

TuftsMedicine
Care at Home

Resolute Hospital Billing (HH and HSPC) Upgrade





Billing and Collection Activities



Send Claim Detail Bills Using Bucket or Denial Activities

You can use bucket or denial activities to send claim detail bills to payers. This helps streamline the insurance follow-up process and saves you time by automatically pulling detailed charge information from the claim and itemizing it for your payer.

The screenshot shows a software interface for sending claim detail bills. At the top, there is a dropdown menu labeled "Bucket Act". Below it, the invoice information is displayed: "Inv H40000102200002 - JJJES PAYER" and "Primary Claim - Outstanding". A button labeled "Send Claim Detail Bill [93138]" is visible, along with a link "Choose Another Activity".

Below the invoice information is an "Add Note" section with a text area and a "Summary:" field. The "Type:" dropdown is set to "Detail Bill".

At the bottom, there is a section titled "Send Claim Detail Bill" with a message: "Generate a claim level detail bill from the charges on invoice number H40000102200002." Below this, the "Detail Bill Template" is set to "HB CLAIM DETAIL BILL". At the very bottom, there is a button "Print 1 copy to PDF CREATOR (MAIN)" and an "Edit" link.



More Useful Information About Failed Billing Activities

In the History section of Account Maintenance, you can now see information broken out into portions of a billing activity to see if any sections of the activity failed and why.

P	Date and Time	Type	Summary	User	Level	
Today						
	08/26/2022 02:44 PM	User Access	Viewed Acct Summary and History	Sanftleben, Morgan	Acct	⌵
	08/26/2022 02:44 PM	Billing	Initiate Billing [239] - Failed	Sanftleben, Morgan	Acct	⌵
		Activity Code: 239				
		Add Note				
		Summary: I am attempting to initiate billing on this account.				
		Note type: General				
		Note level: Hospital Account				
		Note text: I am attempting to initiate billing on this account.				
		Override DNB Warnings				
		DNBs - overridden:				
		41465 - Coding Status Is Not Complete				
		Initiate Billing				
		Error: TEST,MDS [5555555575]: DNB checks failed for the account. See Account Summary for details.				



Improved Liability Bucket Workflows

You can now personalize your view in Liability Buckets by locking-in expandable and collapsible sections located under the Overview, Follow-Up, and Reimbursement tabs. There are also left-click menus added to several areas where links to Transaction Detail used to be. You can left-click to take actions on transactions, such as adjustments and payments, without having to leave Liability Buckets.

The screenshot shows a table titled "Bucket History" with columns for "Time" and "Summary". A context menu is open over the row with Time "1148" and Summary "Payment (INSURANCE PAYMENT): -250.00". The menu options are: Detail, Transfer, Distribute, Refund, and Reverse.

Time	Summary
1216	Claim Reopened Inv #: Z29803
1216	Payment (INSURANCE PAYMENT): -250.00
1148	Claim Inv #: Z29803
1148	Claim Inv #: Z29803
1148	Adjustment (INSURANCE): 7,000.00
1148	Payment (INSURANCE): -7,000.00
1031	Claim Closed Inv #: Z29803
1031	Refund Reversed REFUND (INSURANCE): -500.00

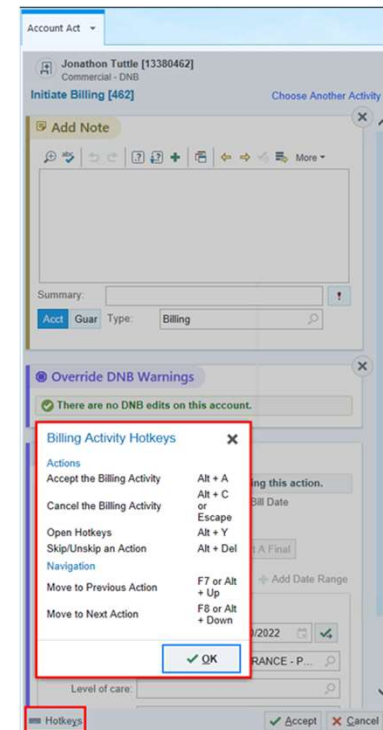


Billing Activity Navigation Made Easier

Use new **hotkeys** to more easily navigate through billing activities.

Click the **Hotkeys** button or press Alt+y to open the Hotkeys display.

