Exa® PACS/RIS

Feature Summary

Billing Reports

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Introduction to billing reports
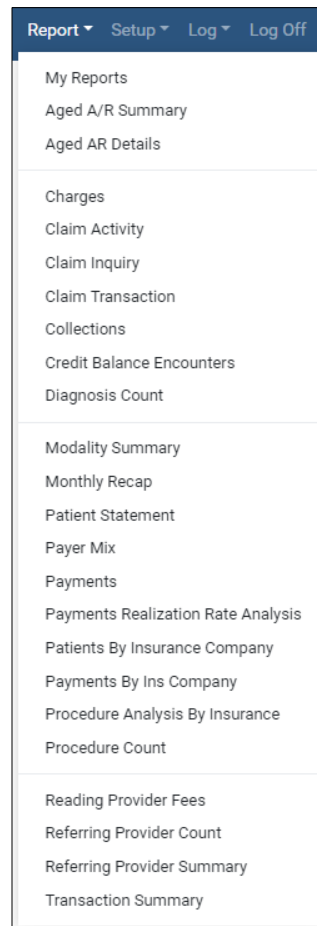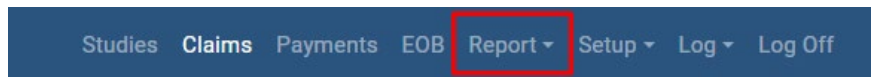
With Exa PACS/RIS billing reports you can manipulate and organize data, and efficiently analyze, track, and evaluate financial and operational information efficiently.

To open the main reports menu, select **Billing** > **Claims** > **Reports**.
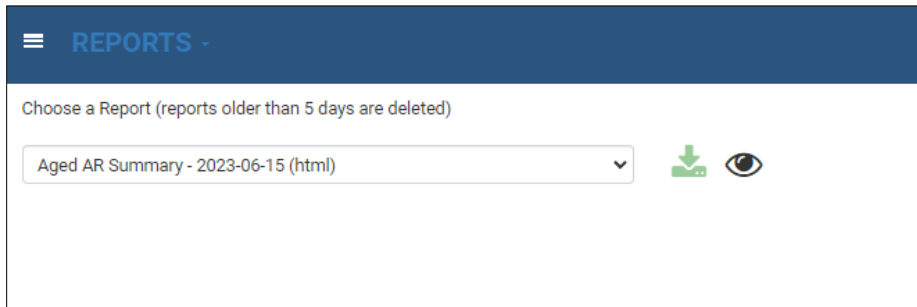
Burger > Billing...
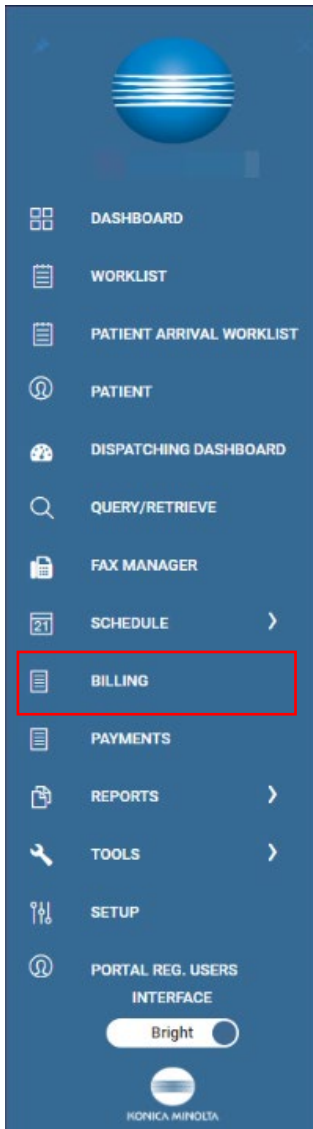
...Reports

This document describes each of the items and reports in the Reports menu.

My Reports

Reports that were generated in the last 5 days appear here. All reports can be exported to PDF, Excel, Excel Extended, CSV, or XML format.


Aged A/R

This report shows accounts receivable (A/R) aging by facility, responsible party, and payer for a specified cutoff date, and is a critical tracking mechanism for cashflow planning. A basic A/R aging report features the total owed by the client, and a breakdown by age (30–60 days, 60–90 days, etc.). This provides a "snapshot" of clients in good standing and clients who are delinquent.

