

Exa® PACS/RIS

Feature Summary

Refunds and Recoupments

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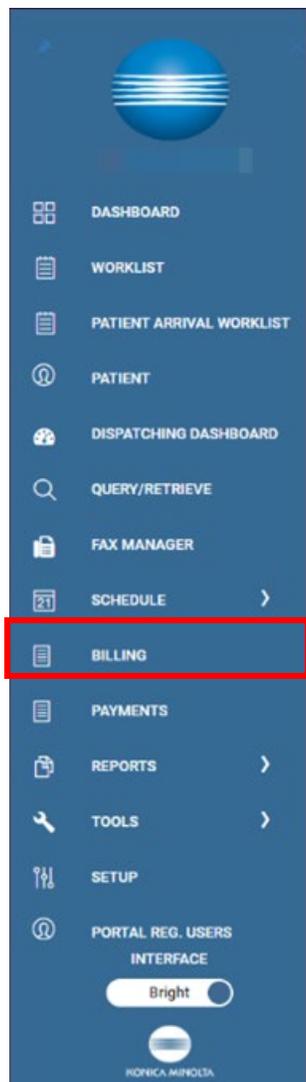
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To access Payments:

Burger > Billing...



...Payments



Some of the functions within this document are permission based. Please contact your PACS administrator for assistance.

Refunds and recoupments in Exa Billing are controlled by the Adjustment type function. If your current process involves returning the balance to the payment line level so funds can be posted elsewhere, we recommend using the **Recoupment Debit** adjustment code entry type.

However, if your process focuses on adjusting a balance, you may want to use the **Refund Debit** type. This approach allows the adjustment to be reflected properly, after which you can proceed with the refund using your standard process.

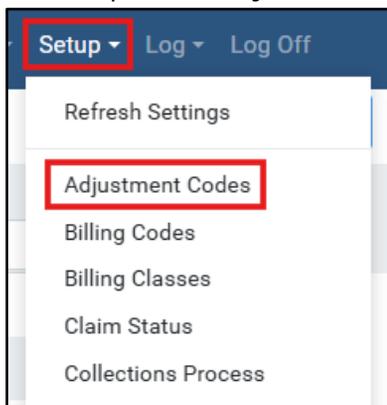
Furthermore, if the existing options do not meet your needs, you can create additional adjustment codes. When adding an adjustment code, it is important to designate its function correctly.

Adjustment Code Entry Types

There are four adjustment code entry types in Exa Billing.

- **Credit Adjustments:** Remove money or a balance, such as a small balance write-off.
- **Debit Adjustments:** Add money or a balance back to the transaction, such as interest paid.
- **Refund Debits:** Reflects the refund as an adjustment
- **Recoupment Debits:** Adds funds back to the original payment ID.

To set up a new adjustment code, select **Burger > Billing > Setup > Adjustment Codes**.



In the **Code** box, type the name of the adjustment, and type a description. Select an option in the **Entry Type** dropdown, and then **Save** and **Close**.