The Skip/Unskip an Action hotkey is available only when there is at least one action that can be skipped, such as Override DNB Warnings.





Additional Amount Field Added to NRP EOB Activity

In the new **Additional Amount** field on the Next Responsible Party (NRP) activity, you can add an additional amount to be moved to the next responsible party along with EOB amounts. In addition, amounts for charges that are suppressed from claims for the payer on this bucket, such as those for services not covered by this payer, will automatically appear in this field.

The screenshot shows the 'Next Responsible Party' section of a form. It includes a tabbed interface for 'Amount to NRP' with 'Patient Portion' selected. Below are input fields for 'EOB Amounts' including Copay (50.00), Coinsurance (0.00), Deductible (500.00), Non-Covered (0.00), and an 'Additional Amount' field (384.00) which is highlighted with a red box. A summary bar at the bottom indicates a 'Total NRP Amount: 934.00'.

Next Responsible Party		
Amount to NRP		
Patient Portion	Remaining Balance	Other Amount
EOB Amounts		
Copay	Coinsurance	
50.00	0.00	
Deductible	Non-Covered	Additional Amount
500.00	0.00	384.00
Total NRP Amount: 934.00		



Changes to Undo Billing on a Single Split Cumulative Claim

When you perform the Undo Billing activity on a split cumulative bucket or a split bucket with an Admission Day parent bucket, the split buckets will be sent back to their original state before the claim split. You can see this information on the activity card before accepting the activity and in the audit trail in Account History under the Undo Billing heading.

Undo Billing

! Undo Billing will send the charges back to the previous buckets.

Undo Billing will also be performed on these related buckets:

- Interim Primary Claim Inv #1338045702 for EPIC US HEALTHCARE [329959]

! Buckets Have Warnings ⤴

Interim Primary Claim bucket [Inv 1338045701] for account SMITH,ADAM [13380457]: Claims have been accepted on this bucket.



Access More Accounts When Searching in Guarantor Lookup

If you don't initially find what you're looking for when you search by Tx Ref #, you can now access the transaction report, which gives you an expanded list of transactions with links to the corresponding guarantor account, hospital account, or inquiry for that transaction.

The screenshot shows the 'Guarantor Lookup' window. At the top, there are search filters: 'Guarantor', 'Patient', 'Invoice #', 'Tx Ref #', 'Subscriber ID', and 'Subset'. The 'Tx Ref #' filter is selected. Below the filters is a search input field with the placeholder text 'Enter a transaction reference number to select its guarantors'. Underneath, there are filter options: 'Show Guarantors' with a dropdown set to 'All' and 'With Balance/Active Visits', and a 'Tx Amount' input field. Below the filters, there is a section for 'Selected Guarantors (15)' with a 'Recent' toggle and an 'Automatically reopen lookup' checkbox. A table of guarantors is displayed with columns: Guar ID, Name, Amt, Dep Date, T..., Service Area, SSN, DOB, Addr..., Primary Ph..., Last S..., SP Bal, and Tot Bal. The table contains several rows of data. At the bottom of the window, there is a button labeled 'Find Tx with Ref # in Report' which is highlighted with a red box. To the right of this button are 'Accept' and 'Cancel' buttons.

Guar ID	Name	Amt	Dep Date	T...	Service Area	SSN	DOB	Addr...	Primary Ph...	Last S...	SP Bal	Tot Bal
20821	STAPLETO...	-1,101.00,-3...	05/03/2005,03/1...	P/F	HMJ SERVI...	xxx-xx...	09/24...	123 ...	608-666-1...		0.00	145.00
22975	LISBON,DI...	-5.00	05/03/2005	P/F	HMJ SERVI...			55 w...	555-5555 (...	05/03...	-15.00	2,08...
152830	STAPLETO...	-47.00,-22.22	05/06/2005,05/2...	P/F	HMJ SERVI...	xxx-xx...	12/21...			05/12...	-2,01...	-2,01...
21979	DARBY,MA...	-1.00	05/20/2005	P/F	HMJ SERVI...					05/20...	-54.00	-54.00
167203	STRICKLA...	-1.00,-1.00,-...	05/16/2022,05/1...	P/F	WI Split Bl...	xxx-xx...	11/14...	608 ...		05/16...	0.00	-42.00



Search by Mnemonic List in Guarantor and Hospital Account Lookups

In Account Lookup and Guarantor Lookup, you have the ability to copy a line-break-delimited list of unique IDs and paste them into the search field to load associated accounts. Now, in that list, you can include mnemonics in the unique ID list to increase search capability and to save time.

