Indian Health Service

RPMS Reports that Impact the Revenue Generation Process

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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
                                          6385
                   TOTAL
```

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

	PVT	VET	CHS RESIDENCE	VET Y/N	DATE OF LAS	Γ EMPL STATUS	BILL VISIT	UNBILL VISIT
135951LAST NAME,FIRST NAME J								
102462 MASON, CAMERON JAMES					10/15/2021	FULL-TIME		
113001LAST NAME,FIRST NAME								
136546THOMAS,ANDY								
136679LAST NAME,FIRST NAME D								
112233LAST NAME, DEMO PT								
137806TEEWEE, SEAN								
111102 LAST NAME, FIRST NAME M					12/17/2021	FULL-TIME		
138638LAST NAME,FIRST NAME B 138724LASHURE,BILLY SCOTT								
120147 EWING, DEBRA A								
125689LAST NAME,FIRST NAME T 13569WEATHERS,STORMY					12/10/2021	UNEMPLOYED		
116258 JALAPENO, ARIEL 113116 COFFEE, LEON								
126963AIRMAN, SHELBY								
144781LAST NAME,FIRST NAME								
521185REACHER,JACK 133556DEMO,MEDICAL	Α							
15948LAST NAME, FIRST NAME								
18622 DEMO, UFT G	А							

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

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

PATIENT NAME			HRN	DOB		VISIT	CN.
DEMO,JANE			12543	02/16/1945	111111111		1
DEMO, JOHN			12356	01/01/1950	22222222		2
DEMO, PATIENT			12233	06/03/2003	33333333		11
DEMO,TEST			17631	01/09/1947	44444444		1
PATIENT,ONE			15531	09/06/1945	55555555		1
PATIENT, THREE			12345	08/02/1967	66666666		1
PATIENT,TWO			17649	12/14/1964	77777777		1
VETERAN, PATIENT			15161	04/01/1945	88888888		2
DEMO HOSPITAL	18 visits	7	registered				
AMBULANCE	2 visits	0	registered				
(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

		DEMO HOSPITAL	Page 1
	POTENTIALLY BILLABLE VISITS		· · · · · · · · · · · · · · · · · · ·
	Visit Dates: JAN SERVICE CATEGORY OF VISI		
	SERVICE CATEGORY OF VISI	7.22 71311	JERVICE CATEGORIES
HRCN	Patient Name	Date of Bi	rth
123456	DEMO, MISTER	DEC 20, 19	50
	PHS COMMISSIONED OFFICER	DDV TCD DV	DROVIDED NADRATIVE
	Visit Date Category		
	MAR 05, 2023 AMBULATORY	52 KO2.3	Arrested Dental Cari
	APR 11, 2023 AMBULATORY	00 145.998	ASTHMA
654321	PATIENT, DEMO	JAN 10, 197	1
	PHS COMMISSIONED OFFICER	DDV TCD DV	DDOL/TDED MADDATTME
	Visit Date Category	PRV 1CD DX	PROVIDER NARRATIVE
	JAN 16, 2023 AMBULATORY	21 523.9	Gum pain, bilateral
	JAN 28, 2023 AMBULATORY	09 V68.1	Dispensing medicatio
Total N	umber of Visits for Commissio	oned Officers/D	ependents: 4
RIIN TTM	E (H.M.S): 0.0.4		
	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

for		JRCES wit	gged as Billable And VISIT DATES from 01/	•		Page 1					
ST P	atient	HRN	Active Insurer	Claim Number	Visit Date	Clinic					
V	isit Location: Visit Type:										
FAB				31705	01/07/2022	GENERAL					
	Subtotal:1										
EDT EDT EDT EDT FAB	Visit Type: PATIENT,TWO DEMO,PATIENT DEMO,PATIENT DEMO,PATIENT PATIENT,THREE	654210 2	NT NEVERPAY INSURANCE BS OF MASSACHUSETTS BS OF MASSACHUSETTS BS OF MASSACHUSETTS MEDICARE	31713 31714 31717 31722 31718	03/28/2022 04/04/2022 07/05/2022 07/03/2022 06/08/2022	IMMUNIZAT GENERAL GENERAL					
			Subtot	al:5							
EDT EDT	Visit Type: PATIENT,FIVE PATIENT,SIX	1122	DNAL COMPONENT BCBS OF NEW MEXICO MEDICARE	31709 31719	01/09/2022 06/08/2022						
			Subtot	al:2							
(REP	ORT COMPLETE):		Tot	===== al:8							

Brief (single-line) Claim Listing

Statistical Summary

BRIEF LISTING of CLAIMS Flagge for ALL BILLING SOURCES Billing Location: DEMO HOSP	d as Billable JUL 31	======================================
Location	Visit Type	Number of Claims
DEMO HOSPITAL	INPATIENT OUTPATIENT MENTAL HEALTH	14 140 2
	OBSERVATION PHYSICAL THERAPY EMERGENCY ROOM	2 2 3
	TELEMED ORIGINATING CHIROPRATIC VIRTUAL CHECK-IN	1 1 2
	E-VISIT TELEMED DISTANT AMBULATORY SURGERY	1 1 9
	NON-EMERG TRANSPORT RADIOLOGY LABORATORY	1 1 2
	PHARMACY DENTAL	3 7
(REPORT COMPLETE):	PROFESSIONAL COMPONENT	49 Total: 242

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

	DATES DEMO H			16:22:38 Pa	ige 1
	HRN	Active Insurer	Claim Number	Visit Date	Rsn
Cancelling Officia Visit Location: Visit Type:	DEMO	HOSPITAL			
PATIENT, ONE	3049	MINNESOTA MEDICAID	30933	04/12/2021	14
Su	bcount	: 1			
Visit Type:				/ /	
•		BC/BS OF MICHIGAN	31627	01/17/2021	33
PATIENT, THREE		PRUDENTIAL HEALTHCARE	31555 31703	03/27/2020 12/11/2021	11 2
PATIENT, FIVE			30665		3
· ·	7653		31585	07/07/2020	1
Su	bcount	: 6			
	Count	· 7			
