



Visual Billing and Accounts Receivable

Billing and Accounts Receivable in a Nursing Home

The financial health of a Nursing Home is directly dependent on the efficiency of its computer system and the competency of its billing and accounts receivable staff.

Billing. Nursing Homes need to bill both room and board and ancillary charges to a variety of providers including, Medicaid, Medicare, private, HMO and other insurances. All invoicing must be HIPAA compliant, must be submitted in the proper medium (electronic, paper, etc.) and must conform to the idiosyncracies of each provider.

Charges. A Nursing Home needs to bill for the many and varied services performed for its residents. These services are performed for the residents both internally by the nursing home's staff, and externally by service providers such as pharmacies and laboratories.

Many disciplines in a nursing home are involved in putting together the information needed for proper billing: The admission and social service departments must maintain proper census, insurance information and NAMI amounts. The nursing department must complete the MDS 2.0 forms and is responsible for RUGs classifications. The therapy departments must track PT, OT and ST services performed and forward the information to billing.

Accounts Receivable. When invoices are paid the Accounts Receivable department records the receipts. Following the end of each month the bank statements and accounts receivable are reconciled and the month is closed.

Tracking and Collecting Outstanding Receivables. To properly track and collect outstanding receivables it is necessary to have an efficient system to track outstanding receivable and easily re-bill these charges.

The Visual Billing and Accounts Receivable Solution

Census Driven. The Visual Billing and Accounts Receivable system is directly integrated with Census. All room and board charges are thus calculated by the system based on census information.

Integration - Internal. The system is totally integrated and automatically gathers billing and accounts receivable information from a variety of areas and modules. For example, therapy charges for Medicare billing flow directly from the *Visual Therapy and Scheduling* module. RUGs categories required for Medicare Part A billing flow directly from the *Visual MDS 2.0* module.

Integration - External. Third party services performed by pharmacies, laboratories and other outside organizations automatically flow through via the *Visual Open Interface*.

Billing. A multitude of different billing programs are provided. Electronic invoices are created for Medicaid, Medicare, HMO and other insurance billing. A variety of paper billing formats are also available for UB92 and private billing.

Cash Received. Cash received can be entered into the system in a variety of ways. Manual entering of receipts can be accomplished directly or via exceptions. HIPAA compliant Medicaid and Medicare cash receipts are entered electronically.

Reporting. A rich variety of reports are available to help the facility track outstanding receivables. These include, multiple resident ledger formats, multiple aging schedule formats, trial balance reports and reports that re-create any logical grouping of charges or receipts.

Exporting. All data and reporting can be exported in a variety of formats including, Excel, ASCII, RTF and Crystal.

Report Query. A sophisticated query system is integrated with accounts receivable. The query system allows the facility to create, design and save reports based on any information in the SQL database. The reports are customized by the facility based on its needs.

Posting to General Ledger. Room and Board and ancillary charges are automatically posted to general ledger at the end of the month.

Language and Platform

The *Visual Billing and Accounts Receivable* module is a [Web-based](#) solution operating within Microsoft Internet Explorer.

[Active Server Pages](#) combining HTML, reusable [Active-X](#) components, [Java](#) and [Visual Basic](#) scripting provide a graphical point-and-click user interface.

The data base is Microsoft's [SQL Server](#) and printing of reports is accomplished with the user-friendly [Crystal Reporting](#) and/or [Adobe Acrobat](#).

Not Balanced: 20,897.21 No-Keypoff Prior Period Clear ALL ALL Batches Edit Info/Status Post

Batch Information			
Created by	100985	Remittance Number	Remittance Amount Paid 131,456.00
Batch Number	20044284:7:7	Remittance Date	01/01/1900 Remittance Net Amount Approving 110,558.79
Charge Type	MEDICAID	Remittance Provider ID	Discrepancy 20,897.21 Out of Balance
Date	04/26/2004 4:47:57 PM		
Posting Date	04/30/2004	Remittance Number Pending	6 Remittance Total Pending 3,744.31
Description		Remittance Number Denied	6 Remittance Total Denied 5,635.56

Resident	Date	Type	Description	From	To	Charge	Received	Balance	Status	Error
SYED	04/13/2004	Charge	MA	04/07/2004	04/13/2004	1,200.71		1,200.71	Denied	
		Credit				66.22	66.22	66.22		
JOSEPH	04/13/2004	Charge	MA	04/07/2004	04/13/2004	1,200.71		1,200.71		
		Credit				1,200.71	1,200.71			
	04/13/2004	Charge	NYS	04/07/2004	04/13/2004	66.22		66.22		
		Credit				66.22	66.22			
PETER	04/13/2004	Charge	MA	04/07/2004	04/13/2004	1,200.95		1,200.95	Pending	
	04/13/2004	Charge	NYS	04/07/2004	04/13/2004	66.22		66.22	Denied	

Cash Receipt Entry

Header information Detail lines Name: FRIDA Medicare No: Claim No: 2 From: 09/20/01 To: 09/30/01 Amount: \$2,750

FL14: Enter the recipient's birth date in MMDDYYYY format. 14. BIRTHDATE 15. SEX

FL15: Enter the recipient's gender as "M" or "F".

FL17: (Inpatient/Swing Bed/Outpatient Emergency Room Only) Enter the date of admission in MMDDYY format. If the recipient was not eligible on the date of admission, enter the first day of MHCIP eligibility. ADMISSION 17. DATE 18. HR 19. TYPE 20. SRC

FL18: (Outpatient Emergency Room Only) Enter the hour of admission (00-23).

FL19: (Inpatient/Outpatient Only) Enter the type of admission code.

FL20: (Inpatient/Swing Bed/Outpatient Only) Enter the source of admission code.

FL22: (Inpatient/Swing Bed/Outpatient Only) Enter the patient status code. 22. STAT

FL23: (Optional) Enter the recipient's medical/health record number (not the same as patient control number). 23. MEDICAL RECORD NO.

Editing a HIPAA Claim



Information

To obtain more information please contact our marketing division or visit our web page at www.ReliableHealth.com.

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Accounts Receivable

Run query HTML Excel Text Save to file as: HZCashReceiptSimple Save Data Copy query

HZ Cash Receipt Simple

ResidentID	Criteria	Selection	Value	Range	From	To	999999	Show ()
ResidentID	Is within the range from ... to ...	Value	Range	From	B	To	D2	And
Resident Name	Is from ... to ...	Value	Range	From	5/1/2004	To	5/31/2004	And
Posting Date	Is among the following...	Value	Range	From	A	To	ZZZ	And
Billing Category		Value	Range	From	1	To	999999	And
Credit		Value	Range	From	1/1/1900	To	1/1/2100	And
Service From		Value	Range	From	1/1/1900	To	1/1/2100	And
Service To		Value	Range	From	1/1/1900	To	1/1/2100	And

ResidentID	Resident Name	Posting Date	Billing Category	Credit	Service From	Service To
1	IMAS	5/2/2004	Medicare	5513.06	3/6/2004	3/29/2004
3	IMAS	5/2/2004	Medicare	787.58	3/30/2004	3/31/2004
4	RAYMOND	5/31/2004	Medicare	3912	4/1/2004	4/15/2004
5	RAYMOND	5/2/2004	Medicare	3912	3/17/2004	3/31/2004
6	RAYMOND	5/2/2004	Medicare	2362.74	3/1/2004	3/6/2004
7	RAYMOND	5/2/2004	Medicare	2642.9	3/7/2004	3/16/2004

Report Query and Excel Export