

### Important Content Update Message

We are currently updating the OP Help Center content for the release of OP 20. OP 20 (official version 20.0.x) is the certified, 2015 Edition, version of the Office Practicum software. This is displayed in your software (**Help tab > About**) and in the Help Center tab labeled Version 20.0. We appreciate your patience as we continue to update all of our content.

# Working A/R

Last Modified on 11/07/2019 1:23 pm EST

Version 14.19

## Overview

Accounts Receivable (A/R) can be worked in several different ways. Below, you will find some of the necessary actions that you can take on open claims as they are being researched.

## Make Claim Notes

Claim notes can be added anywhere claims are visible. The purpose of adding claim notes is so that anyone who is viewing the claim in OP will see what work or action has already been taken on the claim. Claim notes do not print on claims, and are for practice-reference only. For more information on how to create claim notes, visit [Make a Claim Note](#).

## Create Billing Tasks

Billing tasks are created so that issues requiring follow-up are not overlooked. For more information on creating billing tasks, visit [Create a Billing Task](#).

## Correct a Claim

When necessary, claims that have been archived, or processed on a daysheet, can be corrected and resubmitted to the insurance payer. This occurs most often when claims are denied. For instructions on correcting Claims, visit [Correcting Claims](#).

## Send a Claim to a Different Payer

If you find that a claim needs to be sent to a different payer than the original payer, visit [Change Insurance on Individual Transactions \(Daysheeted Claims\)](#).

## Send a Claim Back to the Transmit Queue

While working your Insurance A/R, it may be necessary to send a claim back out to the same insurance. To learn how to send a claim back to the Transmit Queue, visit [Send Claims Back to the Transmittal Queue](#).

Version 14.10

## Overview

In order to maintain a financially healthy practice, ensure that your outstanding Insurance and Patient balances are being worked regularly. You will learn ways to work your A/R in this article. A/R tasks can be performed from the Billing Center or from the Patient Account.

## Claim Notes

Claim notes can be added to claims within the Patient **Account** and also from the **Claims + A/R** tab of the Billing Center. To add a Claim Note:

1. Locate the Claim that requires a Note.
2. Click the **Claim Note** field.
3. Enter the desired **Note**.
4. Use the **Stamp** tool in the Smart Toolbar to add the date, user, and time to the note.
  - Click the **Stamp** button.
  - Right-click where you would like to apply the Stamp.
  - Select **Paste**.

Claim #	Claim Date	Patient Name	Prov	Ins	Insured ID	Charge	Ins Bal	Pt Bal	Cat	Claim Note
205804	04/04/2018	TEST, TAMMY	SJK	APP	W0123456789	90.00	90.00		A2: Ack	4/30 s/w pat @ ins, sending for reprocess dob correct [04/30/18 04:12PM-THEO DODSON]

For more information on creating Claim Notes and additional windows where Claim Notes can be added, visit [Entering Claim Notes](#).

## Correcting Claims

Claims that have been archived, or processed on a daysheet, can be corrected. For instructions on

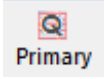
correcting claims, visit [Correcting Claims](#).

## Sending a Claim to a Different Payer

If you find that a Claim needs to be sent to a different payer than the original payer, visit [Change Insurance on Individual Transactions \(Daysheeted Claims\)](#).

## Sending a Claim to the Transmit Queue

While working your Insurance A/R, it may be necessary to send a Claim back out to the same insurance. To do so:

1. Locate the Claim in the Claims + A/R tab of the Billing Center or in the Patient Account.
2. Select the **Claim**.
3. Click the **Queue Primary Insurance**  button.
4. Click the **OK** button in the confirmation box.

The Claim is displayed in the Transmit Queue tab of the Billing Center.

## Checking Claim Status

If you are using full HIPAA transactions (fetching/processing) reports from your clearinghouse, the claim status is reported by your clearinghouse. A clearinghouse generally has more than one claim status level.

- The first level is the clearinghouse review of the Claim. Here the Claim can be accepted or rejected based on basic criteria.
- Some clearinghouses have a second level of review. At this level an accepted Claim can change to rejected based on more complex criteria.
- Finally, some clearinghouses provide a third level of review. At this level an accepted **claim** can be rejected or pended or even finalized for payment based on a response from an individual payer.

To check the status of an individual claim from the Claims + A/R tab of the Billing Center:

1. Select the **Claim**.
2. Click the **Check Status** button .

If available, the new claim status is displayed in the claim's Status History.

To check the status of an individual Claim from the Patient Account:



1. Navigate to the patient's account.
2. Click the **Claims** tab.
3. Select the **Claim**.
4. Click the **Check Status** button in the lower portion of the window.

If available, the new claim status is displayed in the Status History for the Claim.

## Adding a Claim Status

While working Accounts Receivable (A/R), it may be necessary to create elaborate claim notes that exceed the allotted character limit in the claim note field. To free up space on the actual claim line, you may consider adding a Claim Status.

To add a Claim Status from the Claims + A/R tab of the Billing Center:

1. Select the **Claim**.
2. Click the **Add Status** button . A blank status line is displayed for the Claim with the current date as the Status Date and your initials as the Staff #.
3. Select the **Status Category, Code, and Entity** from the drop-down menus.
4. Click the **Notes** field.
5. Enter your Claim note/status.
6. Click the **Save Changes**  button.

**Note:** You can also copy notes from the claim note line and paste them in the new status field.

- ✔ Be sure to click the **Save Changes** button to save your edits in the new status. You can then delete that note from the claim note line.

To add a Claim Status from the Patient Account:

1. Navigate to the patient's account.
2. Click the **Claims** tab.
3. Select the **Claim**.
4. Click the **Add Status** button in the lower portion of the window. A blank status line is displayed in the lower portion of the window under Claim Status History. It is automatically dated and contain the Staff member's initials.
5. Select the **Status Category, Code, and Entity** from the drop-down menus.
6. Click the **Notes** field
7. Enter your **Claim** note/status.

8. Click the **Save Changes**  button.

