12/2/2022	183	403023B	2/7/2023	250	2/7/2023	250			
1507297	7/1/22	2017 DEMO	7/3/2022	12/13/2022	163	12/13/2022	163	403043A	12/13/2022	163	8/8/2023	401			11/14/2022
1507298	9/1/22	2017 DEMO	9/5/2022	12/22/2022	108	12/22/2022	108	403045A	2/14/2023	162	2/14/2023	162			
1507299	8/1/22	2017 DEMO	8/12/2022	12/28/2022	138	12/28/2022	138	403046A	12/28/2022	138	12/28/2022	138			
1507300	9/1/22	2017 DEMO	9/12/2022	2/8/2023	149	2/8/2023	149	403047B	2/8/2023	149	2/8/2023	149			2/8/2023
1507301	9/1/22	2017 DEMO	9/28/2022	2/8/2023	133	2/8/2023	133	403048A	2/9/2023	134	8/8/2023	314			2/8/2023
1507302	1/1/23	2017 DEMO	1/11/2023	2/10/2023	30	2/10/2023	30	403049A	2/10/2023	30	2/14/2023	34			
1507303	1/1/23	2017 DEMO	1/12/2023	2/15/2023	34	2/15/2023	34	403054B	2/16/2023	35	2/16/2023	35			
1507306	2/1/23	2017 DEMO	2/14/2023	2/24/2023	10	2/24/2023	10								
1507307	2/1/23	2017 DEMO	2/12/2023	3/9/2023	25	3/9/2023	25	403070A	5/2/2023	79	8/8/2023	177			4/14/2023
1507308	3/1/23	2017 DEMO	3/10/2023	3/10/2023		3/10/2023		403071B	5/24/2023	75	5/24/2023	75			
1507311	2/1/23	2017 DEMO	2/23/2023	3/15/2023	20	3/15/2023	20	403073A	3/15/2023	20	3/15/2023	20			
1507312	3/1/23	2017 DEMO	3/29/2023	3/29/2023		3/30/2023	1	403075A	5/24/2023	56	5/24/2023	56			4/14/2023
1507313	3/1/23	2017 DEMO	3/14/2023	3/29/2023	15	3/29/2023	15	403076A	5/18/2023	65	5/18/2023	65			
1507315	4/1/23	2017 DEMO	4/5/2023	4/10/2023	5	4/10/2023	5	403077B	4/10/2023	5	4/10/2023	5			
1507316	3/1/23	2017 DEMO	3/15/2023	4/14/2023	30	4/14/2023	30	403079A	4/14/2023	30	4/14/2023	30			4/14/2023
1507317	3/1/23	2017 DEMO	3/15/2023	4/14/2023	30	4/14/2023	30	403080A	4/14/2023	30	4/14/2023	30			4/14/2023
1507318	3/1/23	2017 DEMO	3/18/2023	4/17/2023	30	4/17/2023	30	403082A	4/17/2023	30	8/8/2023	143			4/17/2023
1507319	3/1/23	2017 DEMO	3/20/2023	5/2/2023	43	5/2/2023	43	403084B	5/2/2023	43	5/2/2023	43			4/14/2023
1507320	2/1/23	2017 DEMO	2/1/2023	5/3/2023	91	5/3/2023	91	403085A	5/3/2023	91	5/3/2023	91			2/8/2023