The screenshot shows the 'Hospital Account Lookup' window. At the top left is a hospital icon. The search bar is labeled 'Search by:' and has several tabs: 'Account' (selected), 'Guarantor', 'Patient', 'Invoice #', 'Tx Ref #', 'Subscriber ID', and 'Subset'. Below the tabs is a search input field containing the text: '18521538 hlb.1202167 hlb.1626080 guar.4036780 guar.4086254'. Below the search bar is a 'Filters' section with a dropdown arrow. The filters are organized into three columns: 'Date Range' with 'From' and 'To' date pickers; 'Account Status' with checkboxes for 'Open', 'DNB', 'Billed', 'Closed', 'Combined', and 'Voided'; and 'Account Type' with checkboxes for 'HB', 'PB', and 'Default'. A 'Reset Filters' button is located at the bottom right of the filter section.



New Filters for Identifying the Source Payment IDs of Denials in Denials Data Models

The Is Manually Created Denial? filter lets you filter and slice denials by whether they were manually created or not. The Source Payment ID column in the detail table tells you which payment transaction resulted in the denial. These filters are available in HB and PB denials data models.

Invoice Number	Source Payment ID	Payer Reason Code w/ Description
📅 Feb 19 – Aug 18, 2022		
Manually Created?		
Not Manually Created?		
H417000001060006	965433	29 - Time limit for filing has expire
H417000001060006	965433	16 - LACKS INFO NEEDED FOR AD
4000002487***	539618	16 - LACKS INFO NEEDED FOR AD
1338032000	581510	133801 - KT CODE



Collection Workflow Information in HB Transaction Details

Look in the **Summary** section of the Transaction Details window to see how a payment was collected. If the payment collection workflow is MyChart Billing, the associated MyChart account appears along with an icon indicating whether the account was active when the payment was collected. Click the link to open the account in MyChart Administration.

The screenshot displays a transaction summary for a MyChart payment. The transaction is titled "1098-MYCHART PAYMENT" and shows a deposit date and post date of 6/21/2022, with a value of -3,339.59. The payment was made via a Visa x1111 card for Jae Park. The summary section includes the following details:

Posted To	Self-Pay
Reference #	—
Account	4000008961-VUE,JACKIE
Comment	Cardholder Name: Jae Park; Expiration Date: 12/2035
Auth Code	A491589
Collection Workflow	MyChart Billing
MyChart Account	8865-Jae Park

The "MyChart Account" link is highlighted with a red box in the original image, indicating it is a clickable link to view the account details.



Financial Assistance



Financial Assistance Tracker Changes

You can now enter a **Follow Up By** date in Financial Assistance trackers to indicate a date by which you should follow up with a patient. It will notate how many days until follow up is due and, when the section is closed, the date will turn red if it is the current date or past due.

EHS Financial Assistance

Delete ? ↑ ↓

Basic Info

Status	Effective Dates (Start - End)	Follow Up By
Pending	<input type="text"/> <input type="text"/>	6/22/2022
Decision Made On	Application Received On	
<input type="text"/>	5/7/2022	
Decision Details	Responsible User	
<input type="text"/>	MCGREGOR, DYLAN	

Comments

Summary

Details



View Case History for a Financial Assistance Case

View and filter all past updates for a Financial Assistance case. In a Financial Assistance case, click the new **Case History** toolbar button to access the activity.

