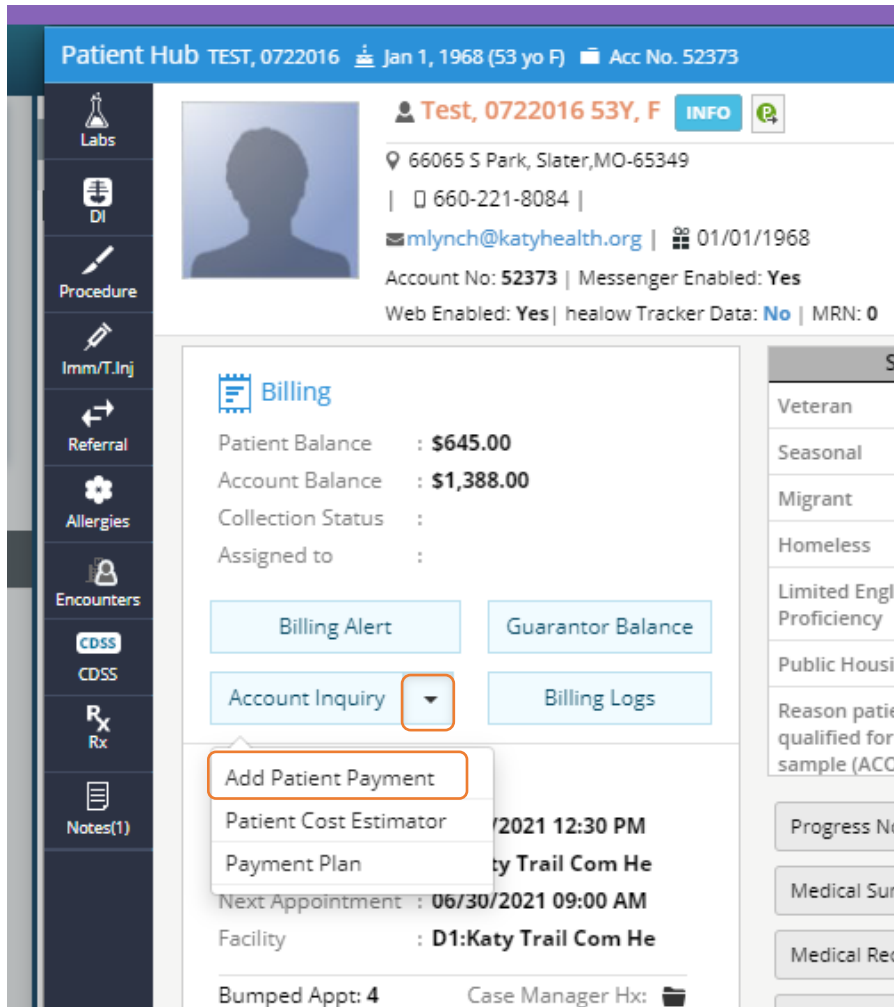


Balance Posting

Posting payments for past due eCW payments

1. Open Hub
2. Select dropdown arrow next to **Account Inquiry** → **Add Patient Payment**



Patient Hub TEST, 0722016 Jan 1, 1968 (53 yo F) Acc No. 52373

Test, 0722016 53Y, F INFO

66065 S Park, Slater, MO-65349
660-221-8084
mlynch@katyhealth.org | 01/01/1968
Account No: 52373 | Messenger Enabled: Yes
Web Enabled: Yes | healow Tracker Data: No | MRN: 0

Billing

Patient Balance : **\$645.00**
Account Balance : **\$1,388.00**
Collection Status :
Assigned to :

Buttons: Billing Alert, Guarantor Balance, Account Inquiry (dropdown), Billing Logs

Dropdown menu options: Add Patient Payment (highlighted), Patient Cost Estimator, Payment Plan

Next Appointment: 06/30/2021 09:00 AM
Facility: D1:Katy Trail Com He
Bumped Appt: 4 Case Manager Hx:

3. Enter the required payment information:
 - a. Amount
 - b. Pmt Method
 - c. Check No.
 - i. Last four of credit card & card type (i.e. 9123 VISA), or
 - ii. Entire check number & company (i.e. 0023 Central Bank)
 - d. Memo
 - i. If balance is from **IMS**, notate this on memo & skip to step 7 below.
 - ii. If balance is for an upcoming service not yet rendered, skip to step 7 below.
 - iii. If balance is from eCW, notate Balance payment and statement date, if known.
Continue all steps below.
4. Select the **Claims** option

Balance Posting

Posting payments for past due eCW payments

72: Receive Payments TEST, 0722016 Jan 1, 1968 (53 yo F) Acc No. 52373

Patient Payment

Patient: Test, 0722016
 DOB: 01/01/1968 Age: 53Y Sex: F
 Tel: , Acct No: 52373
 WebEnabled: Yes

Batch No: 0 Date: 06/29/2021

Deposit Date: MM/DD/YYYY

Amount: \$ 50.00 Scan(F5)

Pmt. Method: Cash

Check No.:

Unapplied Amount: 50.00

Memo: Payment on Statement 3/1/21

Facility: Katy Trail Com Health Se

Insurance: Home State Health Plan

Co Pay:

Claims Paid (with this payment)

| Claim Id | Patient Name | Svc Dt. | Appt. Reason | Clm Balance | Pat Balance | Payment |
|----------|--------------|---------|--------------|-------------|-------------|---------|
| | | | | | | |