Days in A/R Report

Detail XML Report Exported to HFS

Columns N - W

FINALIZED BATCH DATE 1	FINALIZED NUM DAYS 1	FIRST TRANS DATE 1	FIRST TRANS NUM DAYS 1	LAST TRANS DATE 1	LAST TRANS NUM DAYS 1	PROVIDER 1	BILLED AMOUNT 1	BILL NUM	APPROVAL DATE 2
						COOPER,STEVEN	304.4		
						COOPER,STEVEN	2238.86		
11/14/2022	134	12/13/2022	163	12/13/2022	163	COOPER,STEVEN	1077	403043B	12/20/2022
						COOPER,STEVEN	6.2		
						COOPER,STEVEN	5100		
2/8/2023	149	2/8/2023	149	2/8/2023	149	COOPER,STEVEN	304	403047C	2/8/2023
2/8/2023	133	2/9/2023	134	2/9/2023	134	COOPER,STEVEN	206	403048B	3/17/2023
						REDDY,CATHERINE	239		
						COOPER,STEVEN	692		
4/14/2023	61	5/2/2023	79	5/2/2023	79	COOPER,STEVEN	206	403083A	5/2/2023
						RENDER,SHONDA	336.37		
						COOPER,STEVEN	537		
4/14/2023	16	6/13/2023	76	6/13/2023	76	COOPER,STEVEN	562.2		
						COOPER,STEVEN	320		
						COOPER,STEVEN	206		
4/14/2023	30	4/14/2023	30	4/14/2023	30	SIEFFERT,JUDSON B	236		
4/14/2023	30	4/14/2023	30	4/14/2023	30	SIEFFERT,JUDSON B	541	403080B	4/14/2023
4/17/2023	30	4/17/2023	30	4/17/2023	30	SIEFFERT,JUDSON B	206	403081A	4/17/2023
4/14/2023	25	5/2/2023	43	5/2/2023	43	COOPER,STEVEN	1216	403084C	5/2/2023
2/8/2023	7	5/3/2023	91	5/3/2023	91	COOPER,STEVEN	114	403085B	5/3/2023

Adjustment & Refund Report

(A/R > RPT > FRM > ADJA or ADJT)

- Provides a detailed or summarized report of all adjustments and refunds posted within a user-specified date range
 - Adjustment & Refund Report by Bill Approve Date (ADJA)
 - Adjustment & Refund Report by Transaction Date (ADJT)
- Originally created for OIG (Office of Inspector General) audit to provide information on adjustments posted for a specific time period
- Data can be exported to a Host File Server and imported to Excel
- Detail by Payer within Allowance Category/Insurance Type
 - Ability to exclude billed amount and payment for bills with multiple adjustments

Select REPORT TYPE: 1// 2 Detail by PAYER w/in ALLOW CAT/INS TYPE

Note: Some bills may contain more than one adjustment transaction on the report.
Do you wish to print the billed and payment amount for each adjustment? ? NO//

Adjustment & Refund Report by Transaction Date

WARNING: Confidential Patient Information, Privacy Act Applies

GAO Transaction Report by ALLOWANCE CATEGORY AUG 29,2022@15:01
 for ALL ALLOWANCE CATEGORY(S)
 Detail with TRANSACTION DATES from 01/01/2022 to 08/29/2022
 at ALL Visit location(s) regardless of Billing Location