Financial Assistance Summary | Financial Assistance Case 101806 | Case 101806 History

History for Financial Assistance Case 101806

Refresh

Filters

Show list: 1 Month | 3 Months | 6 Months | All

Advanced Filters (Currently applied)

History 20 of 23 Loaded | Load Remaining 3 | Collapse All

Time	Context	Summary	Updated By
Today			
03:33 PM	Case Note	Discounting program was used for appendectomy stay	Larson, Alex
Yesterday			
09:50 AM	Case Note	Discounting program application was approved, sending case to billing office to arrange discounts and payments for current patient stay. <small>Note text: Discounting program application was approved, sending case to billing office to arrange discounts and payments for current patient stay. Case status: In Progress Patients on case: Jason Lynch, Janise Lynch, Peyton Lynch</small>	Larson, Alex
09:50 AM	Case Note	Follow-up date removed	Larson, Alex
09:47 AM	PRESLER FOUNDATION APPROVAL LETTER	Approval letter - Presler Foundation Discounting Program	Larson, Alex
09:42 AM	Presler Foundation Discounting Program	Approval letter for Presler Foundation Discounting Program sent	Dunlap, Braden
09:41 AM	Presler Foundation Discounting Program	Presler Foundation Discounting Program has been approved	Dunlap, Braden
July 27			
06:23 PM	State Medicaid	Response from state office <small>Note text: State office has reviewed application and is requiring patient to submit Form 31-C and 31-E. Patient has been asked to submit electronic copies of the forms to MyChart account for documentation on this case. Tracker program: State Medicaid Tracker status: Pending Effective dates: 7/23/2022 - 1/23/2023 Patients on tracker: Janise Lynch</small>	Larson, Alex
12:33 PM	Case Note	One of the patients on this case has been admitted for appendectomy, family would like an update as soon as possible so they can make a pa...	Larson, Alex
12:33 PM	Case Note	Follow-up date changed to 7/28/2022.	Larson, Alex
July 24			
06:01 PM	Presler Foundation Discounting Program	Application has been sent to approval office	Larson, Alex
05:53 PM	Presler Foundation Discounting Program	All documentation has been submitted, sending application to supervisor.	Larson, Alex
05:49 PM	State Medicaid	All necessary forms and information have been received and documented. Submitting application to state office, expecting to hear back about...	Larson, Alex
July 23			



Add Case-Level Notes in Financial Assistance

Add case-level comments in the Case Status section of FA cases. Here, you can make notes that are applicable to the whole case, which appear in the history section directly beneath Case Status, in the Case History activity, and alongside of tracker notes in Enterprise Guarantor Summary.

The screenshot displays the 'Case Status' interface. The 'Comments' section is highlighted with a red box. The interface includes the following sections:

- Case Info:** Case Status (In Progress), Primary Contact (PRELUDE, FRANCISCO), Assigned User (ALMOND, ABBIE), Case Flags, Application Provided On (7/13/2022), Application Signed On (7/13/2022), Follow Up By (7/30/2022), and Fiscal Year.
- Patients on Case:** Francisco ... (primary contact) and Virgil Prelude.
- History:** A table showing case activities.

Date	Status	Summary	Updated By	Assigned User
7/13/2022 09:45 AM	In Progress	Application Signed	Abbie Almond	Abbie Almond
7/13/2022 09:39 AM	In Progress	Phone Call	Abbie Almond	Abbie Almond
7/13/2022 09:34 AM	In Progress	Primary contact changed to Francisco Prelude [221903] (P/F).	Abbie Almond	Abbie Almond
7/13/2022 09:33 AM	In Progress	Created financial assistance case.	Abbie Almond	Abbie Almond



Update Financial Assistance Tracker Notes

Tracker comments can now be edited! So long as you are the original writer of the note, you have 24 hours after writing during which you can make corrections or additional notes. When the tracker is open, lines that are enabled have an edit note icon you can click; this launches the editor.

History					
Date	Status	Summary	Updated By	Responsible User	
7/7/2022 0...	Pending	Missing income info. Follow up with patient in a week...	Levsky, Amelia	Levsky, Amelia	 ⌵
7/7/2022 0...	Pending	Initiated the process for State Medicaid	Levsky, Amelia	Levsky, Amelia	⌵

⏪ Restore ✓ Close ⬆ Previous ⬇ Next



Slice by Admit/Discharge Department Specialty in Hospital Accounts (HB & PB) and HB Denials Data Models

Discharge Department Specialty is a new filter that allows you to filter and slice in the Hospital Accounts (HB & PB) and HB denials data models. When organizations have many sites and naming conventions, it can be difficult to identify the specialty of the discharge department for a hospital account. This filter makes it easy to see which specialties are discharging patients. Admit Department Specialty is also now available in the Hospital Accounts (HB & PB) data model.