2 DUPLICAT 3 ELIGIBIL 11 OTHER 14 LEFT WIT	ion LAIM C E CLAI ITY NO		#tim 1 2 1 1 1	es on report	
(REPORT COMPLETE):					

Cancelled Claims Report

Statistical Summary

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 Offic	cial: BILLER,SUPER								
DEMO HOSPITAL	OUTPATIENT	2							
Subto	otal:	2							
Cancelling Offic	cial: USER,ONE								
DEMO HOSPITAL	INPATIENT PROFESSIONAL COMPON	3 IENT 1							
Subto	otal:	4							
Cancelling Offic	cial: BILLER,FAST								
DEMO HOSPITAL	OUTPATIENT DENTAL	3 1							
Subto	otal:	4							
To	otal:	10							
END OF REPOR	R T								

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

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 An "*" beside the claim number means the claim has been closed multiple times Claim Visit Active HRN Insurer Number Patient 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 > PCRP)

- 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

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 Claim Visit Patient HRN Number Date Clinic Reason Visit Location: 2017 DEMO HOSPITAL 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 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 END OF REPORT

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

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	Туре	Backbill Check?	# Visits	# Claims Generatd		
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	< <cla< td=""><td>IM GEN</td><td>ERATOR NOT</td><td>RUN - NO</td><td>DATA TO PRI</td><td>NT>></td><td></td></cla<>	IM GEN	ERATOR NOT	RUN - NO	DATA TO PRI	NT>>	
07/09/2023	DHSP	AUTO		214	206	0	
07/10/2023	DHSP	AUTO		92	87	4	
Totals for	2017 D	EMO		276	 31	244	

276

31

244

BACKBILLING CHECKS

Queued From

Date
Location
Date
07/01/2023@08:08:54
DEMO
DITION
D

Backbill Date 06/01/2023

End of report

GRAND TOTAL

Claim Generator Productivity Report Delimited Detail Imported to Excel Columns A - L

=======================================			=======================================		====						
CLAIM GENERATOR PRO	DUCTIVITY REPORT	AUG	1,2023@09:46:22 Pag	e 1							
GENERATED BY: CARLTO	ON,GINA										
for Claim Generator R	un Dates 07/30/2021	to 08/01/2	2023								
Parent Location: 2017 D	EMO										
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	Review/Chart
						Status Date	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
	60-VISIT IN REVIEW STATUS	NO CLAIM			0.101221,12013,112212	20, 12, 2022@ 20103120	
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	115.9	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	Informa	ation,	Privacy	Act App	plies		
EMP PRODUCTIVITY REPORT run by sfor ALL BILLING SOURCES with ACT for Both Billing and POS staff Billing Location: 2017 DEMO HO		-			-		_
BILLING TECHNICIAN			CXL'D CLAIMS		PEND 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

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 TECHNICIAN				CXL'D BILLS			
DTILED ONE		0	0	0	0	1	. (
BILLER, ONE	U	U	U	U	U	_	
BILLER, ONE							
06/01/2022 MHS	0	0	0	0	0	1	0
BILLER,TWO	2	1	0	0	0	0	(
BILLER, IWO			U	U	U	U	•
BILLER,TWO							
06/01/2022 MHS	2	1	0	0	0	0	0
BILLER, THREE	2	2	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	
,							
BILLER, FOUR							
06/01/2022 MHS	1	0				0	0
06/02/2022 MHS	31	15	1	0	0	1	1

PRODUCTIVITY REPORT run by LUJAN,ADRIAN AUG 20,2022@12:25:36 Page 1

LL BILLING SOURCES with ACTIVITY DATES from 06/01/2021 to 06/30/2021

th Billing and POS staff
g Location: 2017 DEMO HO

Billing Technician Activity Date

Claim/Bill Number Visit

DEMO HOSPITAL CARLTON,GINA 06/01/2021@10:45:28 402241111-

Employee Productivity Report - Validator

tion	Billing Technician	Activity Date	Number	Visit Type	Clinic	Date	Active Insurer	Туре	Billed	Patient	Insurer Type	Eligibility Status
DEMO HOSPITAL	CARLTON,GINA	06/01/2021@10:45:28	40224	1111-INPATIENT	1-GENERAL	11/1/2018	BO/P MEDI-CAL 9	Open		0WEATHERS,STORMY	MEDICAID FI	CHS & DIRECT
DEMO HOSPITAL	LUJAN,ADRIAN	06/17/2021@11:19:51	402500A	131-OUTPATIENT	1-GENERAL	5/18/2021	MUTUAL OF OMAHA	Approved	295.7	3EWING,DEBRA A	PRIVATE	INELIGIBILE
DEMO HOSPITAL	LUJAN,ADRIAN	06/17/2021@11:21:40	402500A	131-OUTPATIENT	1-GENERAL	5/18/2021	MUTUAL OF OMAHA	Exported	295.7	3EWING,DEBRA A	PRIVATE	INELIGIBILE
DEMO HOSPITAL	LUJAN,ADRIAN	06/17/2021@11:36:35	402501A	131-OUTPATIENT	1-GENERAL	5/18/2021	MEDICARE	Approved	41	4LASHURE,BILLY SCOTT	MEDICARE FI	INELIGIBILE
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	50	0JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