LOCATION	ALLOWANCE CAT	INSURER TYPE	INSURER	BILL	DOS	APPROVAL DT	TOTAL BILL AMT	TOTAL PAYMENTS	#DAYS (DOS-APPR.DT)	ADJUSTMENT DT	ADJUST TYPE	ADJUST CATEGORY IEN	ADJUSTMENT CATEGORY	ADJUST AMOUNT	#DAYS (APPR.DT-ADJ.DT)
INDIAN HOSP	MEDICAID	MEDICAID FI	ARIZONA MEDICAID	31715A-IH-37426	4/20/2022	05/24/2022@08:58	519		34						
INDIAN HOSP	MEDICAID	MEDICAID FI	MAINE MEDICAID	31720A-IH-3013	6/14/2022	07/14/2022@12:33	640		30						
INDIAN HOSP	MEDICARE	MCR PART D	D-AARP	31666A-IH-1072	4/28/2021	06/22/2021@09:27	49	34.7		5501/14/2022@09:07	602		Coinsurance 14Amount	9.8	206
INDIAN HOSP	MEDICARE	MCR PART D	D-AARP	31666A-IH-1072	4/28/2021	06/22/2021@09:27	49	34.7		5501/14/2022@09:07	645		Chgs exceed fee 4schd/max allow	4.5	206
INDIAN HOSP	PRIVATE	PRIVATE	PRESBYTERIAN HEALTH	31712A-IH-9235	2/22/2022	03/24/2022@07:50	142		30						
INDIAN HOSP	PRIVATE	PRIVATE	PRESBYTERIAN HEALTH	31712B-IH-9235	2/22/2022	03/24/2022@07:54	142		30						
INDIAN HOSP	PRIVATE	PRIVATE	DELTA DENTAL OF NEW	31582B-IH-1122	6/16/2020	04/06/2022@10:53	178.22		659						
INDIAN HOSP	PRIVATE	PRIVATE	BC/BS OF OKLAHOMA	31660B-IH-1072	4/28/2021	05/28/2021@13:45	82.8	32.1		3001/14/2022@09:07	602		Coinsurance 14Amount	16.5	231
INDIAN HOSP	PRIVATE	PRIVATE	BC/BS OF OKLAHOMA	31660B-IH-1072	4/28/2021	05/28/2021@13:45	82.8	32.1		3001/14/2022@09:07	645		Chgs exceed fee 4schd/max allow	34.2	231
INDIAN HOSP	PRIVATE	PRIVATE	BC/BS OF OKLAHOMA	31661B-IH-1072	4/28/2021	05/28/2021@13:54	56	22		3001/14/2022@09:07	602		Coinsurance 14Amount	11.2	231
INDIAN HOSP	PRIVATE	PRIVATE	BC/BS OF OKLAHOMA	31661B-IH-1072	4/28/2021	05/28/2021@13:54	56	22		3001/14/2022@09:07	645		Chgs exceed fee 4schd/max allow	22.8	231
INDIAN HOSP	PRIVATE	PRIVATE	BCBS OF NEW MEXICO	31711A-IH-1122	2/15/2022	03/17/2022@09:59	56		30						
INDIAN HOSP	PRIVATE	PRIVATE	FIRST AMERICAN	31550A-IH-3948	3/14/2020	07/02/2020@11:42	114			11006/27/2022@13:48	29		13Deductible	55	725
INDIAN HOSP	PRIVATE	PRIVATE	FIRST AMERICAN	31550A-IH-3948	3/14/2020	07/02/2020@11:42	114			11006/27/2022@13:48	1006		PHYSICIAN WRITE 3OFF	59	725
INDIAN HOSP	PRIVATE	PRIVATE	BS OF MASSACHUSETTS	31698A-IH-2	12/6/2021	04/12/2022@12:06	99			12707/21/2022@10:19	408		Claim is under 22investigation.	99	100

Tribal Payment Report

(3PB > RPTP > TPRP)

- Provides bill numbers, amount billed, and amount paid sorted by patient's Tribe
 - Insurer or Insurer Type
 - User-Specified Tribe, or all
 - User-Specified Visit Date Range
- Patient's Tribal information is pulled from Patient Registration
- Data is dependent on payments being rolled back from A/R

Tribal Payment Report

TRIBAL PAYMENT REPORT MAY 12, 2023@09:30:48 Page 1
 for Visit Dates from 01/01/2023 to 01/31/2023
 Billing Location: DEMO HOSPITAL

PATIENT	CLAIM	DOS	AMOUNT BILLED	AMOUNT PAID
Location: DEMO HOSPITAL				
Tribe: BLACKFEET TRIBE, MT				
Visit Type: OUTPATIENT				
Insurer Type: MEDICAID FI				
PATIENT,ONE	12345A	01/22/2023	36.80	36.80
			=====	=====
Visit Type Totals			36.80	36.80
			=====	=====
Tribe Totals			36.80	36.80
Tribe: NAVAJO TRIBE, AZ NM AND UT				
Visit Type: MEDICAL SOCIAL SVCS				
Insurer Type: MEDICAID FI				
PATIENT,TWO	67890A	01/12/2023	368.00	368.00
			=====	=====
Visit Type Totals			368.00	368.00
			=====	=====
Tribe Totals			368.00	368.00
Tribe: PASCUA YAQUI TRIBE, AZ				
Visit Type: PHARMACY				
Insurer Type: MEDICAID FI				
PATIENT,THREE	54321A	01/26/2023	25.00	25.00
			=====	=====
Visit Type Totals			25.00	25.00
			=====	=====
Tribe Totals			25.00	25.00
			=====	=====
Report Totals			429.80	429.80