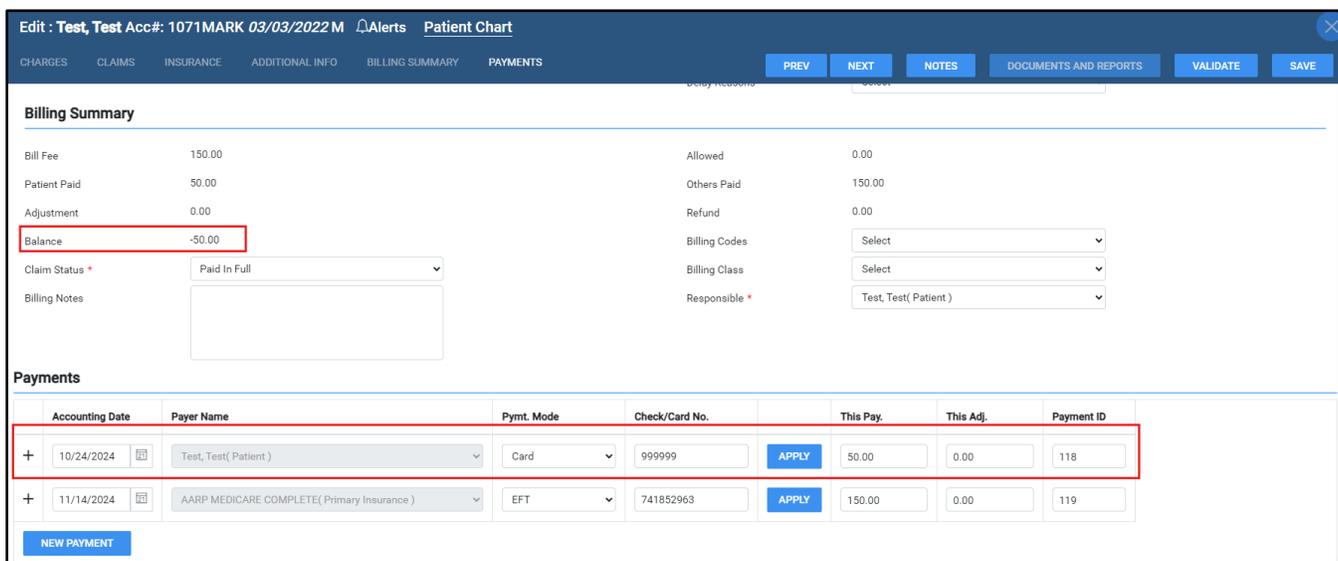
Code *	<input type="text" value="Patient Refund"/>	<input type="checkbox"/> Inactive
Description *	<input type="text" value="Patient Refund"/>	
Entry Type *	<input type="text" value="Recoupment Debit"/>	



Result: The new adjustment code appears in the list.

Patient refunds

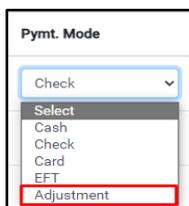
When issuing a patient refund, first identify the overpayment. Open the claim and select the **Payments** tab at the top of the screen.



** In this example, the insurance paid the claim in full, and the patient is due a refund.*

After the overpayment is validated, issue a refund. Under **Payments**, select **NEW PAYMENTS**. The Payer Name field should represent the patient.

Under **Payment Mode**, choose **Adjustment**, then select **APPLY**.



In the pop-up window, select **Refund** as the adjustment type (the refund adjustment code is set to the adjustment type of Refund Debit). Select the **DR** checkbox; this lets the system acknowledge that funds are being deducted and added back to the payment record. In the **This Adjustment** field, enter the refund amount using a negative (-) number.

Claim: # 133, Test, Test 10/25/2024 DOCUMENTS

Total Bill Fee : \$150.00 Applied Payment : \$0.00 Applied Adjustment : (\$50.00) DR

CPT Code	CPT Description	Bill Fee	Payment	This Payment	Allowed	Adjustment	This Adjustment	Balance	CAS
76700	US ABDOMINAL R-T W/IMAGE DOCUMENTATION	150.00	200.00	0.00	0	0.00	-50.00	0.00	CAS

PRINT STATEMENT

SAVE CLEAR

Adjustment Code: REFUND

CANCEL

The retracted funds are displayed in the header under "Applied Adjustment," and the adjustment appears in the list of payments. Close the payment pop-up window, and then go to the payment section of the charges screen to review the refund. Follow your standard procedure to issue the refund.

