

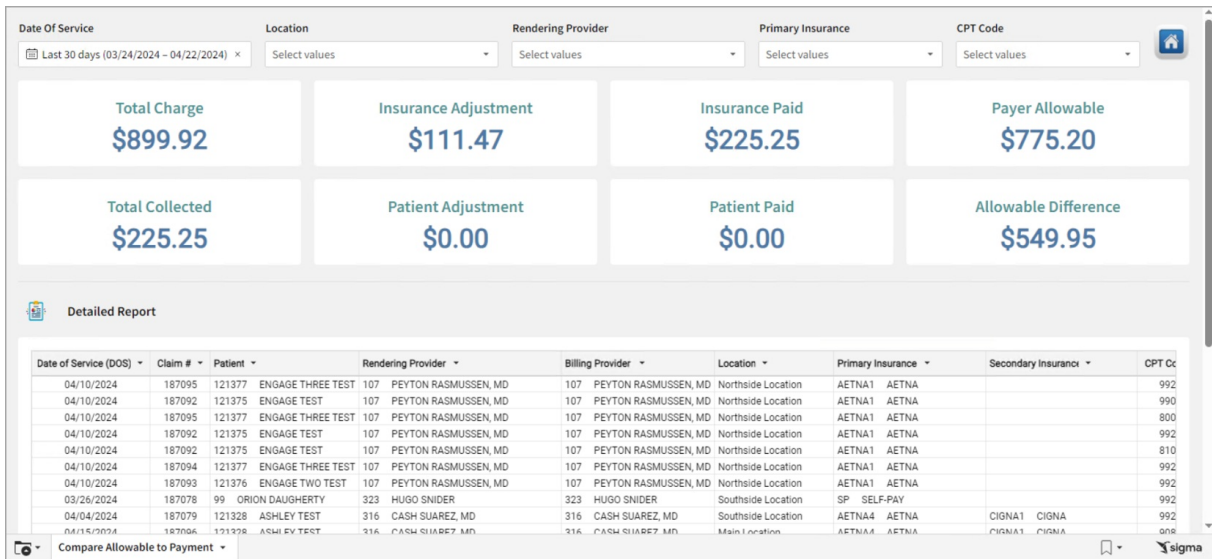
# Monthly Reports: Compare Allowable to Payment

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Version 21.3

## When to Use this Report

Use this report to view your reimbursement values from your payers vs what your contracted allowable rates are. Users can easily see in the column Allowable Difference if they are seeing a trend of less or more for reimbursements.



## About Compare Allowable to Payment

Path: Tools > Reporting > Monthly Reports > Compare Allowable to Payment

This report shows the estimated reimbursement/payer allowable for a charge along with the actual amount of payments from the insurance company.

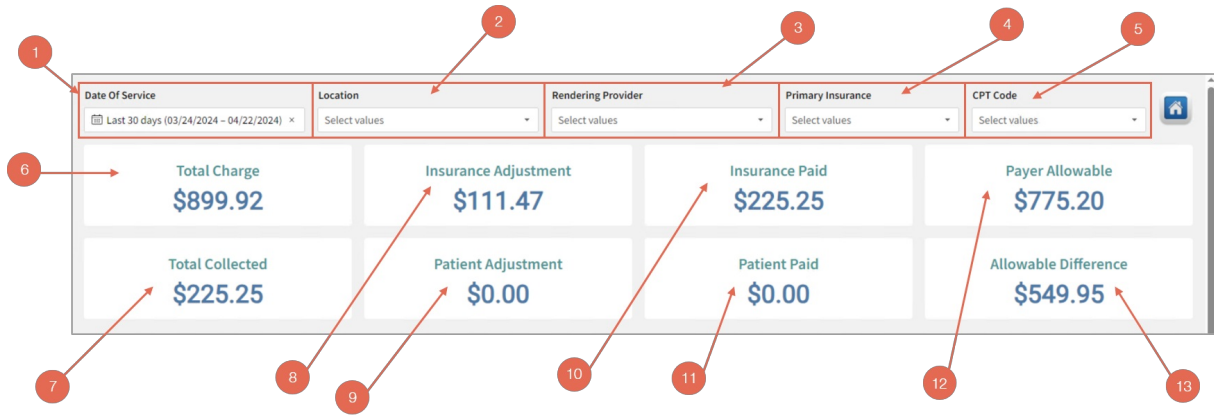
## Monthly Reports: Compare Allowable to Payment Map

Hover over each of the Summary Tiles, to see specific data. For instructions on how to drill down and expand that information from the Summary Tiles, please see the **Drill Down** section of the [Data Element Tutorial](#).



**Note:** All columns in the Detailed Report section will show by default. To hide columns, see the **Visualization** section of the [Maximized Elements](#) article.

