How can I be sure that the charges I'm sending to you are being paid?

The revenue cycle is like a chain, and a chain is only as strong as it's weakest link. The revenue cycle has four main links: Intake, treatment, claims to third party payers, patient billing, and report reconciliation.

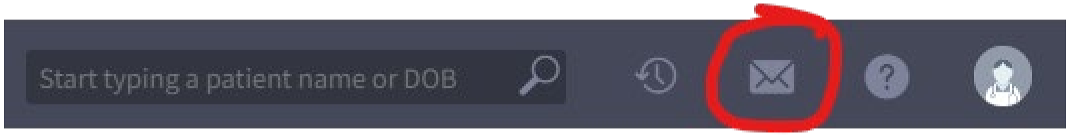
Intake	Treatment	Claim to Ins	Patient Billing
Collect intake forms and send estimate to patient	Schedule appointment Render treatment	PPL Bills Insurance and posts payment.	PPL Bills and collects from the patient.

The following 4 reports will help you to confirm that the treatment that you render is being billed out and paid correctly.

Intake	Claim to Ins	Patient Billing	Funds Deposited
Encounters Detail. Shows all charges billed.	Insurance Collections Detail. Shows outstanding claims pending insurance payment.	Patient Collections Detail. Shows patient balances due.	Payment Detail. Shows list of payments received.

Where do those reports come from, and what am I supposed to do with them?

All of the reports discussed here are automatically generated and delivered to your Kareo Platform Inbox monthly. Login to the Kareo Platform and open your inbox by clicking the envelope icon in the upper right corner.



° PO Box 503010, White City, OR 97503-0813 ° www.professionalpractice.net °
° Phone (541)234-4781 ° Fax (503)419-4662 ° Email info@professional-practice.org °

REPORT	What is it?	What to expect?	What to do?	Notes
Encounter Detail Delivered Monthly on the 28th.	This report is an "FYI" - it does not indicate the final disposition of a claim.	Most should be at least partially paid, but unpaid items are not cause for alarm.	☑ Address encounters with "MI" in the batch # field. ☑ Address any encounters that are in "Drafts" or "Rejected" status.	See the "FAQ" #1 below for what to do with encounters missing info, drafted, or rejected if you're not sure what is missing.
Insurance Collections Detail Delivered Monthly on the 10th.	This report shows a list of claims billed to third party payers but not yet paid - including patient, DOS, and aging.	About 60% of claims are paid correctly within 30 days of submission. About 20% of claims require over 60 days to pay correctly.	☑ See the claim status details on the Kareo Platform.	See the "FAQ" #2 below for details on how to view claim status in Kareo.
Patient Collections Detail Delivered Monthly on the 10th.	This report shows a summary of patient account balance/credit, aging, amount, and patient contact information.	Patients who have been sent several statements over 90 days are unlikely to pay without escalated communication and are considered "delinquent".	☑ Review this report monthly to determine whether any patient balances should impact scheduling.	See details in the "Patient Billing Cycle" section of our Policies and Procedures.
Payment Detail Delivered Monthly on the 10th.	Lists all payments received the previous month, including payment amount, date, payer, and reference number(s).	Payments on the payment detail report should be represented in your bank account within 10 days of the payment date.	☑ Compare the payments on the report with your bank records to ensure the funds have been deposited to your account.	See recommended steps in "FAQ" #3 and #4 below for reconciliation steps and missing items.

Frequently Asked Questions:

1. **Question: When an encounter is marked as missing information, drafted, or rejected, how can I tell what is needed??**
    - If you see that an encounter on the Encounter Detail report is missing information (“MI” in the batch # field) or is in “Draft” or “Rejected” status, and you don’t recall the reason why; open the charge in Kareo to view our notes and details about the information needed to process the charge.

