Bp Premier Billing Basics Guide

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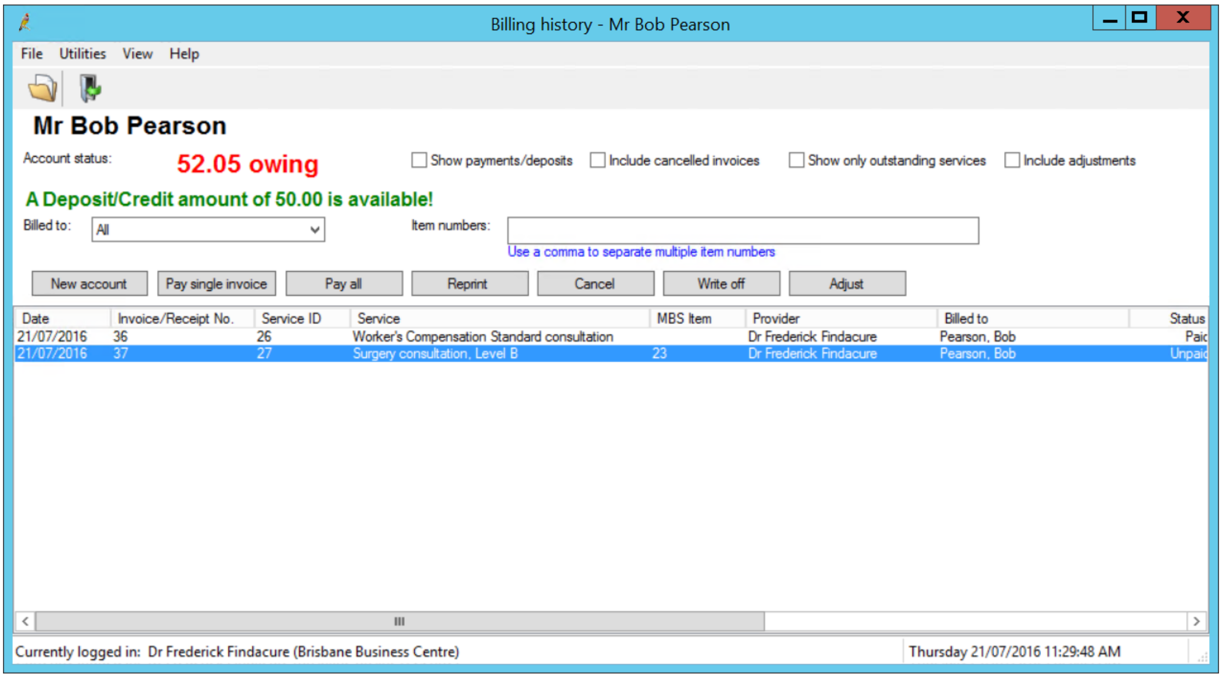
Last updated: July 2018

Intended for usage with Bp Premier version Jade SP1 and later. Some features in this User Manual may be available only in versions later than Jade.

Using the Patient Billing History

The **Patient Billing History** screen shows the history of invoices, payments, and deposits for a patient.

Open the Patient Billing History by selecting **Management** > **Patient Billing History** from the main Bp Premier screen.



The top of the screen shows the patient name, any outstanding balance, and any deposit or credit amount available.

The following transaction types are shown:

- Invoices and services for the individual patient only (does not include accounts for related patients where this patient is 'head of family')
- All billing types: Medicare, DVA, patient, head of family, Workcover, and third parties
- Payments made on invoices for the patient
- Deposits recorded for the patient
- Adjustments made to any invoices, services, payments, or deposits.

By default, the screen will show all invoices and services created for the patient. The filter checkboxes at the top of the screen show less or additional information about the patient billing. To filter by **Item number**, use commas to separate the item numbers.