A/R Cut-off Date needs to be selected
Details by Facilities, Billing Provider, and Select Insurance
Can check that report by the primary payer and can exclude credit balance
Columns in Report: Facility, Responsible Party, Cut-off date, Payer Name, Provider Type, EDI, 0-30 Count and Sum, 31-60 Count and Sum, 61-90 Count and Sum, 120+ count and sum, Total Balance, and Total Count.
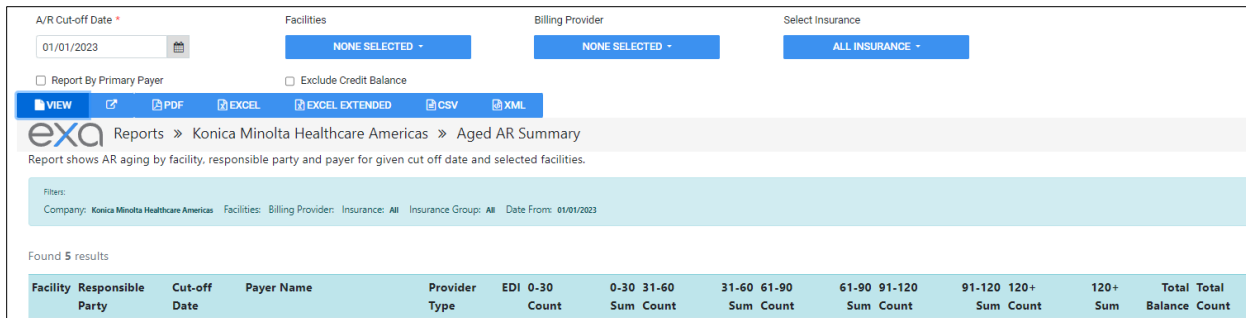
A/R Detail

This report shows a detailed list of outstanding facilities.

A/R Cut-off Date needs to be selected
Details by Facilities, Billing Provider, and Select Insurance
Can check that report by Primary Payer
Columns in Report: Facility, Claim ID, Cut-off Date, Bill Pro Name, Patient Name, Claims Date, Account #, Responsible party, Insurance Group, Payer name, EDI, Procedure Type, 0-30, 60-90, 90-120, and 120+ Sum, Total
The Accounts Receivable (AR) Detail Report template can be used as a key element of the AR Aging Analysis process:

Charges

This report shows charges that are used to reconcile and review the charges populated for any date of service.

Claim Date needs to be selected – can be a range
Details by Facilities and Billing Provider
Summary of total charges
Columns in Report: Patient Name and Total charge

Claims Activity

This report shows detailed claim activity for a specified date range.

Claim date needs to be selected, which can be range, Facilities, and Billing Provider
Columns in the report: Accession #, Claim #, Patient name, Account #, Claim Date, Referring Physician, Reading Physician, Ordering Facility, Facility Code, Type, Payment ID, Payment Date, Accounting Date, CPT Code, Description, Modifiers, Amount, Created On (Date) and Created By.

Claims Inquiry

This report shows detailed patient information including insurance information.

Worked "by" can be selected - either all or individual person
Claim Date /Comment date/Bill Created Date can be selected with date range.
Detail by Claims can be broken down by Insurance paid, patient paid or unpaid, Insurance, and users
Columns in Report: Carrier, Patient name and demographics, Billing provider, Claim #, Date, Code, Payment ID, Description, Charge, Payments Adjustments, Username.

Claims Transaction

This report shows claims, payments, and balances.

Worked "By" Can Be Selected - Either All or Individual Person
Claim Date /Pay Date / Bill Created Date Can Be Selected with A Date Range
Filters For Report Can Be Broken Down by Insurance, Referring Physicians, Cpt Code(S), and Claim Information
Report Fields: Claim#, Patient Name, Claim Date, Paid Date, Charge Amount, Paid Amount, Insurance Balance, Insurance (Cur), Insurance Paid, Referring Doctor and Insurance Payer Types

Collections

This report shows claims that are in Collections Review claim status.

The claim date needs to be selected
Filters can be applied by Facilities / Billing Provider
If Send claims to collections is checked the claims reported will be flagged as collections
Report fields: Account#, Claim #, Patient last name, First Name, Date of Birth, Account Balance, and service Date
Selecting the Send Claims to Collections button will automatically send patients to collections.

Credit Balance Encounters

The claim date needs to be selected
Filters can be applied by Facilities / Billing Provider
Report Fields: Patient name, claim ID, Status, Account #, Account date, Total, Patient balance, Insurance balance

Diagnosis Count

This report shows an aggregate diagnosis count by ICD code and facility for a specified date range.