(REPORT COMPLETE):

System Maintenance



A/R Bill & Transaction Synchronization Report

(A/R > RPT > MRM > ATS)

- Provides a list of bills that are out of balance
 - Bill Balance doesn't match the posted transactions' balance

List of Transactions for Bill 654321A-DH-113116

Patient: DEMO,PATIENT
Address: 123 HOME DRIVE
ALBUQUERQUE, NEW MEXICO 87125

Phone #:

Beg DOS : JAN 01, 2020
End DOS : JAN 01, 2020

Insurer: RAILROAD RETIREMENT
Balance: 100.00

Trans Dt	By	Trans Type A/R Account	Batch	Amount	Balance Item
01/28/2020		BILL NEW RAILROAD RETIREMENT	NO BATCH	327.00	327.00
01/28/2020	ABC	PAYMENT MEDICARE 012820	MEDICARE-01/28/2020-1	(261.60)	0 65.40
01/28/2020	ABC	CO-PAY/Coinsurance Amount MEDICARE 012820	MEDICARE-01/28/2020-1	(65.40)	1 0.00

- Can indicate system issues
- Part of Internal Controls
- Report to OIT for corrections

A/R Bill and Transaction Synchronization Report

WARNING: Confidential Patient Information, Privacy Act Applies

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DETAIL A/R Bill and Transaction Synchronization Report AUG 9, 2023@12:47 Page 1
at ALL Visit Location(s) under 2017 DEMO HOSPITAL Billing Location

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A/R BILL	DOS	A/R ACCOUNT	BILL BALANCE	TRANSACTION HISTORY BAL	DIFFERENCE
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Visit Location: 2017 DEMO HOSPITAL

123456A-DH-1	01/24/2022	NEW MEXICO BC/B	0.00	-100.00	100.00
Appr Dt: 03/07/2022@10:47 (3220307.10471)			HRN: 13577		206.00 []

TR IEN	TR TYPE	A/R ACCOUNT	TR AMOUNT	TR BALANCE
3215266	BILL NEW	NEW MEXICO BC/	206.00	206.00
3215272	PAYMENT	NEW MEXICO BC/	-175.00	31.00
3215273	ADJUST ACCOUNT	NEW MEXICO BC/	-15.00	16.00
3215274	ADJUST ACCOUNT	NEW MEXICO BC/	-16.00	0.00
3215298	PAYMENT	NARRATIVE INSU	-100.00	-100.00

654321A-DH-1	01/01/2020	RAILROAD RETIRE	100.00	0.00	100.00
Appr Dt: 01/28/2020@18:07 (3200128.180757)			HRN: 113116		327.00 []

TR IEN	TR TYPE	A/R ACCOUNT	TR AMOUNT	TR BALANCE
3200128.180758	BILL NEW	RAILROAD RETIR	327.00	327.00
3200128.18155	PAYMENT	MEDICARE	-261.60	65.40
3200128.181551	ADJUST ACCOUNT	MEDICARE	-65.40	0.00

** Visit Location Total	(Bill cnt: 2)		100.00	-100.00	200.00
			=====	=====	=====
*** REPORT TOTAL	(Bill cnt: 2)		100.00	-100.00	200.00

Security



Table Maintenance Site Parameters Report

(3PB > TMTP > TMRP > AUTM)