The function buttons below the **Billed to** field allow you to process a selected transaction. Different function buttons will be enabled depending on the type of transaction selected:

Button	Action
New account	Displays the **Create Account** screen to create a new invoice.
Pay single invoice	Displays the **Payment details** screen to enter a payment for the selected invoice. Only active if the selected invoice has an outstanding value.
Pay all	Displays the **Payment details** screen to allow a payment to be entered for all invoices with an outstanding value.
Reprint	Reprints the selected invoice or payment.
Cancel	Cancels the selected invoice as long as it has not been partly or fully paid.
Reverse	Cancels the selected payment.
Refund	Fully or partly refunds the selected deposit.
Write off	Partly or fully writes off the selected invoice.
Adjust	Adjusts the highlighted invoice, payment, or deposit.

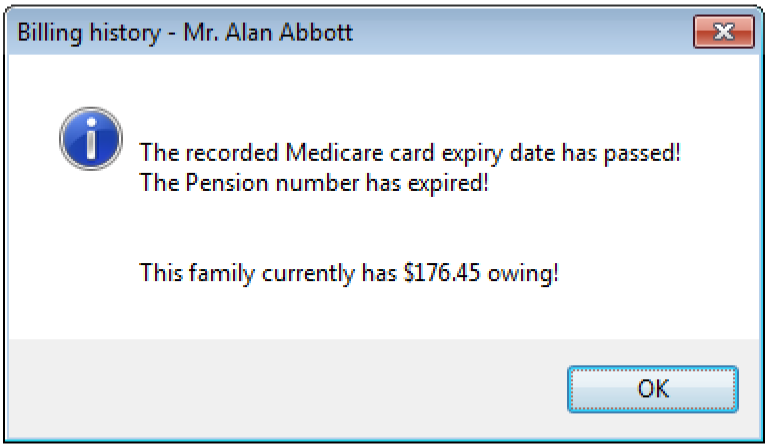
Create a simple account

You can create a simple account for services performed on the same day. For services performed over a date range, see complex accounts instead. If an account has not been paid yet, you can also edit a service on an invoice.

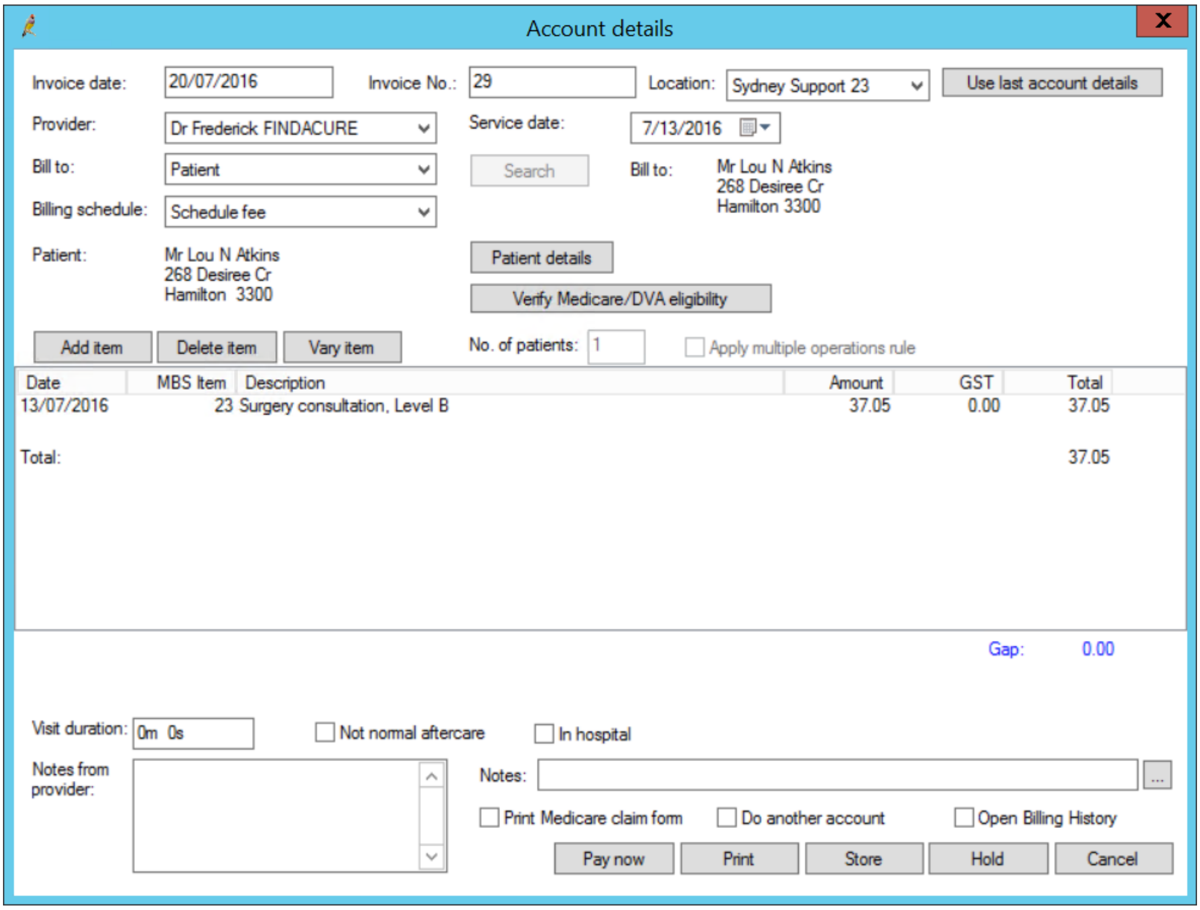
NOTE The following procedure is for creating an account for services provided if the provider has not finalised a visit. In a practice workflow where the provider finalises a visit at the end of a consult, service and clinical information would be passed through from the **Finalise visit** screen.