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	2	5JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
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	50	0JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
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	2	5JALAPENO,ARIEL	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/11/2021@12:23:11	402478A	111-INPATIENT	1-GENERAL	4/19/2021	MEDICARE	Approved	25,417.0	0LAST NAME,FIRST NAME	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:43:58	402431B	100-SECONDARY PAYOR (OUTPT)	1-GENERAL	6/29/2020	MEDICARE	Approved	103.	5LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:44:33	402431B	100-SECONDARY PAYOR (OUTPT)	1-GENERAL	6/29/2020	MEDICARE	Exported		5LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:44:37	402478A	111-INPATIENT	1-GENERAL	4/19/2021	MEDICARE	Exported	25,417.0	0LAST NAME,FIRST NAME	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:46:42	402489A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Approved	263.0	2LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:49:14	402490A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Approved		2LAST NAME,FIRST NAME J		CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:49:34	402489A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Exported		2LAST NAME,FIRST NAME J		CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:49:59	402490A	131-OUTPATIENT	1-GENERAL	6/5/2021	TRIBAL INSURANCE	Exported	263.0	2LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@10:55:39	402489B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Approved	47	5LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@11:00:17	402490B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Approved	47	5LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@11:00:52	402489B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Exported	47	5LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/15/2021@11:01:20	402490B	131-OUTPATIENT	1-GENERAL	6/5/2021	MEDICARE	Exported	47	5LAST NAME,FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	6/16/202	21402491A	131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Exported	285.3	1LAST NAME, FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:40:33		131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Approved	285.3	1LAST NAME, FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:40:54	402492A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Approved	263.0	2LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:41:27	402493A	131-OUTPATIENT	1-GENERAL	6/2/2021	BLUE CROSS/BLUE SHIELD	Approved	263.0	2LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:41:49	402494A	131-OUTPATIENT	1-GENERAL	6/14/2021	BLUE CROSS/BLUE SHIELD	Approved	17	9LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:42:12	402495A	131-OUTPATIENT	1-GENERAL	6/2/2021	UNITED HEALTHCARE	Approved	183.0	2LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:42:23	402496A	131-OUTPATIENT	1-GENERAL	6/7/2021	UNITED HEALTHCARE	Approved	263.0	2LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:42:31	402497A	131-OUTPATIENT	1-GENERAL	6/11/2021	UNITED HEALTHCARE	Approved	183.0	2LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:43:32	402493A	131-OUTPATIENT	1-GENERAL	6/2/2021	BLUE CROSS/BLUE SHIELD	Exported	263.0	2LAST NAME, FIRST NAME B	PRIVATE	DIRECT ONLY
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:43:43	402494A	131-OUTPATIENT	1-GENERAL	6/14/2021	BLUE CROSS/BLUE SHIELD	Exported	17	9LAST NAME,FIRST NAME B	PRIVATE	DIRECT ONLY
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:43:46	402492A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Exported		2LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:43:50	402495A	131-OUTPATIENT	1-GENERAL	6/2/2021	UNITED HEALTHCARE	Exported	183.0	2LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:43:50	402496A	131-OUTPATIENT	1-GENERAL	6/7/2021	UNITED HEALTHCARE	Exported		2LAST NAME, DEMO PT	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:43:50	402497A	131-OUTPATIENT	1-GENERAL		UNITED HEALTHCARE	Exported		2LAST NAME,DEMO PT	PRIVATE	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:48:46	402498A	131-OUTPATIENT	1-GENERAL	6/7/2021	TRIBAL INSURANCE	Approved	285.3	1LAST NAME, FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:49:04	402499A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Approved	263.0	2LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:49:17	402498A	131-OUTPATIENT	1-GENERAL		TRIBAL INSURANCE	Exported	285.3	1LAST NAME,FIRST NAME J		CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/16/2021@15:49:17	402499A	131-OUTPATIENT	1-GENERAL	6/12/2021	TRIBAL INSURANCE	Exported	263.0	2LAST NAME,FIRST NAME J	TRIBAL SELF INSURED	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/17/2021@10:55:56	402497B	131-OUTPATIENT	1-GENERAL	6/11/2021	AETNA HEALTH PLANS	Approved	9	4LAST NAME, DEMO PT	НМО	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/17/2021@11:10:59	402495B	131-OUTPATIENT	1-GENERAL	6/2/2021	AETNA HEALTH PLANS	Approved	5	OLAST NAME, DEMO PT	НМО	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/17/2021@11:51:56	40249	1131-OUTPATIENT	1-GENERAL	6/7/2021	MEDICARE	Closed		OLAST NAME, FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/17/2021@11:53:01	40249	1131-OUTPATIENT	1-GENERAL	6/7/2021	MEDICARE	Open		OLAST NAME, FIRST NAME J	MEDICARE FI	CHS & DIRECT
DEMO HOSPITAL	STOUT, CINDY	06/28/2021@11:07:09	40250	6131-OUTPATIENT	1-GENERAL	6/1/2021	BENEFICIARY PATIENT (INDIAN)	CxlClaim		ODEMO,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										
	ADJUSTMENTS UN-									
A/R TECHNICIAN	PAYMNT	CREDIT	DEBIT	ALLOC	REFUND	MESSGE				
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></end_of_report>										

Posting Productivity Report

Brief Listing

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								
A/R TECHNICIAN DATE LOC PAYMENTS				ADJU CREDITS	REFUNDS			
POSTER, ONE	11	995.00	19	12,069.93	4	1,504.00	1	100.00
, - , -	7 4	0.00 4.00	1 4	1,000.00	0 0	0.00 0.00	_	0.00
TOTALS:	11	995.00	19	12,069.93	4	1,504.00	1	100.00
<end of="" report=""></end>								

Posting Productivity Report - Validator

	onfidential Patient Info													
EMP PRODUCTIVI' VALIDATOR (delir at ALL Visit location from 03/01/2023 t	ITY REPORT run by POST imited HFS file) for POS ion regardless of Billing to 03/02/2023	STER,ONE AUG S ISTER,ONE ing Location with AC	9,2023@15:41 CTIVITY DATES	Page 1										
Session ID		Transaction Date		A/R Technician		Patient	Transaction Type		Adjustment 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		1.1.					ADJUST ACCOUNT		(4)NON PAYMENT		·		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 allov	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 allov	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

LS AWAITING EXPORT for A ling Location: 2017 DEMO		L3 AUG 17	,2023@14.33.32	Page 1
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	

Bills Awaiting Export Report Summarized Report by INSURER

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

Billing Location: INDIAN HOSP			
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 1	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
	62		44,121.69

Bills Awaiting Export Report Listing of UNPRINTED BILLS

=======	_ocation: 2017		
Bill	<u>.</u>	Export	
Number	Patient 	Mode	Billing Source
29054A	JONES, CHIPPER	HCFA-1500B U	JNITED HEALTHCARE [ATL]
29055A	JONES, CHIPPER	HCFA-1500B U	JNITED HEALTHCARE [ATL]
29345A	BUDGET, BEN	HCFA-1500 Y2k	KREVOLVING SQUARE INSURANCE
29355A	POWER, MAX	HCFA-1500 Y2k	KTIME INSURANCE
29356A	SHARK, MAUREEN	HCFA-1500В Т	THE PEOPLES HEALTH PLAN
402485A	LAST NAME, DEMO PT	837I (UB) 501	10aetna health plans
402631A	LAST NAME, FIRST NAME	837I (UB) 501	10aetna health plans
402632A	LAST NAME, FIRST NAME	837I (UB) 501	10aetna health plans
402633A	LAST NAME, FIRST NAME	837D (ADA) 50	010AETNA HEALTH PLANS
402551A	WEATHERS, STORMY	837P (HCFA) 5	5010NEW MEXICO BC/BS INC
395018C	TILDEN, THERESA ANN	837P (HCFA) 5	5010MEDICARE
102579в	WEATHERS, STORMY	837P (HCFA) 5	5010MEDICARE
402404в	DEMO, HALEY KELIS	CMS-1500 (02/	/12)MAILHANDERS BENEFIT PLA

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

with VISI	•	4/12/2	======================================	-		
Bill#	DOS	CPT	======================================	Billed	Paid	======= Denied SAR
	er: WELBY,MARC 04/12/2022		MEDICARE	106.00	48.20	36.80 2 21.00 42
	Tot	al for	Bill: 31296A	106.00	48.20	57.80
31296B	04/12/2022	99203	MONTANA MEDI	106.00	0.00	0.00
	Tot	al for	Bill: 31296B	106.00	0.00	0.00
				==== Total:2	==	
(REPORT CO	OMPLETE):					

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

Billing Location: 2017 DEMO HO

 												CDT (
					Clin					Bi11	Primary	CPT/ HCPCS		СРТ	Denied
					ic# Clinic				Billed	TypeExport Mode			Code NDC		ment /SAR~