- Tracks and reports changes made to the following fields
 - 3P Parameters
 - Printable Name of Payment Site
 - Facility to Receive Payment
 - Location
 - Mailing Address Street, City, State, and Zip
 - 3P Insurer
 - Form Locator Override Data Value
- Consider running the report quarterly
- Locked with a security key: ABMZ SITE SETUP
- Historically part of the 3P Internal Control Policy Online Self-Assessment Tool

Table Maintenance Site Parameters Report

```

=====
LISTING of Audited fields                                     AUG 9,2023   Page 1
=====
Date/Time          User              Old value          New Value
-----
3P INSURER  Fld: FORM LOCATOR OVERRIDE
08/28/2019@17:53  BILLER,SUPER          CMSOVERRIDE

3P PARAMETERS  Fld: FACILITY TO RECEIVE PAYMENT
11/06/2018@11:08  MANAGER,SITE          OLD 2011 DEMO HOSPITAL  2017 DEMO HOSPITAL (AB
09/13/2021@15:48  BILLER,ONE            ZZ 2017 DEMO HOSPITAL  2017 DEMO HOSPITAL

3P PARAMETERS  Fld: PRINTABLE NAME OF PAYMENT SITE
08/31/2017@12:27  MANAGER,SITE          2011 DEMO HOSPITAL
11/06/2020@11:08  MANAGER,SUSIE        2011 DEMO HOSPITAL      2017 DEMO HOSPITAL

LOCATION  Fld: MAILING ADDRESS-STREET
09/06/2017@14:28  MANAGER,SITE          5300 HOMESTEAD RD NE
10/10/2017@15:41  MANAGER,SITE          RT. 1, BOX 12           5300 HOMESTEAD NE

LOCATION  Fld: MAILING ADDRESS-CITY
09/06/2017@14:28  MANAGER,SITE          ALBUQUERQUE
10/10/2017@15:41  MANAGER,SITE          PARKER                  ALBUQUERQUE

LOCATION  Fld: MAILING ADDRESS-STATE
09/06/2017@14:28  MANAGER,SITE          NEW MEXICO
10/10/2017@15:41  MANAGER,SITE          ARIZONA                 NEW MEXICO

LOCATION  Fld: MAILING ADDRESS-ZIP
09/06/2017@14:28  MANAGER,SITE          87110
10/10/2017@15:41  MANAGER,SITE          85344                   87110

(REPORT COMPLETE):

```

UFMS Reports



Grand Total All Files by Transmission Date

(3PB > UCSH > RPTS > GTOT)

- RPMS Export Date and Time
- UFMS Export File Name
- Provides a summary of UFMS file export data by user and budget activity
 - Bill Count, Bill Amount, Excluded Count and Dollar Amount (not exported to UFMS)

Grand Total All Files by Transmission Date

UFMS EXPORT SUMMARY

Page: 1

LOCATION: INDIAN HOSP

EXPORT DATE: JUN 30, 2023@09:58:44

FILE NAME: IHS_TPB_RPMS_INV_232101_20230630_095844_2.06.00k.DAT

EXPORT(S) RESENT: <<NONE>>

BUDGET ACTIVITY	BILL CNT	AMOUNT	EXCL.CNT	EXCL.AMT

SESSION ID: 3230629.111224	BILLER: BILLER,SUPER			

INDIAN HEALTH HOSPITAL				
MEDICARE	5 bills	612.00	0 bills	0.00
OTHER	1 bill	905.00	1 bill	905.00
PRIVATE INSURANCE	9 bills	3,789.59	0 bills	0.00
Total for facility	15 bills	5,306.59		
TOTAL BILLS:	15 bills	5,306.59	1 bill	905.00

--- EXPORT SUMMARY ---				
MEDICARE	5 bills	612.00	0 bills	0.00
OTHER	1 bill	905.00	1 bill	905.00
PRIVATE INSURANCE	9 bills	3,789.59	0 bills	0.00

TOTAL EXPORTED:	14 bills	4,401.59		

E N D O F R E P O R T

View Session File

(A/R > CSH > SUP > RPT > VSF)