Create a simple account

1. From the main Bp Premier screen, select **Management** > **Patient Billing History**. The **Patient Billing History screen** appears.
2. Click the **New Account** button, select **File** > **New Simple Account**, or press **F6**.
3. Warning screens may appear depending on whether the patient has outstanding accounts, if their Medicare or Pension cards are out of date, and how your system is configured. For example:



4. Click **OK** to proceed. The **Account details** screen will appear.



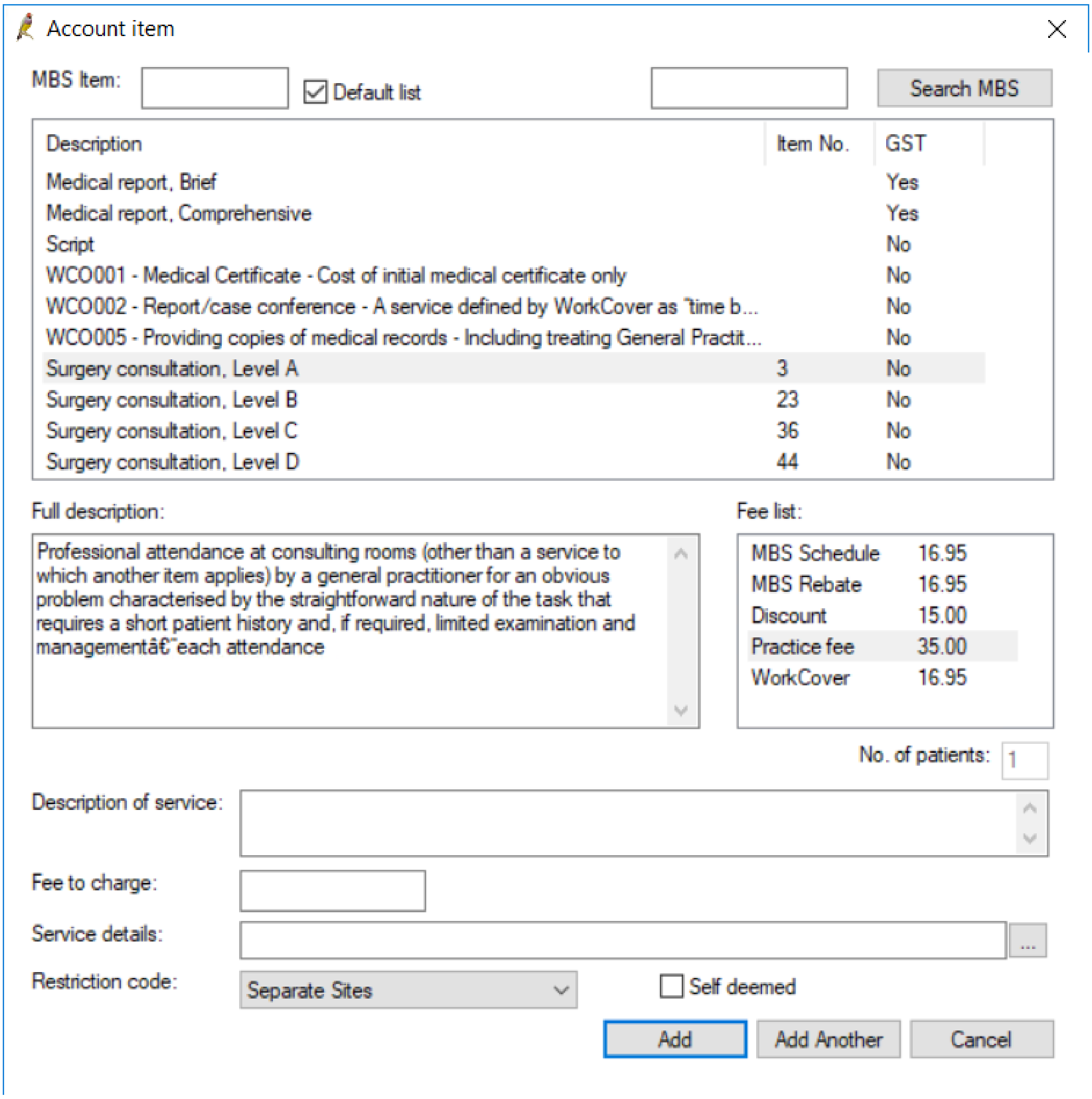
The fields in the account header are described below.