402580A	COMPLETED	163412 DEMO, NONBEN	1/3/2022	1310UTPATIENT	01GENERAL	PRIVATE	NEW MEXICO BC/BS INC NON-BENEFICIARY	COOPER, STEVEN	521	CMS-1500 131(02/12) CMS-1500	I15.9	99244	0	521	50/;71 400/
402580B	COMPLETED	163412 DEMO, NONBEN	1/3/2022	1310UTPATIENT	01GENERAL	INDIAN)	PATIENT NEW MEXICO BC/BS	COOPER, STEVEN	50	131 (02/12)	I15.9	99244	0	521	50
402366C	BILLED	13569WEATHERS,STORMY	1/3/2022	1310UTPATIENT	01GENERAL	PRIVATE	INC NEW MEXICO BC/BS	COOPER, STEVEN	226	131UB-04 837P (HCFA)	I15.9	99214	510	226	0
402607A	BILLED	13569WEATHERS,STORMY	1/20/2022	1310UTPATIENT	01GENERAL	PRIVATE	INC NEW MEXICO BC/BS	COOPER, STEVEN	693	1315010 837P (HCFA)	I15.9	10061	0	593	0
402607A	BILLED	13569WEATHERS,STORMY	1/20/2022	1310UTPATIENT	01GENERAL	PRIVATE	INC	COOPER, STEVEN	693	1315010	I15.9	00162	0	100	0
402583A	BILLED	112233 LASTNAME, DEMO	4/15/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS,LINDA E	6,143.40	837P (HCFA) 131 5010 837P (HCFA)	195.9	99214	0		
402583A	BILLED	112233 LASTNAME, DEMO	4/15/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS,LINDA E	6,143.40		195.9	A0431	540		
402583A	BILLED	112233 LASTNAME, DEMO	4/15/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS,LINDA E	6,143.40	131 5010 837P (HCFA)	I95.9	A0436	540		
402583A	BILLED	112233 LASTNAME, DEMO	4/15/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS,LINDA E	6,143.40	131 5010 837P (HCFA)	195.9	A0398	540		
402583A	BILLED	112233 LASTNAME, DEMO	4/15/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS,LINDA E	6,143.40	131 5010 837P (HCFA)	195.9	A0394	540		
402583A	BILLED	112233 LASTNAME, DEMO	4/15/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	UNITED HEALTHCARE	MATTHEWS,LINDA E	6,143.40		195.9	A0422	00045-		
402610A	BILLED	138638 LASTN, FIRSTN	4/5/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS,LINDA E	474.02	837I (UB) 1315010 837I (UB)	J00.	J3490	0513- 250 60 00121- 0419-	11.9	0
402610A	BILLED	138638 LASTN, FIRSTN	4/5/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	474.02	131 5010 837I (UB)	J00.	J3490	250 04	5.02	0
402610A	BILLED	138638 LASTN, FIRSTN	4/5/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	474.02		J00.	99213	510	179	0
402610A	BILLED	138638 LASTN, FIRSTN	4/5/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	474.02	131 5010 837I (UB)	J00.	71010	324	250	0
402610A	BILLED	138638 LASTN, FIRSTN	4/5/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	474.02	131 5010 837I (UB)	J00.	81000	300	20.02	0
402610A	BILLED	138638 LASTN, FIRSTN	4/5/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	474.02		J00.	86588	300	25	0 25/;91
402592A	COMPLETED	138638 LASTN, FIRSTN	6/11/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	299.27	131 (02/12) CMS-1500	195.9	99212	0	140	182.32.95/ 25/;91
402592A	COMPLETED	138638 LASTN, FIRSTN	6/11/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	299.27	131 (02/12) CMS-1500	195.9	71045	0	114	182.32.95/ 25/;91
402592A	COMPLETED	138638 LASTN, FIRSTN	6/11/2022	131 OUTPATIENT	01 GENERAL	PRIVATE	DEMO INSURANCE ON	E MATTHEWS, LINDA E	299.27		195.9	J2001	0	45.27	182.32.95/

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
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- 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

Large Balance List

WARNING: Confide	ntial Patien	t Information	, Pri	vacy Act Applies	5	
Large Balance Lis for MEDICARE ALLO at ALL Visit loca	WANCE CATEGO	RY(S)	g Loc	AUG 19,2022@0)7:53 Page	1
BILL NUMBER	DOS	DATE BILLED	DTB	BILLED AMT	BALANCE	AGE
	2017 DEMO HO MEDICARE	SPITAL				
402537A-DIH-12568	9 06/01/2021	08/04/2021	444	98,037.00	98,037.00	380
AR Account Subot	al (\$) and A	verage (#):	444	98,037.00	98,037.00	380
A/R ACCOUNT:	MEDICARE MANA	AGED CARE TES	Т			
402410A-DIH-13667 402409A-DIH-13667 402420A-DIH-13667	9 04/27/2020	08/20/2020	844 844 844	138,888.75 136,886.55 139,097.75	138,888.75 136,886.55 139,097.75	843 729 457
AR Account Subot	al (\$) and A	verage (#):	844	414,873.05	414,873.05	676
Visit Loc Subot	al (\$) and A	verage (#):	744	512,910.05	512,910.05	602
Report Tot	al (\$) and A	verage (#):	==== 744	512,910.05	512,910.05	602

(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

for MEDICAR	E ALLOWANG	Balance List CE CATEGORY(n under INDI	s)		17,2022@21:! ling Location	_
BILL NUMBER	DOS	DT BILLED	BILLED AMT	PYMTS	ADJS	BALANCE
VISIT LOCAT: ALLOWANCE CA A/R ACCO	ATEGORY:	IAN HEALTH H MEDICARE ICARE	OSPITAL			