The screenshot displays a software interface for data analysis. On the left, there are several filter panels: 'Population' (Base: All Hospital Accounts (HB & PB)), 'Slices' (Top 10 Slices by Discharge Department Specialty), 'Measures' (Number of Hospital Accounts (HB & PB)), 'Dates' (Start Date: Feb 19, 2022; End Date: Aug 18, 2022; Slice By: None; Based On: Discharge Date), and 'Visual Options' (Bar Color: Top 10 Slices by Discha...; Y-Axis Range: Automatic). On the right, the 'Slice by Discharge Department ...' panel is active, showing a search bar, a value of '10', and buttons for 'Grab Top 10' and 'Grab Bottom 10'. Below this, there is a 'Limit Your Slice Results' section with a list of medical specialties, each with a colored circle and a checkbox: Cryogenics (blue), Home Health Services (pink), Obstetrics (green), Emergency (purple), Internal Medicine (cyan), Family Practice (orange), Hospice (dark blue), Dental (dark green), Radiology (red), Allergy (light blue), and None of the above (brown). At the bottom right, there is a 'Last Stored Data' button.



Reporting



Filter Transactions by Billing Category in SlicerDicer

Billing Category is now available as a filter for HB and PB transactions data models. This filter allows you to filter and slice transactions by their billing procedure categories, helping you to identify which categories are used the most and which could use extra attention.

The screenshot displays the SlicerDicer interface for a data model titled "Devices/Implants, Medical Imaging, ...". The interface is divided into several sections:

- Population:** Shows the base as "All Transactions (PB)" and the filter criteria as "Any of Billing Category: Devices/Implants, Medical Imaging, Meds, Pharmacy".
- Slices:** A green section with a plus icon, currently showing "No Slices".
- Measures:** A purple section with a plus icon, showing the measure "Number of Transactions (PB)".
- Dates:** A pink section with a calendar icon, showing the start date as "Feb 06, 2020".
- Filter Panel:** On the right, the "Billing Category" filter is highlighted with a red box. It includes a search bar, a "Browse" button, and a list of categories: "Devices/Implants", "Medical Imaging", "Meds", and "Pharmacy", each with an "OR" button next to it. A "Last Stored Data" button is at the bottom of the filter panel.



Slice HB Transactions Using New Revenue Code and Name Filter

In HB transactions data models, a new filter allows you to display revenue codes in the code – name format. Having the name of the revenue code in the SlicerDicer session saves you time by eliminating the need to look up revenue codes.

The screenshot shows a SlicerDicer interface with the following components:

- Population:** Base: Service Areas (2/2580). All of:
 - Any of Billing Category: Anesthesia, Medical Imaging, Meds
 - Any of Revenue Code and Name: 0101-ALL-INCLUSIVE RATE - ALL-INCLUSIVE ROOM AND BOARD, 0133-SEMIPRIVATE THREE AND FOUR BEDS - PEDIATRIC, 0134-SEMIPRIVATE THREE AND FOUR BEDS - PSYCHIATRIC, 0211-CORONARY CARE - MYOCARDIAL INFARCTION, 0210-CORONARY CARE - GENERAL, 0250-PHARMACY - GENERAL
- Slices:** No Slices
- Measures:** Number of Transactions (HB)
- Dates:** Start Date: Feb 19, 2022; End Date: Aug 18, 2022; Slice By: None
- Filter Panel (Anesthesia, Medical Imaging, or Med...):** Base: Service Areas (2/2580). Search for criteria: [Search for criteria] + Browse. Billing Category: [Billing Category] (highlighted with a red box). Anesthesia: [OR]; Medical Imaging: [OR]; Meds: [OR]. Revenue Code and Name: [Revenue Code and Name] (highlighted with a red box). List of revenue codes: 0101-ALL-INCLUSIVE RATE - ALL-INCLUSIV..., 0133-SEMIPRIVATE THREE AND FOUR BED..., 0134-SEMIPRIVATE THREE AND FOUR BED..., 0211-CORONARY CARE - MYOCARDIAL IN..., 0210-CORONARY CARE - GENERAL, 0250-PHARMACY - GENERAL.



Denial Payer and Denial Financial Class Filters Now Available for Denials Data Models

When using SlicerDicer to report on denials, you can now slice the data by denial payer and the payer's financial class. This provides valuable data in situations when the invoice payer does not match the payer who made a denial.

