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Exa® PACS/RIS

Feature Summary

Auto Billing

Auto Billing is a convenient feature for invoices or claims with fixed information that require minimal review before sending. By turning on Auto Billing, specific claims are automatically processed, which can reduce workload. Auto Billing must be enabled by a KMHA technician. Then, you can get started by going to **Burger** > **Billing** > **Setup** > **Auto Billing**.
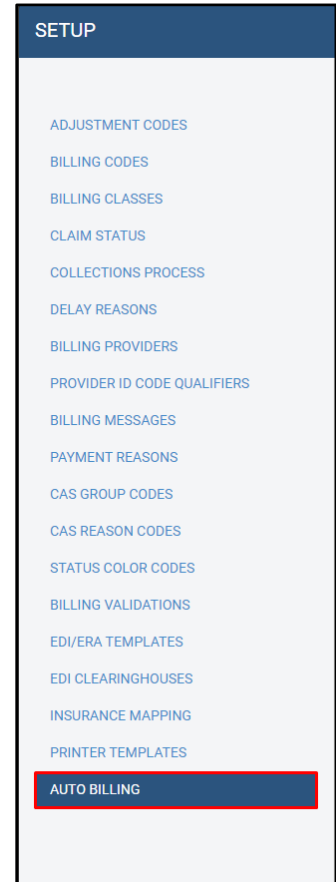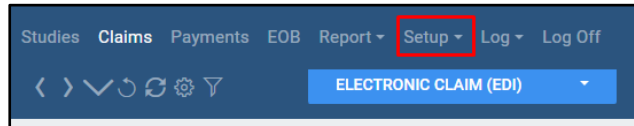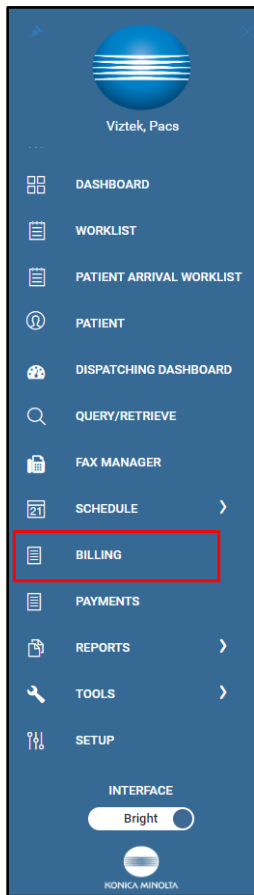
Auto Billing automatically moves a study pending claim creation tab to a specific claim status in the Claims tab. You need to give rules to some fields for Auto Billing to perfom as requested. This is a user permission.

You do not have to select all options. Auto Billing reduces the time it takes to process and submit certain claims. Below is a breakdown of each category. You can apply these functions to customized statuses in the system where applicable. Please review the descriptions below for a better understanding of where these fields originate within the system.

Review of fields

Claim Status – Found in **Burger** > **Billing** > **Setup** > **Claims Statuses** – When using Auto Billing, indicate the claim status to assign to the claims after they pass the creation cycle. This helps eliminate

the need to go back and manually process specific claims. Keep in mind that the system displays the claim statuses that are configured in Setup, and you can customize these statuses.

Study Status – Found in **Burger** > **Setup** > **Scheduling & Codes** > **Study Status** – Auto Billing works for all study statuses within the worklist. Study statuses are configured in Setup. Both custom and default study statuses are considered during auto-billing.

Facilities – Found in **Burger** > **Setup** > **Office** > **Facilities** – Facilities are listed according to what is available at the facility build of the system.

Ordering Facilities – Found in **Burger** > **Setup** > **Office** > **Providers & Resources** – Ordering facilities in Exa PACS/RIS are also service faclities. This pertains to the facility which should be shown in box 32 of the claim form.

Modalities – Found in **Burger** > **Setup** > **Office** > **Modality** – You can designate for a certain modality study type automatically – this can also be customerized at the modality level.

CPT Codes – Found in **Burger** > **Setup** > **Scheduling & Codes** > **Procedure Codes**. The system can auto create a claim based on the procedure code, however it does not link to appointment types.

Insurance Provider Payer Types – Found in **Burger** > **Setup** > **Billing** > **Insurance Provider Payer Types**. This is the type of cladssification assigned to each type of payer built in the system.

Insurance Providers – Found in **Burger** > **Setup** > **Billing** > **Insurance Provider**.

You do not have to complete all fields for the function to work as expected. To correctly associate fields with the rule, use the blue (+) plus sign to link them. If you'd like to remove a field requirement, highlight the field, and use the trash bin button to deselect it.