17597A 17273B 21111A 21464A 21710A 23068A 23069A 30076A 30074A	03/26/20 03/09/20 05/22/20 06/24/20 08/01/20 01/14/20 08/27/19 06/09/20 06/11/19	04/29/20 06/13/20 07/24/20 08/14/20 12/04/20 12/04/19 08/20/20	138.00 138.00 124.00 175.00 175.00 175.00 201.00 201.00	127.00 110.40 138.00 128.00 276.00 156.00 0.00 125.00	171.00 29.60 32.00 69.00 74.00 38.00 38.00 263.00 101.00	-160.00 -2.00 -46.00 -22.00 -175.00 -19.00 -19.00 -62.00 -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
Repo	rt 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 P/	AGE: 1
Policy Holder PT. SS #	Policy #	Claim #	DOS DOB	Amt Bld	Balance
DEMO,NARRY Pat: DEMO,NARRY 555447777 Comment:_	ABC12345678	402262B DH-13578	10/14/2018 12/12/1970	1545.00	1545.00
DEMO, NARRY Pat: DEMO, NARRY 555447777 Comment:	ABC12345678	402290A DH-13578	11/24/2018 12/12/1970	433.00	433.00
DEMO,NARRY Pat: DEMO,NARRY 555447777 Comment:_	ABC12345678	402296A DH-13578	11/15/2018 12/12/1970	114.00	112.50
DEMO,NARRY Pat: DEMO,NARRY 555447777 Comment:_	ABC12345678	402332A DH-13578	, ,	382.00	382.00

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: Co	onfidential Pa	atient Information,	Privacy Act Appl	ies					
Detail Age Detail F at ALL Visit locati	•	* *	•	Page 1					
Patient	Bill Numbe	er DOS	Amount Billed	Balance					
Visit Location: 2017 DEMO HOSPITAL Visit Type: OUTPATIENT A/R Account: MEDICAID									
DEMO, PATIENT	401329A-DH-2	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					
	oe: INPATIENT Account: LOV	ELACE HEALTH PLAN							
LAST NAME, FIRST NA LAST NAME, FIRST NA			-	·					
A/R Account	Count: 2	Total:	3,020.00	3,020.00					
A/R	Account: MED	ICARE							
WEATHERS,STORMY	402261B-DH-1	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: Confident	ial Patient	Information,	Privacy	/ Act Appl	ies	
Age Summary Report f at ALL Visit location						Page 4
ALLOWANCE CATEGORY	CURRENT	31-60	61-90	91-120	120+	BALANCE
*** VISIT Location: MEDICAID # of Claims	INDIAN HEAL 0.00	 _TH HOSPITAL 640.00 1	0.00	519.00 1	202819.25 734	203978.25 736
MEDICARE # of Claims	0.00	0.00	0.00	0.00	633879.26 562	633879.26 562
OTHER # of Claims	0.00	114.00 1	0.00	0.00	27584.83 107	27698.83 108
PRIVATE INSURANCE # of Claims	0.00	0.00	0.00	0.00	809855.82 1241	809855.82 1241
VETERANS # of Claims	0.00	0.00	0.00	0.00	3576.45 22	3576.45 22
*** VISIT Loc Total # of Claims	0.00	754.00 2	0.00	519.00	1677715.61 2666	1678988.61 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: Confident	ial Patient	Information	, Privacy	Act Appl	ies	
UFMS Age Summary Rep	ATEGORY(S)			,	23@15:27	J
at ALL Visit location	on(s) under 	INDIAN HEAL	TH HOSPIT	AL Billin 	g Location	
ALLOWANCE CATEGORY	CURRENT	31-60	61-90	91-120	120+	BALANCE
*** VISIT Location:	INDIAN HEAL	======= TH HOSPITAL				
MEDICAID # of Claims	0.00	0.00	0.00	0.00	998.00 2	998.00 2
MEDICARE # of Claims	0.00	0.00	0.00	0.00	2772.99 8	2772.99 8
OTHER # of Claims	0.00	0.00	0.00	0.00	1219.00	1219.00
PRIVATE INSURANCE # of Claims	0.00	0.00	0.00	0.00	5495.97 20	•
VETERANS # of Claims	0.00	0.00	0.00	0.00	715.84 6	
*** VISIT Loc Total # of Claims	0.00	0.00	0.00	0.00	11201.80	11201.80 40
# of Claims	0.00	0.00	0.00	0.00	11201.80 40	11201.80 40

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: AUG 25,2022 15	: 35 20	ATCH STATIST 017 DEMO HOS N-2022 TO				PAGE 1
BATCH DATE -SEQ-BS	BATCH (COLLECTIONS PROCESSED			REFUNDED FROM BATCH	BALANCE
=======================================						
COLL	ECTION ID:	PRTVATF				
02/15/2022-1- P		0.00	3000.00	5000.00	0.00	0.00
02/16/2022-1- P		452.32	0.00	0.00	0.00	
03/01/2022-1- P			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- P2	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	
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	3,2023@08:30:33	3	PAGE 1							
	TREA		•	STATISTICS FOR						
		TAL JG 8,2023								
		CATEGORY N: ALL								
ITEM	ITEM COLLECTIONS UNALLOCATED REFUNDED ITEM									
TOTAL	PROCESSED	TRUE	FROM ITEM	TRANSFER	BALANCE					
=======	==========				=======	======				
COLLECTION 04/17/2023- ITEM 1: 403 2000.00 ITEM 2: 403	3049 496.00 3049	0.00	504.00	0.00	0.00	1000.00				
COLLECTION 04/17/2023- ITEM 1: 403 2000.00	ID: MEDICARE -1- P TDN: 3049 496.00		504.00 2000.00	0.00	0.00	1000.00				
COLLECTION 04/17/2023- ITEM 1: 403 2000.00 ITEM 2: 403	ID: MEDICARE -1- P TDN: 3049 496.00 3049 0.00	0.00								

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
    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
                      1793.52
SUBTOTAL
                      1793.52
TOTAL
```

