

Payment Processing Rules

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Version 21.2



This window map article points out some of the important aspects of the window you're working with in OP but is not intended to be instructional. To learn about topics related to using this window, see the **Related Articles** section at the bottom of this page.

About Payment Processing Rules

Path: Billing tab > More button (Customize group) > Payment Processing Rules

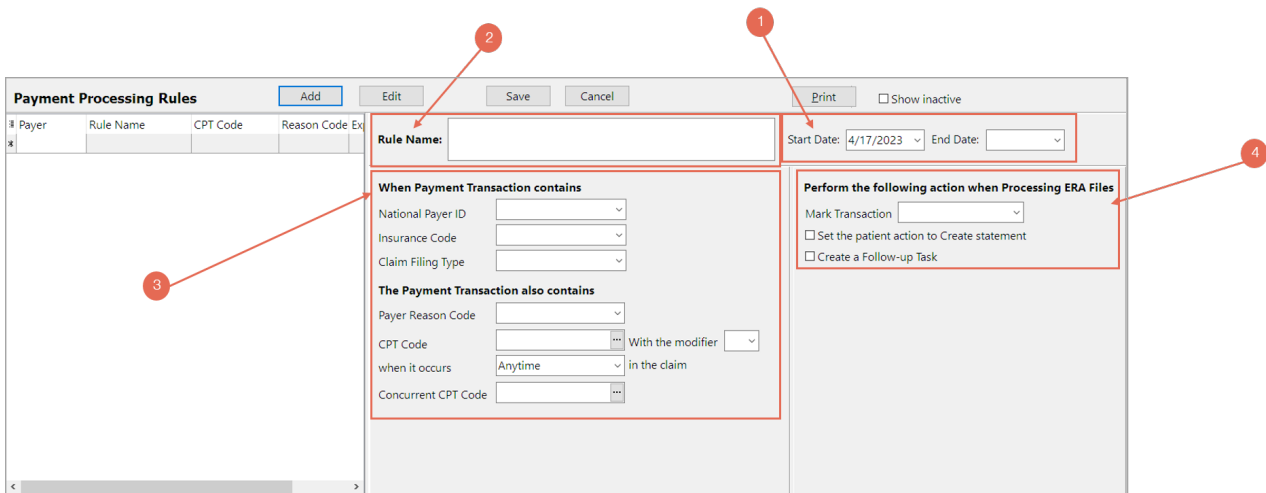
The Payment Processing module allows you to build out rules based on the payer, claim type, national payer ID, payer reason, or CPT code that will be applied when an ERA file is processed in OP.



User Permission: To access the module, users must have the **Billing_Payment_Processing_Rules** security permission.

Building these rules will streamline ERA processing by:

- Auto setting a match status for transactions in the Adjudication window
- Create a follow-up task
- Set the patient actions to create statements



The screenshot shows the 'Payment Processing Rules' configuration window. It includes a table with columns for Payer, Rule Name, CPT Code, and Reason Code. The main configuration area is divided into several sections:

- 1:** Points to the 'Rule Name' field and the 'Start Date' and 'End Date' dropdowns.
- 2:** Points to the 'When Payment Transaction contains' section, which includes dropdowns for National Payer ID, Insurance Code, and Claim Filing Type.
- 3:** Points to the 'The Payment Transaction also contains' section, which includes dropdowns for Payer Reason Code, CPT Code (with a 'With the modifier' dropdown), 'when it occurs' (Anytime), and Concurrent CPT Code.
- 4:** Points to the 'Perform the following action when Processing ERA Files' section, which includes a 'Mark Transaction' dropdown and checkboxes for 'Set the patient action to Create statement' and 'Create a Follow-up Task'.

Payment Processing Rules Map

Number	Section	Description
1	Start/End Date	All rules require a start date . The end date is optional and should be used when you want to end the use of a rule. When creating a new rule today's date will automatically populate by default. The rule will be applied to claims with a claim date that falls between the start and end date of a rule.
2	Rule Name	This is a required field and needs to be unique to the rule you are creating. The system will not allow for 2 rules to have the same name. The character limit is 255.

3	<p>When Payment Transaction Contains</p> <p>The Payment Transaction also contains</p>	<p>The Payment Transaction Contains sections allow you to set qualifications (or triggers) that your transaction must meet in order for the rule to apply. You can choose to create a rule based on National Payer ID, Insurance Code, Claim Filing Type, Payer Reason, CPT, and Modifier.</p> <ul style="list-style-type: none"> • If none of the When Payment Transaction Contains qualifications are selected when creating a rule, upon clicking Save the system will default the Insurance Code field to [*] (all payers). • There are other limitations and defaults to each selection. See the Payment Processing - Triggers article for more information on each selection, their limitations, and how they work together.
4	<p>Perform the following action when Processing ERA Files</p>	<p>This is required when creating a rule. You can set one or more of the following actions that will be performed on the transactions that meet the selected qualifications that you set in the "When Payment Transaction Contains" section: Mark Transaction Status, Create a follow-up task, or set the patient action to Create Statement.</p> <p>See the Payment Processing - Actions article for more information</p>