

Exa® PACS/RIS

Feature Summary

Add and Delete Payments

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ADD A PAYMENT

1. Go to **WORKLIST/SCHEDULE BOOK > EDIT STUDY > CHARGES/PAYMENTS > NEW PAYMENT.**

2. Add payment information and then select **SAVE.**

3. In the **Print Receipt** dialog, select **YES.**

The receipt opens in a new browser tab.

Accession No	Date Of Service	CPT Code	CPT Description
5977	08/22/2024	72157	XR MRI THORACIC SPINE W & W/O
5977	08/22/2024	A9579	GAD Injection
5977	08/22/2024	A9579	GAD Injection

PaymentID	Mode	Notes	Amount	Created By
142	CASH	MRI	100	DHavien

Please keep this receipt for your record

VIEW PATIENT PAYMENT HISTORY

1. Go to **WORKLIST/SCHEDULE BOOK > EDIT STUDY > PATIENT PAYMENT HISTORY.**

2. To view one or more payments, select their checkboxes and then select **PAYMENT RECEIPT.**

3. A browser tab opens to display a receipt with the selected payments.

EXA Report - Konica Minolta HCIT - Charge Payment Print PDF
 Konica Minolta HCIT
 2217 US Highway 70 E
 Garner 27529
 (999)999-9999

Patient : Apps, Demo
 MRN # : NC2046
 Receipt # : 66

Accession No	Date Of Service	CPT Code	CPT Description
6397	05/16/2024	74177	CT ABD & PELVIS W/CONTRAST
6397	05/16/2024	Q9958	Hocm <=149 mg/ml iodine, 1ml

PaymentID	Mode	Notes	Amount	Created By
142	CASH	MRI	100	DHavien
143	CASH	CT	50	DHavien

Please keep this receipt for your record

MAKE A CUSTOM RECEIPT

1. Go to **SETUP > OFFICE > FACILITY.**
2. Open the facility to customize the receipt for, and then select **CUSTOM RECEIPT.**

OFFICE- EA Activated

COMPANY MARKET FACILITY MODALITY MODALITY ROOM GROUP CHAT ROOMS NOTIFICATION TASK: >

SAVE SAVE & CLOSE BACK

Code * DEMOAPPS Inactive

Name * DEMOAPPS

Market Southeast (SE) x

Contact No. (123)456-9999

Fax No. (123)789-5555

Send Reports to Fax No.

Email

Email Report Link

Report Password

Email Attachment

Timezone * EST

Mammo License ID

Max TAT 1440 (in min)

Enable Alt. Acc. No.

Require SSN

Require Primary Phys.

PokitDok Response

Updobox Account ID

Send fax via Updobox

Upload Logo No file chosen
Max file size: 20MB

Current Logo

Address Line 1 101 Demo Apps Drive

Address Line 2

City/State/ZIP NASHVILLE TN

37201

File Store Exa Server

Show Patient Alerts

Show Recent Schedules

Days 45

Date/Time Display: Select

Enable Veterinarian Registration

Mobile Rad Dispatching Address

Do Not Allow Overlapping Procedures to Be Scheduled

Import Documents into Study as DICOMs

Global Auto-Print

Abbreviated Receipt

Custom Receipt

Name *

Country United States

Address Line 1

Address Line 2

City/State/ZIP

Select ZIP Code

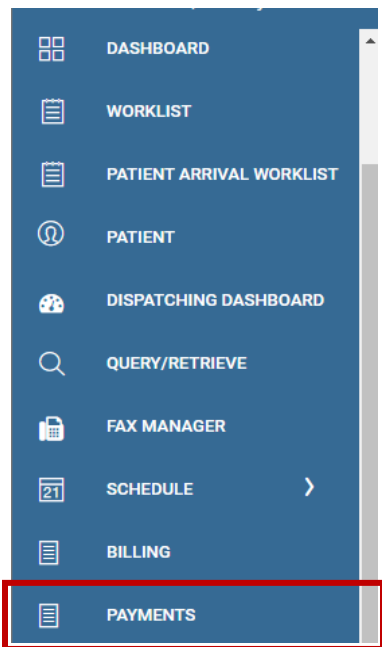
Phone No.

Fax No.

3. Enter the information for the custom receipt, and then select **SAVE**.

EDIT OR DELETE A PAYMENT

1. Go to **PAYMENTS**.



2. Select the **edit** button on the payment to modify.
3. Optional.
 - To generate a report, use the columns to filter the report by facility, date, and other criteria, and then select **GENERATE PDF**.
 - To export the report to a .csv file, use the columns to filter by facility, date, and other criteria, and then select **EXPORT**.

The screenshot shows the 'Payments' page header with a hamburger menu icon and a power icon. Below the header, there are filters for 'Payment Status' (set to 'ALL SELECTED (4)') and 'Payment Total' (\$125.00). A table with columns: PAYMENT ID, REFERENCE, PAYMENT DATE, ACCOUNTING DATE, PAYER TYPE, PAYER NAME, PATIENT MRN, PAYMENT AMOUNT, and PAYMENT APPLICABLE. Two rows are visible, both highlighted in yellow. The first row has an edit icon (pencil) in a red box.

PAYMENT ID	REFERENCE	PAYMENT DATE	ACCOUNTING DATE	PAYER TYPE	PAYER NAME	PATIENT MRN	PAYMENT AMOUNT	PAYMENT APPLICABLE
142		05/16/2024	05/16/2024	Patient	Apps, Demo	NC2046	\$100.00	\$0.00
141		04/29/2024	04/29/2024	Patient	Ulmer, Shawn William	NC2035	\$25.00	\$0.00

4. Select the **DELETE** button.

Note: In this screen you can also edit payments.

The screenshot displays the 'Payments' interface. At the top, there is a header bar with a hamburger menu icon and the text 'Payments'. Below this, the form is organized into several sections:

- Payment ID:** 144
- Reference Payment ID:** (empty field)
- Player:** Patient (dropdown), APPS (dropdown), DEMO (dropdown), NC2046 (dropdown), 03/25/1988 (dropdown), Apps Demo (dropdown).
- Payment Reason:** Self (dropdown)
- Paid Location:** Gamre (dropdown)
- Payment Mode:** Cash (dropdown)
- Accounting Date:** 05/10/2024 (dropdown)
- Check/Card Number:** (empty field)
- Amount:** 100.00
- Card Name:** (empty field)
- Applied:** 00.00
- Notes:** MRI (text area)
- Balance:** \$100.00

At the bottom of the form, there is a navigation bar with buttons: SAVE, ADD, PRINT RECEIPT, DELETE (highlighted with a red box), BACK, and DOCUMENTS. Below the navigation bar, there is a table with columns: ACCESSION NO., STUDY DATE, CPT CODES, and CPT DESCRIPTION.

ACCESSION NO.	STUDY DATE	CPT CODES	CPT DESCRIPTION
6897	05/16/2024	74177/9938	CT ABD & PELVIS W/CONTRAST, Hccm <140 mg/ml iodine, heli