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 L		JUN 2,2023@10:50 Page 1				
For LOCKDOWN DATES _ocation: 2017 DEMC 			LOCKDOWN P	ERIOD: 6 MO		
COLLECTION BATCH NA		TOTA ITEM	L TOTAL	BALANCE		
COLLECTION	I ID: MEDICARE					
2/18/2022-1	TDN111111	1	1724.16	1253.22		
/28/2022-1	TDN222222	1	750.00	750.00		
2 BA	TCHES		2474.16	2003.22		
COLLECTION	ID: PRIVATE					
/27/2021-1	IPAC11111	1	618.24			
/01/2021-1*	TDN3333333	1	500.00			
13/2021-1	IPAC22222	1	783.19			
/25/2022-1	IPAC333333	5 1	5,000.00			
/09/2022-1 /01/2022-1	TDN4444444 TDN555555	1	500.00 4,624.83	274.00 1,258.21		
,	ATCHES	_	12,026.26	8,183.64		
		=======				
TOTA	\L		14,500.42	10,186.86		

Batch Lockdown Report Delimited Detail Imported to Excel

COLLECTION ID	LOCATION	ALLOWANCE	COLLECTION BATCH NAME	TDN/IPAC	ITEM	TOTAL	BALANCE	ITEM	PAYER	CHECK NUMBER	ITEM	ITEM
		CATEGORY			COUNT	BATCHED		NUMBER			AMOUNT	BALANCE
MEDICARE	2017 DEMO HOSPITA	I Medicare	MEDICARE-12/13/2022-1	12132022	1	\$100.00	\$100.00	2	MEDICARE	CHKNBR12132022	\$100.00	\$100.00
MEDICARE	2017 DEMO HOSPITA	I Medicare	MEDICARE-03/24/2023-1	3242034	1	\$200.00	\$200.00	1	MEDICARE	CHKNBR324234	\$200.00	\$200.00
MEDICARE	2017 DEMO HOSPITA	I Medicare	MEDICARE-03/24/2023-2	3242333	1	\$200.00	\$200.00	2*	MEDICARE	NEWCHKNBR324235	\$200.00	\$200.00
MEDICARE	2017 DEMO HOSPITA	I 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 HOSPITA	I Medicare	MEDICARE-03/31/2023-1	10102345				2	MEDICARE	MCRCHKNBR2	\$5,000.00	\$5,000.00
MEDICARE	2017 DEMO HOSPITA	I Medicare	MEDICARE-04/04/2023-1	4042023	1	\$100.00	\$100.00	1	MEDICARE	CHKNBR040420234	\$100.00	\$100.00
MEDICARE	2017 DEMO HOSPITA	I Medicare	MEDICARE-04/05/2023-1	4052023	1	\$500.00	\$500.00	1	MEDICARE	CHKNBR04052023	\$500.00	\$500.00
MEDICARE	2017 DEMO HOSPITA	I 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 HOSPITA	I 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 HOSPITA	I Private Insurance	PRIVATE-05/25/2022-1	52520226				2	NARRATIVE INSURANCE	CHKNBRITEM2	\$1,000.00	\$1,000.00
An '*' after the it	em number means at l	east part of it is in Unal	located Cash									
<end of="" report<="" td=""><td>></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></end>	>											

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	Υ		6064156064156100	4/5/2023@15:23:18
2017 DEMO HOSPITAL	11223A	3210761	PRIVATE-03/31/2023-1	1	TDN03312023	\$44.20	Υ		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	Υ		6064156064156130	4/5/2023@15:23:18
2017 DEMO HOSPITAL	55667A	3210811	PRIVATE-03/31/2023-1	1	TDN03312023	\$800.00	Υ		6064156064156130	4/27/2023@09:23
2017 DEMO HOSPITAL	77889A	3210833	PRIVATE-03/31/2023-1	1	TDN03312023	\$10.87	Υ		6064156064156120	
2017 DEMO HOSPITAL	88990A	3210839	PRIVATE-03/31/2023-1	1	TDN03312023	\$6.78	Υ		6064156064156110	
2017 DEMO HOSPITAL	99887A	3210848	PRIVATE-03/31/2023-1	1	TDN03312023	\$143.62	Υ		6064156064156090	
2017 DEMO HOSPITAL	88776A	3210850	PRIVATE-03/31/2023-1	1	TDN03312023	\$23.65	Υ		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 AUG 9,2023@09:39 PAYMENT SUMMARY REPORT Page 1 FOR COLLECTION POINT: MEDICARE BATCH DATES OF 04/01/2023 TO 04/30/2023 BATCHED AMOUNT: \$ 6,000.00 MONTH **PAYMENTS** # BILLS BILLED AMOUNT VISIT LOCATION: 2017 DEMO HOSPITAL APR 2023 1,367.00 1,076.80 1,367.00 1,076.80 VISIT LOC TOTAL REPORT TOTAL 1,367.00 1,076.80 Enter RETURN to continue or '^' to exit: WARNING: Confidential Patient Information, Privacy Act Applies AUG 9,2023@09:39 Page 2 PAYMENT SUMMARY REPORT FOR COLLECTION POINT: MEDICARE BATCH DATES OF 04/01/2023 TO 04/30/2023 6.000.00 BATCHED AMOUNT: \$ ** 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 6,000.00 1,076.80 4,923.20 **TOTALS**

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 by used to balance payments received with what has been posted in RPMS

Period Summary Report by Allowance Category

WARNING: Confident	ial Patient Informa	tion, Privacy	Act Applies	
with TRANSACTION DA	rt for ALL ALLOWANCE TES from 06/01/2023 ion(s) regardless of	to 06/30/2023	·	======= Page 1
ALLOWANCE CATEGORY	Billed Amt	Payment	Adjustment	Refund
*** VISIT Location:				
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 CENTE	:R		
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

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 ====================================											
VISIT TYPE		UNDUP PATIENTS		PAID AMOUNT	ADJ AMOUNT						
INDIAN HEALTH H	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	221.00	78.00	143.00	0.00					
CROSSOVER (O	1	1	40.20	0.00	0.00	40.20					
CROSSOVER (P	1	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		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					

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													
		 #			======= AVG	AVG	AVG	AVG	AVG	AVG	AVG	AVG	
Month	#	Visits	#		Visits	Days	Days	Days	Date	Days	Days	Days	Total
of	of	with	of	Billed	Checked	to PCC	to	3p Bill	Export	to	First	Last	Posted
DOS	Visits	Bills	Bills	Amount	in	CREATED	Reviewed	APPROVED	EXPORTED	Payment	Posting	Posting	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: TOTAL BILLS WI	49372 TH NO EXPO	49372 ORT: 0	61482	29028590.80	0.72	2.28	36.59	63.42	68.35	75.58	78.34	80.54	16423370.24

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

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

ALLOW <i>A</i> CAT	INSURER TYPE INSURER	BILL	DOS	APPROVAL DT		. TOTAL PAYME NTS				ADJUSTMENT CATEGORY	#DAYS (APPR.DT ADJ.DT)
MEDICA MEDICA				02205/24/2022@08:58 02207/14/2022@12:33							
MEDICA	RE		4/28/20	02106/22/2021@09:27			5501/14/2022@09:07	7		Chgs exceed fee	
MEDICA	RE		4/28/20	02106/22/2021@09:27			5501/14/2022@09:07	,		schd/max allow	
			2/22/20	02203/24/2022@07:50							
			2/22/20	02203/24/2022@07:54							
			6/16/20	02004/06/2022@10:53	178.22	2					
	BC/BS OF OKLAHOMA			02105/28/2021@13:45			3001/14/2022@09:07			Chgs exceed fee	
	BC/BS OF OKLAHOMA			02105/28/2021@13:45			3001/14/2022@09:07 			schd/max allow	
	BC/BS OF OKLAHOMA			02105/28/2021@13:54			3001/14/2022@09:07			Chgs exceed fee	
	BC/BS OF OKLAHOMA			02105/28/2021@13:54			3001/14/2022@09:07			schd/max allow	
				02203/17/2022@09:59			44005/27/2022/042/45		4.5	Do do dila	
				02007/02/2020@11:42			11006/27/2022@13:48		13	3 Deductible	
				02007/02/2020@11:42			11006/27/2022@13:48 12707/21/2022@10:19			Claim is under investigation.	