    - See Kareo’s “Navigate Charges” step-by-step for a refresher to see how to view previously entered charges and notes.
    - Navigate Charges: https://helpme.kareo.com/Billing/Charges/Navigate_Charges

    - When sending information that was missing from a previously submitted charge, please be sure to indicate the following information so that the information you send can be processed appropriately:
        - Patient Name
        - Date(s) of Service
        - Note of encounter status (ie: Missing Information / Draft Encounter / Rejected Encounter)

    - When we realize that a charge / encounter is missing necessary information or contains some other kind of error, we will either note “MI” for ‘Missing Information’ in the batch # field, or file it with “Rejected” or “Draft” encounters. We will also send an email to you with the details – including missing items or other errors, and a request for whatever is needed to fix the charge and send a claim. If you respond quickly to the email requesting information, we will process the claim and the encounter will show up as “Accepted” on the Encounter Detail report.
    - *Report: Encounter Detail*

2. **Question: How do I check the status of a claim to insurance that is under 60-days old??**
    - We ask that you allow at least 60 days for processing of ordinary claims. About 40% of claims submitted are not processed properly the first time, which means that about 60% of claims require additional intervention and/or resubmission. Intervention and resubmission delays claim processing, and Professional Practice runs reports regularly to follow up and address claims that have not been processed correctly. Please allow us at least 60 days before requesting notes on claim status.

- If a claim is under 60-days old, and you would like to follow up, you can find information about claim status by following the steps outlined in the following link: https://helpme.kareo.com/Billing/Insurance_Collections/Navigate_Insurance_Collections
- *Report: Insurance Collections Detail*

3. **Question: What if the Payments Detail Report shows a payment that was never deposited to my bank??**
   - Note: This is an extremely rare circumstance, but it could happen.
   - **Is the payment post date over 30 days ago?**
     - **Yes**: See next question.
     - **No**: Please wait at least 30 days before inquiring on paper checks and at least 10 days for EFT payments.
   - **Was the payment part of a bulk deposit of paper checks to your bank?**
     - **I don't know -** *How would I know if it was*? – Checks deposited directly to your bank will be marked with a batch number starting with "D" followed by the month and year that the deposit was made.
       - Within a few days of a deposit, we will email you a scanned copy of the deposit slip from your bank and a report showing the payments that make up the deposit.
       - You can see scanned copies of the original checks and attachments in Kareo documents.
       - Navigate Documents: https://helpme.kareo.com/Platform/Documents/01Navigate_Documents_Page
       - When searching for scanned copies of the checks that make up a deposit, you can search by the payment batch# to see all payments in the bulk deposit.
     - **Yes**: Paper checks from a bulk deposit probably won't show up individually on your bank statement. They will show up as one lump deposit. When we make a deposit for you, we will email you a copy of the receipt, showing the date and the deposit amount. We also attach a scanned copy of all checks and documentation included with that deposit. If you received the bulk deposit, and the missing payment is in the list of payments making up the bulk deposit, then you can conclude that they payment was received.
     - **No**: Was the payment received in your office?
       - **Yes**. Please check your record of deposits to find the payment.
       - **No**… So the payment is over 30 days old, it was not part of a bulk paper check deposit, and was not delivered directly to your office. Please email Professional Practice with the payment amount, date, and payer name so that we can research it. We will find the source of the payment data and get back

to you. (Note: if research into a payment reported missing shows that the payment was deposited in the provider's bank account, then time spent researching the payment will be billed as an hourly task.)

- *Report: Payment Detail*

4. Question: What is the best way to reconcile my Payment Detail Report?

- 1. **Confirm Bulk Deposits.** Confirm receipt of your bulk deposits by checking with your bank about 5 business days after you receive a deposit receipt from us by email.
- 2. **Bulk Deposits.** Highlight the payments with a batch number starting with "D". These payments were deposited in bulk and will not show up as individual payments on your bank statement.
- 3. **Direct Payments.** Highlight payments that were received in your office and simply communicated to our office but not deposited in our office.
- 4. **Stripe – Credit Card Payments.** Patient credit card payments processed through Stripe (including Kareo and Inbox Health payments) will be recorded on your Payment Detail report at the total amount of the payment. Stripe merchant services charges a fee (2-3%) per transaction, deducted from the payment before the funds are deposited to your bank. Consequently, patient credit card payment amounts on your bank statement will be 2-3% less than the your Payment Detail Report.
- 5. **Match It Up.** Compare the remaining payments (un-highlighted) with your bank statement and check off each one as you find it on your bank statement. If all the payments on your report are checked off, then your report is reconciled.
- *Report: Payment Detail*

5. Question: This process is a real pain. Is there a shortcut?

If you don't have time to reconcile all reports every month, then spot checking or doing a full report reconciliation at least once per quarter might be a good alternative. We realize this is a lot of paperwork, and you hired a biller to keep the payers in check with their payments, but who keeps us in check? You're putting a lot of trust in us. Reconciling your reports will give you the confidence that you're getting paid for the work that you do.