Edit : Test, Test Acc#: 1071MARK 03/03/2022 M Alerts Patient Chart

CHARGES CLAIMS INSURANCE ADDITIONAL INFO BILLING SUMMARY PAYMENTS PREV NEXT NOTES DOCUMENTS AND REPORTS VALIDATE

Bill Fee	150.00	Allowed	0.00
Patient Paid	50.00	Others Paid	150.00
Adjustment	0.00	Refund	-50.00
Balance	0.00	Billing Codes	Select
Claim Status *	Paid In Full	Billing Class	Select
Billing Notes		Responsible *	AARP MEDICARE COMPLETE(Primary Insurance)

Payments

	Accounting Date	Payer Name	Pymt. Mode	Check/Card No.		This Pay.	This Adj.	Payment ID
+	10/24/2024	Test, Test(Patient)	Card	999999	APPLY	50.00	0.00	118
+	11/14/2024	AARP MEDICARE COMPLETE(Primary Insurance)	EFT	789456123	APPLY	150.00	0.00	126
+	11/18/2024	Test, Test(Patient)	Adjustment		APPLY	0.00	-50.00	128

NEW PAYMENT

Insurance Refund Using the Refund Debit Adjustment Type

The process of refunding insurance is like issuing a patient refund, with the primary difference being the name of the adjustment code. Both types of refunds fall under the "Debit Adjustment" category.

To begin, identify the overpayment on the claim. We recommend using the notes section to document any updates or changes related to the claim for future reference.

Billing Summary

Bill Fee	175.00	Allowed	0.00
Patient Paid	0.00	Others Paid	125.00
Adjustment	0.00	Refund	0.00
Balance	50.00		

Claim Status * Pending Payment

Billing Notes Per CBC, Rep Jane Doe Ref# 12345678900, the patient was not eligible for the month of December.

Billing Codes Select

Billing Class Select

Responsible * Test_Test(Patient)

Payments

Accounting Date	Payer Name	Pymt. Mode	Check/Card No.	This Pay.	This Adj.	Payment ID
12/16/2024	CAPITAL BLUE CROSS(Primary Insurance)	Check	4105820693	125.00	0.00	125

[NEW PAYMENT](#)

**In this example, the insurance company determined that the patient was not eligible on the date of their service.*

Locate the original payment ID, and then navigate to Payments and grab that original payment record.

In the **Pending Payment** sub-tab, search for the claim. The payment screen appears.

PAYMENTS Census Studies Claims **Payments** EOB Report Setup Log Log Off

Payment ID 125 [PREVIOUS](#) [NEXT](#)

Payer * Insurance
CAPITAL BLUE CROSS SEARCH

Accounting Date * 12/16/2024

Amount * 125.00

Applied \$125.00

Balance \$0.00

Reference Payment ID

Payment Reason Select

Paid Location * Hodenville

Payment Mode * Check

Check/Card Number 4105820693

Card Name

Notes

[SAVE](#) [ADD](#) [PRINT](#) [DELETE](#) [BACK](#)

PENDING PAYMENTS PENDING PAYMENTS(BY PATIENT/CLAIM/INVOICE NO.) APPLIED PAYMENTS

Starts With All Show Inactive Search Owners

Last Name First Name MRN

150 SEARCH Invoice No. SEARCH

PATIENT SEARCH RESULTS

Select the adjustment code for "Refund," and then enter the refund amount as a negative number (e.g., -1.00). Next, select the **DR** checkbox. The balance updates in the green box in the lower left corner,

and the applied adjustment reflects the refund amount in the green box in the upper right corner. Save your changes.

Claim: # 150, Test, Test 12/12/2024 Total Payment Record Balance : \$0.00

DOCUMENTS

Total Bill Fee : \$175.00 Applied Payment : \$0.00 Applied Adjustment : (\$125.00) DR

CPT Code	CPT Description	Bill Fee	Payment	This Payment	Allowed	Adjustment	This Adjustment	Balance	CAS
74000	RADEX ABD 1 ANTEROPOST VIEW	175.00	125.00	0.00	0	0.00	-125.00	175.00	CAS

PAY IN FULL

Total Bill Fee: \$175.00 Claim Status: Pending Payment Deduction: 0.00

Others Paid: \$125.00 Responsible: Test, Test(Patient) Co-Insurance: 0.00

Adjustment: (\$125.00) Adjustment Code: REFUND Co-Pay: 0.00

Patient Paid: \$0.00

Balance: \$175.00

PRINT STATEMENT | SAVE | CLEAR

CANCEL

Upon close, you see the refund in the Applied Payments tab.