- Grand Total All Files by Transmission Date
- RPMS Export Date and Time
- UFMS Export File Name
- Provides a count and dollar amount of transactions exported, broken down by Allowance Category
 - Payments
 - Adjustments
 - Refunds

View Session File

Grand Total All Files by Transmission Date

GRAND TOTAL ALL FILES REPORT

PAGE 1

REPORT DATE: AUG 18,2023@13:52:25

PRINTED BY : POSTER,SUPER

DATE RANGE FROM : AUG 18,2023 TO AUG 18,2023

FILE: IHS_AR_RPMS_RCV_719_232101_20230818_135211_1.08.18.DAT

TRANSMISSIONS:

08/18/2023@13:52:12

	SESSION TOTALS		DS TOTALS		NS TOTALS		TRANS. TOTALS	
Cashiering Function								
- Payments								
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
MCR	1 \$	100.00	0 \$	0.00	0 \$	0.00	1 \$	100.00
OTH	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
PVT	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00

TOTAL	1 \$	100.00	0 \$	0.00	0 \$	0.00	1 \$	100.00
Cashiering Function								
- Zero Pay								
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
MCR	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
OTH	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
PVT	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00

TOTAL	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00

View Session File
Grand Total All Files by
Transmission Date

Cashiering Function									
- Adjustments									
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
MCR	2 \$	130.00	0 \$	0.00	0 \$	0.00	2 \$	130.00	
OTH	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
PVT	2 \$	304.00	0 \$	0.00	0 \$	0.00	2 \$	304.00	

TOTAL	4 \$	434.00	0 \$	0.00	0 \$	0.00	4 \$	434.00	
Cashiering Function									
- Zero Adjustments									
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
MCR	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
OTH	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
PVT	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	

TOTAL	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
Cashiering Function									
- Remark Codes									
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
MCR	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
OTH	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
PVT	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	

TOTAL	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
Cashiering Function									
- Refunds									
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
MCR	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
OTH	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
PVT	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	

TOTAL	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00	
							TOTALS SENT:	5 \$	-334.00

Bill Transmit Check Report

(3PB > UCSH > SUP > UBLT)

- **Provides a list of 3P Bills that have not been transmitted to UFMS**
 - Bills do not have a UFMS Transmission stamp
- Payments posted to these bills will not be transmitted to UFMS
 - Delays revenue
- Potential reasons
 - User kicked out of RPMS while exporting
 - RPMS system outage during UFMS export
 - Site server problem
- Report to OIT for corrections

Bill Transmit Check Report

Missing Bills List for DEMO HOSPITAL												
BILL IEN	BILL ITYPE	INSURER TYPE	INSURER	UFMS TRANS	UFMS INV	BILL AMT	DT/TM APPR	BILL#	APPROV. BY	3P DUZ	ALL CAT	VISIT LOC
38528	R	R	MEDICARE			180	11/26/2022@15:09	123456A-DH-111	BILLER,ONE	3245	MEDICARE	DEMO HOSP
38529	R	R	MEDICARE			180	11/26/2022@15:09	222222A-DH-222	BILLER,FOUR	3245	MEDICARE	DEMO HOSP
38530	R	R	MEDICARE			65	12/13/2022@15:29	333333A-DH-456	BILLER,ONE	3245	MEDICARE	DEMO HOSP
38531	R	R	MEDICARE			65	12/13/2022@15:38	102030A-DH-333	BILLER,FOUR	3245	MEDICARE	DEMO HOSP
38532	D	D	O/P MEDI-CAL 9			4,784.00	05/21/2023@15:33	654321A-DH-101	BILLER,ONE	3245	MEDICAID	DEMO HOSP
38533	D	D	NEW MEXICO BC/BS INC			1,800.00	05/21/2023@16:45	203040A-DH-123	BILLER,ONE	3245	PRIVATE INSURANCE	DEMO HOSP

Not Sent Report

(A/R > CSH > SUP > RPT > NS)

