

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.

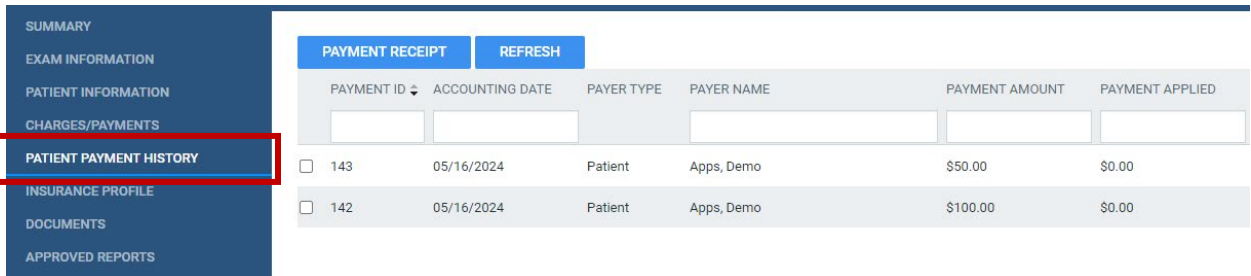
Accession No	Date Of Service	CPT Code	CPT Description
5977	08/22/2024	72157	XR MRI THORACIC SPINE W & W/O
5977	08/22/2024	A9579	GAD Injection
5977	08/22/2024	A9579	GAD Injection

PaymentID	Mode	Notes	Amount	Created By
142	CASH	MRI	100	DHavien

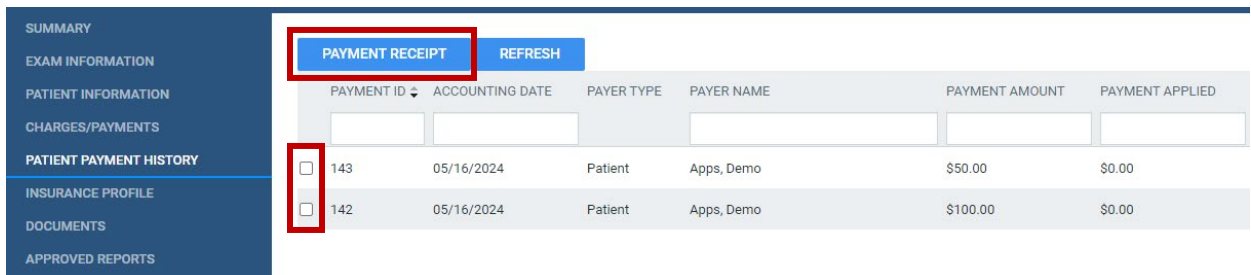
Please keep this receipt for your record

VIEW PATIENT PAYMENT HISTORY

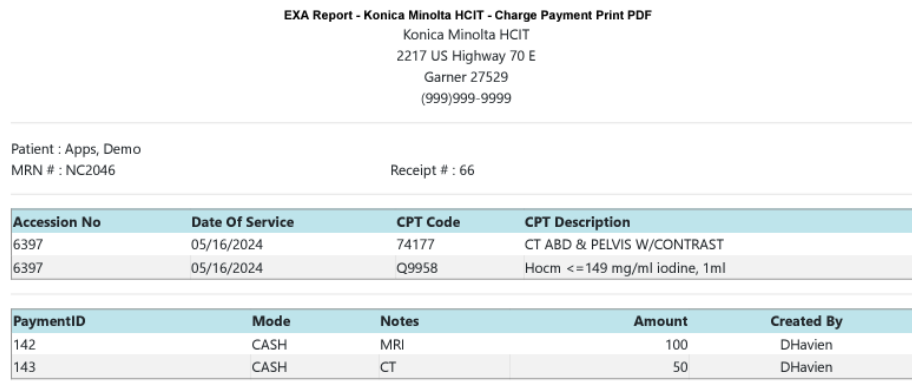
1. Go to **WORKLIST/SCHEDULE BOOK > EDIT STUDY > PATIENT PAYMENT HISTORY.**



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.



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

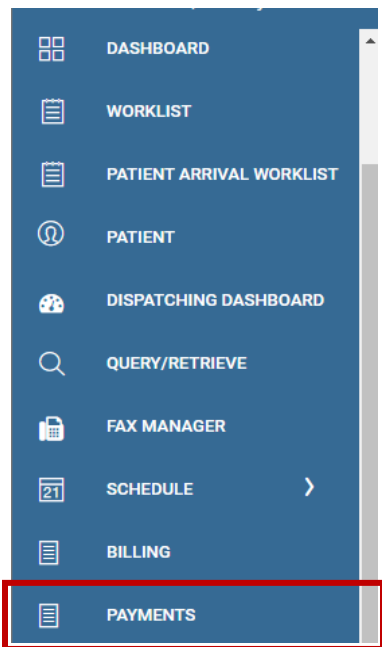
Phone No.

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**.

Payments

Payment Status: ALL SELECTED (4) | Payment Total: \$125.00

PAYMENT ID	REFERENCE	PAYMENT DATE	ACCOUNTING DATE	PAYER TYPE	PAYER NAME	PATIENT MRN	PAYMENT AMOUNT	PAYMENT AP
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 shows the 'Payments' interface. At the top, there is a 'Payments' header with a menu icon and a search icon. Below this, the form is organized into several sections:

- Payment ID:** 144
- Reference Payment ID:** (empty field)
- Buttons:** 'PREVIOUS' and 'NEXT' buttons are located in the top right.
- Payer:** A dropdown menu set to 'Patient'. Below it are fields for 'APPS' (value: NCC046), 'EDMO' (value: 03/25/1988), and 'Apps Demo' (value: Apps Demo).
- Payment Reason:** A dropdown menu set to 'Self'.
- Paid Location:** A dropdown menu set to 'Garner'.
- Payment Mode:** A dropdown menu set to 'Cash'.
- Accounting Date:** 05/16/2024
- Amount:** 100.00
- Applied:** 00.00
- Balance:** \$100.00
- Check/Card Number:** (empty field)
- Card Name:** (empty field)
- Notes:** MRI

At the bottom of the form, there is a row of buttons: 'SAVE', 'ADD', 'PRINT RECEIPT', 'DELETE' (highlighted with a red box), 'BACK', and 'DOCUMENTS'. Below the buttons is a table with the following data:

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