PAYMENTS Census Studies Claims Payments EOB Report Setup Log

Payment ID: 122 Reference Payment ID:

Payer: Insurance Payment Reason: Select

CAPITAL BLUE CROSS Paid Location: Hodorville

Accounting Date: 12/16/2024 Payment Mode: Check

Amount: 125.00 Check/Card Number: 4105820963

Applied: \$125.00 Card Name:

Balance: \$0.00 Notes:

SAVE ADD PRINT DELETE BACK

PENDING PAYMENTS PENDING PAYMENTS(BY PATIENT/CLAIM/INVOICE NO.) **APPLIED PAYMENTS**

CLAIM NUMBER	INVOICE NO.	PATIENT	CLAIM DATE	BILL FEE	PATIENT PAID	PAYER PAID	ADJUSTMENT	THIS ADJUSTMENT	THIS PAYMENT	BALANCE	CPT CODES
150		Test, Test	12/12/2024	\$175.00	\$0.00	\$0.00	\$0.00	\$25.00	\$125.00	\$150.00	74000
150		Test, Test	12/12/2024	\$175.00	\$0.00	\$125.00	\$150.00	(\$125.00)	\$0.00	\$150.00	74000

The refund is also reflected at the claim level.

Payments

Accounting Date	Payer Name	Pymt. Mode	Check/Card No.	This Pay.	This Adj.	Payment ID
12/16/2024	CAPITAL BLUE CROSS(Primary Insurance)	Check	4105820963	125.00	0.00	125
12/16/2024	CAPITAL BLUE CROSS(Primary Insurance)	Check	4105820963	0.00	-125.00	125

NEW PAYMENT

Insurance Recoupments Using the Recoupment Debit Adjustment Type

Insurance recoupments are common, and may occur due to reasons such as overpayments or updated Coordination of Benefits (COB) information. The steps involved are as follows:

Identify the original overpaid check; in the example below, it is on payment ID 121.

Billing Summary

Bill Fee	150.00	Allowed	0.00
Patient Paid	50.00	Others Paid	250.00
Adjustment	0.00	Refund	0.00
Balance	-150.00	Billing Codes	Select
Claim Status *	Over Payment	Billing Class	Select
Billing Notes		Responsible *	AARP MEDICARE COMPLETE(Primary Insurance)

Payments

	Accounting Date	Payer Name	Pymt. Mode	Check/Card No.	This Pay.	This Adj.	Payment ID
+	10/24/2024	Test, Test(Patient)	Cash		50.00	0.00	118
+	11/14/2024	AARP MEDICARE COMPLETE(Primary Insurance)	EFT	741852963	100.00	0.00	119
+	11/28/2024	AARP MEDICARE COMPLETE(Primary Insurance)	Check	132454681	150.00	0.00	121

**In the example, AARP paid the claim twice. They are recouping the higher amount paid.*

Identify the payment ID, and then navigate to **Payments** and search for the payment ID. Double-click the ID to open it. Switch to the **Applied** section, find the claim, and then select the edit (pencil) button to open the payment pop-up window.

PAYMENTS

Payment ID: 121

Payer: Insurance
AARP MEDICARE COMPLETE

Accounting Date: 11/28/2024

Amount: 150.00
Applied: \$150.00
Balance: \$0.00

Check/Card Number: 132454681

APPLIED PAYMENTS

CLAIM NUMBER	INVOICE NO.	PATIENT	CLAIM DATE	BILL FEE	PATIENT PAID	PAYER PAID	ADJUSTMENT	THIS ADJUSTMENT	THIS PAYMENT	BALANCE	CPT CODES
133		Test, Test	10/25/2024	\$150.00	\$50.00	\$100.00	\$0.00	\$0.00	\$150.00	(\$150.00)	76700

In the **Adjustment Code** dropdown list, select **Insurance Recoupment**. Select the **DR** checkbox. In the **This Payment** column, enter the amount to be recouped as a negative (-) number, and then select **SAVE**. The amount taken from the check appears in the top right corner.