The claim date needs to be selected
Filters can be applied by Facilities / Billing Provider
Report fields: ICD Code. The facility name, Description of code, and count

Modality Summary

The claim date needs to be selected
Filters can be applied by the Facilities / Billing Provider
Report Fields: Modality name, Claim count, Study count, Charges count, Total Bill Fee

Monthly Recap

Claim date needs to be selected
Filters can be applied to Facility / Billing Providers and Group By
Report Fields: Insurance Class. Service Facility, Charges, Adjustments. Balance, Expected Payments, and All credits

Patient Statement

Select the statement date
Filters that can be applied are Billing Provider, Statement Mode, and Facilities. Use the address of Pay-to-provider and Log in claim inquiry are options available.
Report Fields will be split up into columns: Encounter, Date, CPT Code, Description, and Amount.

The second row will display the current amount pending according to the 30,60,90-day buckets, and the final balance due.

The footer of the statement report can be modified to reflect which payment forms are accepted and the pay to address
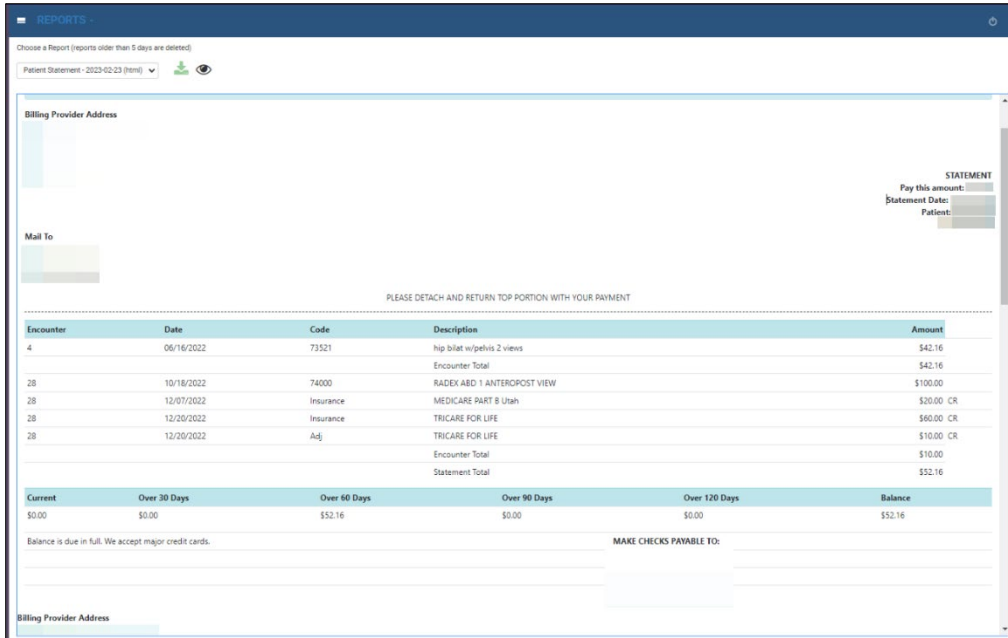
Payer Mix

Select the claim date range
Apply Filters by Facilities and Billing Providers
Report Fields: CPT Code, Insurance Code, Insurance Name, Facility Name, Claim Date, Bill fee, and Claim Count

Reports » Konica Minolta Healthcare Americas » Payer Mix

Report shows Payer Mix.

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

Found **13** results

CPT Code	Insurance Code	Insurance Name	Facility Name	Claim Date	Bill Fee	Claim Count
70559	D6P	AARP MEDICARE COMPLETE	Dave's Hospital	01/31/2023	$100.00	1
Q9967	D6P	AARP MEDICARE COMPLETE	Dave's Hospital	01/31/2023	$10.00	1
74178	D6P	AARP MEDICARE COMPLETE	Fred's clinic	04/27/2023	$0.00	1
74178	D6P	AARP MEDICARE COMPLETE	Fred's clinic	04/27/2023	$0.00	1
74290	D6P	AARP MEDICARE COMPLETE	Fred's clinic	04/27/2023	$0.00	1
71260	D6P	AARP MEDICARE COMPLETE	Hodorville	05/02/2023	$0.00	1
73701	D6P	AARP MEDICARE COMPLETE	Hodorville	05/02/2023	$0.00	1
74176	D6P	AARP MEDICARE COMPLETE	Hodorville	05/02/2023	$175.00	1
		AARP MEDICARE COMPLETE	—— Total ——		$285.00	8
71260	DO NOT TAKE	NON ACCEPT AARP HEALTH ADVANTAGE HEA	Dave's Hospital	02/02/2023	$0.00	1
74170	DO NOT TAKE	NON ACCEPT AARP HEALTH ADVANTAGE HEA	Dave's Hospital	02/02/2023	$0.00	1
		NON ACCEPT AARP HEALTH ADVANTAGE HEA	—— Total ——		$0.00	2
			— GRAND TOTAL —		$285.00	10

Payments

Claim date needs to be selected, and can be ranged.