Posted By: Lynch, Morgan Locked By:

Date & Time: 6/29/2021, 1:15:31 PM

Buttons: Publish To Portal, Visits, Claims, Delete, Post CPT, Save & New (F7), OK (F8), Cancel (F9)

5. Select the DOS on the statement → Select **OK**
 - a. If pt is unsure of DOS and doesn't have statement, select oldest balance

72: Payment Posting TEST, 0722016 Jan 1, 1968 (53 yo F) Acc No. 52373

Patient Based Insurance Based Guarantor Based

Test 0722016 53Y, F Sel Info

DOB 01/01/1968

Tel

Acct No 52373

WebEnabled: Yes, Eligibility Status: Not Eligible

Facility: Katy Trail Com Health Se

Dates: 12/29/2020 To: 6/29/2021

Date: Claim Balance > 0 Get Claims

| | Patient | Claim No | Service Date | Pvdr | Facility | Claim Amount | Claim Balance | Patient Balance | Last Statement |
|-------------------------------------|---------------|----------|--------------|------|----------|--------------|---------------|-----------------|----------------|
| <input checked="" type="checkbox"/> | Test, 0722016 | 19245 | 03/08/2021 | TG | 01 | 320.00 | 320.00 | 0.00 | |

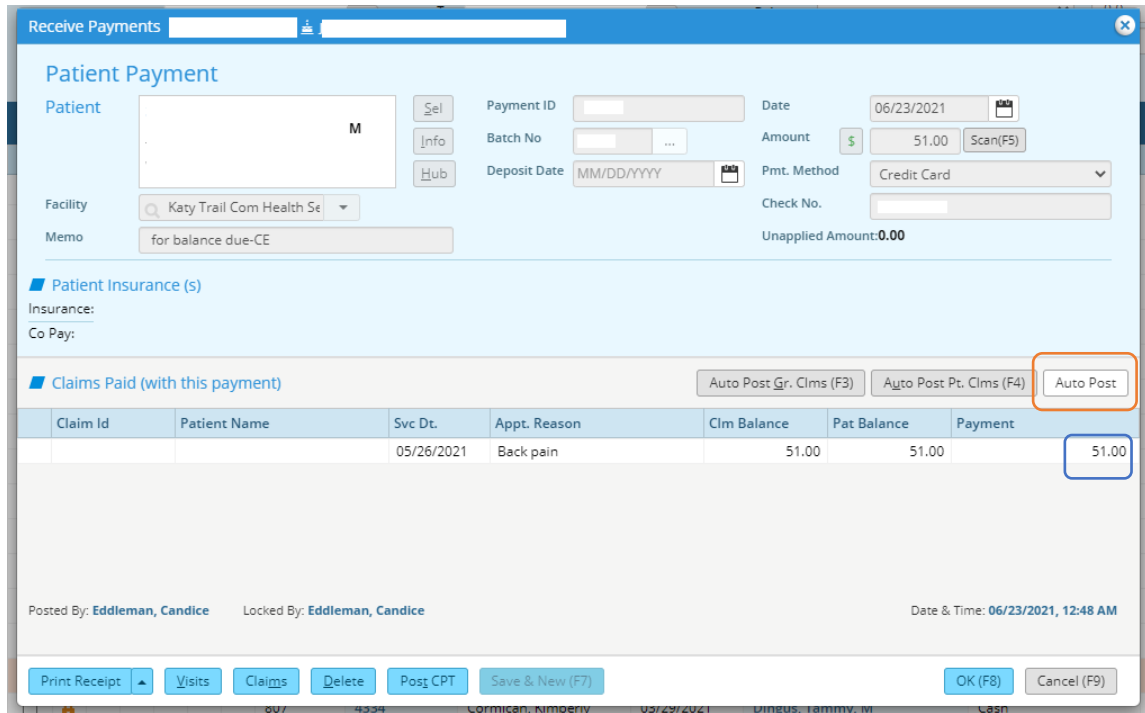
No. of Results: 20 1 - 1 of 1 results. PREV Page 1 of 1 NEXT

Buttons: Apply, OK, Cancel

Balance Posting

Posting payments for past due eCW payments

6. Select **Auto Post** and validate that the patient balance changes to cover the amount paid



Receive Payments

Patient Payment

Patient: [Field] M

Facility: Katy Trail Com Health Se

Memo: for balance due-CE

Payment ID: [Field] Date: 06/23/2021

Batch No: [Field] Amount: \$ 51.00

Deposit Date: MM/DD/YYYY

Pmt. Method: Credit Card

Check No.: [Field]

Unapplied Amount: 0.00

Claims Paid (with this payment)

| Claim Id | Patient Name | Svc Dt. | Appt. Reason | Clm Balance | Pat Balance | Payment |
|----------|--------------|------------|--------------|-------------|-------------|---------|
| | | 05/26/2021 | Back pain | 51.00 | 51.00 | 51.00 |

Posted By: Eddleman, Candice Locked By: Eddleman, Candice Date & Time: 06/23/2021, 12:48 AM

Buttons: Print Receipt, Visits, Claims, Delete, Post CPT, Save & New (F7), OK (F8), Cancel (F9)

7. Print two receipts, one for the patient & one for KTCH receipts.
8. Select "OK" to save.
9. You may receive an error regarding the service & payment dates being different. Select "OK" to continue and save.