## Filters and Summary Tiles



Number	Section	Description
1	Date of Service	This is the date the service was performed. Select the date(s) for the displayed record's date range. Reports that meet the criteria and fall within the selected date range will appear in the detailed reports grid. See the <b>Dates</b> section of the <a href="#">Filter Tutorial</a> article for the different selections.
2	Location	Select a Location to display all encounters that occurred at that location. This is useful for practices that have multiple locations.
3	Rendering Provider	Select a Rendering Provider to display all claims from that provider.
4	Primary Insurance	Select a Primary Insurance to display all claims filed under that insurance.
5	CPT Code	Select a CPT code to display all claims with that code.
6	Total Charge	The <b>Total Charges</b> Summary Tile displays the total amount of charges for the combined services rendered.
7	Total Collected	The <b>Total Collected</b> Summary Tile displays the total amount collected from both the Patients and the Insurances.
8	Insurance Adjustment	The <b>Insurance Adjustments</b> Summary tile displays total of all Insurance Adjustment transactions with the processed daysheets (total from the Insurance Adjustment column).
9	Patient Adjustment	The <b>Patient Adjustments</b> Summary tile displays total of all Patient Adjustment transactions with the processed daysheets (total from the Patient Adjustment column).
10	Insurance Paid	The <b>Insurance Paid</b> Summary tile shows the total amount paid by the insurance carrier in the filtered report (totals from the Insurance Paid column).
11	Patient Paid	The <b>Patient Paid</b> Summary tile shows the total total amount paid by the patients in the filtered report (totals from the Patient Paid column).
12	Payer Allowable	The <b>Payer Allowable</b> Summary tile shows the total amount allowed by the payers in the filtered report (total from the Payer Allowable column).
13	Allowable Difference	The <b>Allowable Difference</b> Summary tile shows the total amount of allowable difference between the Pater Allowable and the Total Collected (total from the Allowable Difference column).

## Detailed Report

**Detailed Report**

a	b	c	d	e	f	g	h	CPT Code
Date of Service (DOS)	Claim #	Patient	Rendering Provider	Billing Provider	Location	Primary Insurance	Secondary Insurance	
04/10/2024	187095	121377 ENGAGE THREE TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		992
04/10/2024	187092	121375 ENGAGE TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		990
04/10/2024	187095	121377 ENGAGE THREE TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		800
04/10/2024	187092	121375 ENGAGE TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		992
04/10/2024	187092	121375 ENGAGE TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		810
04/10/2024	187094	121377 ENGAGE THREE TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		992
04/10/2024	187093	121376 ENGAGE TWO TEST	107 PEYTON RASMUSSEN, MD	107 PEYTON RASMUSSEN, MD	Northside Location	AETNA1 AETNA		992
03/26/2024	187078	99 ORION DAUGHERTY	323 HUGO SNIDER	323 HUGO SNIDER	Southside Location	SP SELF-PAY		992
04/04/2024	187079	121328 ASHLEY TEST	316 CASH SUAREZ, MD	316 CASH SUAREZ, MD	Southside Location	AETNA4 AETNA	CIGNA1 CIGNA	992
04/15/2024	187096	121328 ASHLEY TEST	316 CASH SUAREZ, MD	316 CASH SUAREZ, MD	Main Location	AETNA4 AETNA	CIGNA1 CIGNA	908

**Detailed Report**

i	j	k	l	m	n	o	p	q	r
CPT Code	CPT Description	Charge	Insurance Paid	Insurance Adjustment	Patient Paid	Patient Adjustment	Total Collected	Payer Allowable	Allowable Difference
99213	OFFICE/OUTPATIENT VISIT, EST	\$105.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$105.99	\$105.99
99000	SPECIMEN HANDLING	\$35.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
80061	LIPID PANEL	\$25.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$25.00	\$25.00
99212	OFFICE/OUTPATIENT VISIT, EST	\$100.48	\$80.00	\$0.00	\$20.48	\$0.00	\$80.00	\$100.48	\$20.48
81005	URINALYSIS	\$90.00	\$60.00	\$0.00	\$30.00	\$0.00	\$60.00	\$0.00	-\$60.00
99213	OFFICE/OUTPATIENT VISIT, EST	\$105.99	\$0.00	\$0.00	\$25.99	\$0.00	\$0.00	\$105.99	\$105.99
99213	OFFICE/OUTPATIENT VISIT, EST	\$105.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$105.99	\$105.99
99212	OFFICE/OUTPATIENT VISIT, EST	\$100.48	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100.76	\$100.76
99213	OFFICE/OUTPATIENT VISIT, EST	\$105.99	\$85.25	\$0.00	\$0.00	\$0.00	\$85.25	\$105.99	\$20.74
90834	PSYCHOTHERAPY, 45 MINUTES WITH PATIENT	\$125.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$125.00	\$125.00

Number	Section	Description
a	Date of Service (DOS)	This is the date of service for payments.
b	Claim #	The Claim # column displays the number for the claim where the transaction occurred.
c	Patient	The Patient column displays the patient's first and last name and the patient identifier for the indicated transaction.
d	Rendering Provider	The Rendering Provider lists the name of the provider for the transaction.
e	Billing Provider	The Billing Provider lists the name of the billed provider on the claim.
y	Location	The Location column displays the location where the encounter occurred. This is useful for practices that have multiple locations.
g	Primary Insurance	The name of the Primary Insurance that was used for the patient on the selected date of service.
h	Secondary Insurance	The name of the Secondary Insurance that was used for the patient on the selected date of service.
i	CPT	The CPT code column lists the medical code for the visit on the date of service.
j	CPT Description	The CPT Description describes the medical code provided in the CPT Code column.
k	Charge	The Charges column displays the total charge for the service rendered for that particular patient.
l	Insurance Paid	The Insurance Paid column displays the amount paid by the insurance carrier.
m	Insurance Adjustment	The Insurance Adjustment column indicates the amount the insurance adjusted.
n	Patient Paid	The Patient Pay column displays the total amount paid by the patient.
o	Patient Adjustment	The Patient Adjustment column indicates the amount of the charge adjustment that was written off for a particular CPT code.
p	Total Collected	The Total Collected column displays the total amount collected by the Patient and the Insurance (total from Insurance Paid and Patient Paid column).

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q	Payer Allowable	The Payer Allowable column indicates the contractually allowable charge as indicated by the insurance carrier.
r	Allowable Difference	The Allowable Difference is the difference in the amounts between the and the Total Collected column and the Payer Allowable column.