Filters include Paid Location, Facilities, Billing provider, Users, User Role, Adjustment Codes, Insurance, Report Summary as well as Payment status which can be filtered between four categories: Fully applied, Over Applied, Partially Applied, and Unapplied.

The Report Fields: Accounting Date, Paid Location, Claim Facility, Payment ID, Claim ID, Patient Name,

Payment Realization Rate Analysis

Select the accounting date range

Filters include Service Date (bill), Billing Provider, Facilities, Insurance

Report fields: Claim ID, Payment Accounting Date, Billing provider, Facility name, Primary Insurance, Insurance Group, Service Date, Modality, Patient name, Account#, Charge, Payment, Adjustment, Balance, and Rate paid.

Patients by Insurance Company

Select claim date or No date Specified reports – If this option is selected this could populate a very large report.

Report Filters: Facilities, Insurance with the option to show inactive insurances.

Report Fields: Code, Level, Patient Name, Date of Birth, Gender, Policy, Insurance, and Group

Payments by the Insurance Company

Select Accounting Date Range
Filters: Facilities and Insurance
Report Fields: Payment ID, Insurance Name, Provider Type, Amount, Applied, Balance, Check/Card, Payment Mode, and the Payment Date

Procedure Analysis by Insurance

Select a Claim Date Range, Facilities, Billing Provider, Procedure By, CPT Code, Insurance, and Payer Type
Report Fields: Insurance, Billing Provider, Payer Type, Account#, Facility, Encounter ID, CPT Date and Code, Study Description, Modality, Charges, Allowed Amount, Insurance Payment / Adjustment, Patient Payment / Adjustment, Other payment/adjustment, and Balance.

Procedure Count

Select the Claim date range
Report filters: Facilities, Billing Provider
Report fields: Code, Description, Billing Fee, Units, and Average

Reading Provider Fees

Select the Claim date range
Report filters: Facilities, Provider Group
Report fields: Claim ID, Group, CPT, Description, Claim Date Payer Name, Amount, Accounting Date, Payment, Reading Fee %, and Reading Fee

Referring Provider Count

Select the Claim date range
Report filters: Facilities, Billing Provider
Report fields: Provider Name and Claim Count

Referring Provider Summary

Select the Claim date range
Report filters: Facilities, Billing Provider
Report fields: Provider Code, Provider Name, Count, Bill Fee, Allowed Fee

				Studies Claims Payments EOB **Report ▾** Setup ▾ Log ▾ Log Off		

Claim Date *			Facilities		Billing Provider	
01/01/2023 - 12/31/2023 📅			ALL SELECTED (12) ▾		ALL SELECTED (2) ▾	
📄VIEW ☑ 📄PDF 📄EXCEL 📄CSV 📄XML						

exa Reports » Konica Minolta Healthcare Americas » Referring Provider Summary

Report shows Referring Doctor Summary Information

Filters:
Company: **Konica Minolta Healthcare Americas** Facilities: **All** Billing Provider: **All** Date From: **2023-01-01** Date To: **2023-12-31**

Found **2** results

Provider Code	Provider Name	Count	Bill Fee	Allowed Fee
HCP116RF	Andrews, Nancy DO	1	$110.00	$10.00
8375319	Doctor, David D D.O.	2	$0.00	$0.00

Transaction Summary

Select the Claim date range
Report filters: Facilities, Billing Provider, Total by Month/Day
Report fields: Date, charges, Payments, Adjustments, Refunds, and Net Activity
Reports by month and day are shown

				Studies Claims Payments EOB **Report ▾** Setup ▾ Log ▾ Log Off		

Accounting Date *		Facilities		Billing Provider	By Month / Day	
01/01/2023 - 12/31/2023 📅		ALL SELECTED (12) ▾		NONE SELECTED ▾	TOTAL BY DAY ▾	
📄VIEW ☑ 📄PDF 📄EXCEL 📄CSV 📄XML						

exa Reports » Konica Minolta Healthcare Americas » Transaction Summary Report

Report shows Transaction Summary.

Filters:
Company: **Konica Minolta Healthcare Americas** Facilities: **All** Billing Provider: Date From: **2023-01-01** Date To: **2023-12-31**

Found **4** results

Date	Charges	Payments	Adjustments	Refunds	Net Activity
01/31/2023	$110.00	$0.00	$0.00	$0.00	$110.00
02/02/2023	$0.00	$20.00	$100.00	$0.00	($120.00)
02/13/2023	$0.00	$0.00	$0.00	$0.00	$0.00
	$110.00	$20.00	$100.00	$0.00	($10.00)