- **Provides a list of payments and adjustments that have not been transmitted to UFMS**
 - Transactions do not have a UFMS Transmission stamp
- Reason why is listed on the report
 - 3P bill not sent to UFMS
 - Bill balance is negative
- Delays revenue
- Report to OIT for corrections

Not Sent Report

A/R BILL	TRAN. DATE	APPLY TO	REASON NOT SENT	ENTRY BY	CREDIT-DEBIT	TRANTYPE	ADJCAT	COLLECTION BATCH	COLLECTION ITEM	TREASURY DEPOSIT/IPAC	VISIT TYPE
123456A-DH-111	NOV 28, 2022@13:50:47:000	6064156064155890	22	POSTER,ONE	4000	PAYMENT		MEDICARE-11/28/2018-1	1	TDN123456	111
222222A-DH-222	JAN 3, 2023@12:30:28:000	6064156064155910	22	POSTER,THREE	383	ADJUST ACCOUNT	NON PAYMEN	MEDICARE-01/03/2019-1	1	TDN11225	131
333333A-DH-456	DEC 4, 2022@11:21:03:000	6064156064155900	22	POSTER,ONE	100	PAYMENT		PRIVATE-11/26/2019-1	1	TDN0125587	131
102030A-DH-333	DEC 4, 2022@11:21:04:000	6064156064155900	22	POSTER,THREE	283	ADJUST ACCOUNT	NON PAYMEN	PRIVATE-11/26/2019-1	1	TDN0125587	131
654321A-DH-101	APR 3, 2023@09:40:53:77	6064156064155910	22	POSTER,THREE	526	ADJUST ACCOUNT	NON PAYMEN	PRIVATE-03/31/2023-1	1	GINASTDN03312023	131
703040A-DH-123	APR 3, 2023@09:40:53:78	6064156064155910	22	POSTER,ONE	108	PAYMENT		PRIVATE-03/31/2023-1	1	GINASTDN03312023	131
Count of entries in Not Sent bucket:											
Error #22 had 6 entries for 5400.00											
22 - TPB BILL HAS NOT BEEN SENT TO UFMS											

Links and Resources

Contact	Purpose	Link
RPMS Feedback	Enhancement requests	https://www.ihs.gov/RPMS/index.cfm?module=feedback&option=add&newquery=1
RPMS Feedback	Training requests	https://ihsitsupport.servicenowservices.com/sp?id=sc_cat_item&sys_id=c6e98d28db3f8810c4f6365e7c96194e&sysparm_category=c5966d6bdbcb441033a53638fc96194a
		If unable to access ServiceNow please email support at itsupport@ihs.gov and the request can be completed for you
Listserv (Business Office)	Share experiences and questions with other sites	https://www.ihs.gov/listserv/topics/signup/?list_id=122
Tiered Support	Set up/IIS support/Issues/ General Support	Elevate through appropriate tiered support structure. 1) Local IT or Informaticist 2) Area IT or Informaticist 3) OIT Service Desk- User Support (IHS) ITSupport@ihs.gov or directly via ServiceNow Self Service Portal https://www.ihs.gov/itsupport/
Resource and Patient Management (RPMS) Clinical Applications	User manual Technical Manual Install Manual	https://www.ihs.gov/rpms/applications/
RPMS Training Website	End-user training/support	https://www.ihs.gov/rpms/training/
RPMS Training Recording & Material Repository	End-user training/support	https://www.ihs.gov/rpms/training/recording-and-material-library/ Only IHS Web Account holders can access the library. D1 access is not required to create an IHS Web Account.

Contact Information

Adrian Lujan, CPB
Practice Management Federal Lead/Information Technology Specialist
Adrian.Lujan@ihs.gov

Cindy Stout
Practice Management User Support/Training Specialist
Cindy.Stout@ihs.gov

Gina Carlton
Practice Management Business Analyst/User Support
Gina.Carlton@ihs.gov

Sandra Sealey, CPB
Business Office Coordinator, OKC
Sandra.Sealey@ihs.gov