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 for Visit Dates from 01/01/20 Billing Location: DEMO HOSPIT	01/31/2023	MAY 12,2023@09:30:48 Page 1				
	LAIM	DOS	AMOUNT BILLED A	AMOUNT PAID		
Location: DEMO HOSPITAL Tribe: BLACKFEET TRIBE, MT Visit Type: OUTPATIENT Insurer Type: MEDICAID						
	2345A	01/22/2023	36.80	36.80		
	Visit	Type Totals	36.80	36.80		
Tribe: NAVAJO TRIBE, AZ NM Visit Type: MEDICAL SOCI Insurer Type: MEDICAID	AND UT AL SVCS		36.80	36.80		
- ·		01/12/2023	368.00	368.00		
	Visit	Type Totals	368.00	368.00		
Tribe: PASCUA YAQUI TRIBE, Visit Type: PHARMACY		Totals	368.00	368.00		
Insurer Type: MEDICAID		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

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

List of Transactions for Bill 654321A-DH-113116												
Patient: DEMO,PATIENT Address: 123 HOME DRIVE Beg DOS : JAN 01, 2020 ALBUQUERQUE, NEW MEXICO 87125 End DOS : JAN 01, 2020												
Phone #: Insurer: RAILROAD RETIREMENT Balance: 100.00												
Trans Dt [Ву	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			(261.60) 1/28/2020-1	65.40							
01/28/2020 /	ABC	CO-PAY/Coinsurance Amount MEDICARE 012820	MEDICARE-0	(65.40) 1/28/2020-1	1 0.00							

A/R Bill and Transaction Synchronization Report

WARNII	NG: Confide	ntial Pa	tient Info	rmatio	n, Priv	acy A	ct Appl	ies
DETAIL A/R Bi	location(s)	under 20	017 DEMO H	OSPITA	L Billi	ing Lo	cation	_
A/R BILL					BILL	TRAN!	SACTION	
Visit Lo	cation: 201	.7 DEMO H	OSPITAL					
123456A-DH-1 Appr Dt: 03	01/24/2022 3/07/2022@1	NEW MEX .0:47 (32)	XICO BC/B 20307.1047	1) H	0.00 IRN: 135	-: 577	100.00	100.0 206.00 []
TR IEN	TR TYPE				TR AN	OUNT	TR	BALANCE
3215266 3215272 3215273 3215274 3215298	ADJUST ADJUST	ACCOUNT ACCOUNT	NEW MEXIC	0 BC/ 0 BC/ 0 BC/ 0 BC/	-	-15.00 -16.00		16.00 0.00
654321A-DH-1 Appr Dt: 03	01/01/2020 1/28/2020@1	RAILRO 8:07 (320	AD RETIRE 00128.1807	1 57) H	.00.00 IRN: 113	3116	0.00	100.0 327.00 []
TR IEN	TR TYPE	:	A/R ACCOU	NT	TR AN	OUNT	TR	BALANCE
3200128.180 3200128.181 3200128.181	758 BILL NE 55 PAYMENT 551 ADJUST	W ACCOUNT	RAILROAD MEDICARE MEDICARE	RETIR	- 2 - 2	327.00 261.60 -65.40		327.00 65.40 0.00
** Visit Loca	tion Total	(Bill c	nt: 2)	1(0.00		00.00	200.00
*** REPORT TO	TAL	(Bill (cnt: 2)	1	.00.00		100.00	200.0

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 Old Value New Value User 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				
SESSION ID: 3230629.111224		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
			1 bill	
PRIVATE INSURANCE				
TOTAL EXPORTED:	14 bills	4,401.59		
END OF REPORT				

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 TO			RT DATE: RINTED B E FROM :		ER,SUPER 2023 TO	AUG 18,20		Т
TRANSMIS:		2.42						
08/18/	2023@13:5 	2:12						
	SESSION	TOTALS	DS TO	TALS	NS TO	TALS	TRANS.	TOTALS
OTH PVT	0 \$ 1 \$ 0 \$ 0 \$	0.00 100.00 0.00 0.00 	0 \$ 0 \$	0.00 0.00 0.00 0.00	0 \$ 0 \$	0.00 0.00 0.00 0.00	0 \$ 0 \$	0.00 0.00
Cashie - Zero	ring Func o Pay	tion						
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
MCR	· ·	0.00	0 \$	0.00	0 \$	0.00	0 \$	0.00
OTH	· ·	0.00	-	0.00	•	0.00	•	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	t	130.00		
OTH		0.00	0 \$	0.00	0 \$	0.00	0		0.00		
PVT											
PVI	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		
Cashier ⁻	ing Funct	tion									
- Zero	Adjustme	ents									
MCD	0 \$	0.00	0 \$	0.00	0 \$	0.00	0		0.00		
MCR		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		
	ing Funct rk Codes	tion									
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		0.00	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		
Cashier - Refu	ing Funct	tion									
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 Bi	lls List for DI	EMO 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
203040A-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 N	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=c6e98d28 db3f8810c4f6365e7c96194e&sysparm_category=c5966d6bdbcb441033a53638fc 96194a				
		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.				

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