Claim: # 133, Test, Test Total Payment Record Balance : \$150.00

DOCUMENTS

Total Bill Fee : \$150.00 Applied Payment : (\$150.00) Applied Adjustment : \$0.00 DR

CPT Code	CPT Description	Bill Fee	Payment	This Payment	Allowed	Adjustment	This Adjustment	Balance	CAS
76700	US ABDOMINAL R-T W/IMAGE DOCUMENTATION	150.00	300.00	-150.00	0.00	0.00	0.00	0.00	CAS

PAY IN FULL

Total Bill Fee: \$150.00 Claim Status: Paid In Full Deduction: 0.00

Others Paid: \$250.00 Responsible: Test, Test(Patient) Co-Insurance: 0.00

Adjustment: \$0.00 **Adjustment Code: Insurance Recoupment** Co-Pay: 0.00

Patient Paid: \$50.00 Billing Notes

Balance: \$0.00

PRINT STATEMENT
SAVE CLEAR

CANCEL

The balance appears on the payment record. The Applied Payments tab also reflects the recoupment. You can add a note at this level.

PAYMENTS Census Studies Claims Payments EOB Report Setup Log

Payment ID: 121 Reference Payment ID: PREVIOUS NEXT

Payer: Insurance Payment Reason: Select

AARP MEDICARE COMPLETE Paid Location: Hodorville

Accounting Date: 11/28/2024 Payment Mode: Check

Amount: 150.00 Check/Card Number: 132454681

Applied: \$0.00 Card Name:

Balance: \$150.00 Notes: Insurance recoupment for duplicate payment

SAVE ADD PRINT DELETE BACK

PENDING PAYMENTS PENDING PAYMENTS(BY PATIENT/CLAIM/INVOICE NO.) **APPLIED PAYMENTS**

CLAIM NUMBER	INVOICE NO.	PATIENT	CLAIM DATE	BILL FEE	PATIENT PAID	PAYER PAID	ADJUSTMENT	THIS ADJUSTMENT	THIS PAYMENT	BALANCE	CPT CODES
133		Test, Test	10/25/2024	\$150.00	\$50.00	(\$50.00)	\$0.00	\$0.00	\$150.00	\$0.00	76700
133		Test, Test	10/25/2024	\$150.00	\$50.00	\$250.00	\$0.00	\$0.00	(\$150.00)	\$0.00	76700

To review the recoupment, open the claim. In this example, the recoupment appears below the original overpayment and has the same Payment ID as the original payment.

Edit : Test, Test Acc#: 1071MARK 03/03/2022 M Alerts Patient Chart
X

CHARGES CLAIMS INSURANCE ADDITIONAL INFO BILLING SUMMARY PAYMENTS
PREV NEXT NOTES DOCUMENTS AND REPORTS VALIDATE SAVE

Patient Paid 50.00	Others Paid 100.00
Adjustment 0.00	Refund 0.00
Balance 0.00	Billing Codes <input type="text" value="Select"/>
Claim Status * <input type="text" value="Paid In Full"/>	Billing Class <input type="text" value="Select"/>
Billing Notes Test Patient Note: AARP paid twice in error. Recoupment has been initiated for higher amount.	Responsible * <input type="text" value="Test, Test(Patient)"/>

Payments

	Accounting Date	Payer Name	Pymt. Mode	Check/Card No.		This Pay.	This Adj.	Payment ID
+	10/24/2024	Test, Test(Patient)	Card	999999	APPLY	50.00	0.00	118
+	11/14/2024	AARP MEDICARE COMPLETE(Primary Insurance)	EFT	741852963	APPLY	100.00	0.00	119
+	11/28/2024	AARP MEDICARE COMPLETE(Primary Insurance)	Check	132454681	APPLY	150.00	0.00	121
+	11/28/2024	AARP MEDICARE COMPLETE(Primary Insurance)	Check	132454681	APPLY	-150.00	0.00	121

NEW PAYMENT