Field	Description
Invoice Date	Always set to today's date and cannot be changed.
Invoice No	Auto-generated number that cannot be changed.
Location	Location the invoice relates to. Defaults to different values depending upon system and user settings: ▪ If Bp Premier is configured to **Default to the patient's usual doctor for new accounts**, this field will be set to the provider's default location ▪ Otherwise, Location will be set to the logged-in user's location. If the invoice contains items that require the practice's LSPN, Bp Premier will use the LSPN defined for the location selected here. LSP numbers are assigned to a location from **Setup** > **Practice details**.

Field	Description
Use last account details	Displays a list of accounts created previously for this patient. Allows you to copy previous services from the list into the new account.
Provider	Provider the invoice is billed for. Will default to the patient’s usual doctor if the configuration option **Default to the patient's usual doctor for new accounts** is checked. If not, Provider will be blank.
Service date	Date the service took place. Defaults to today's date but can be backdated.
Service time	Time that the service took place. Only visible as required. For example, if two unrelated services are billed on the same day, the time of service is required to be sent to Medicare.
Bill to (drop-down)	Type of account: ▪ Patient (private accounts and patient claiming) ▪ Head of Family (accounts for children under 16 are billed to the Head of Family defined in the patient demographics) ▪ Medicare Direct Bill or DVA Direct Bill (for Direct Bill accounts) ▪ WorkCover (for workcover accounts billed to the workcover account holder) ▪ Other (for accounts that will be paid by 3rd parties created as Contacts or Account Holders).
Bill to	Shows the name and address of the party being billed for this invoice.
Billing schedule	Schedule to be used when calculating the amount to change: ▪ Schedule fee (MBS Schedule fee as per Medicare or DVA schedule) ▪ Rebate only (MBS Rebate fee as per Medicare or DVA schedule) ▪ Practice fee (private fee schedule defined in **Setup** > **Practice Fees**) ▪ Discount (private discounted schedule defined in **Setup** > **Practice Fees** ▪ Any other schedules defined in the **Setup** > **Practice Fees** screen. **NOTE** For Medicare or DVA Direct Bill accounts (in the **Bill to** field), the Billing schedule cannot be changed.
Patient	Name and address of the patient the account is raised for.
Patient details button	Displays the patient demographics window to update any information (for example, Medicare card number or expiry).
Verify Medicare / DVA eligibility	Connects to Medicare to confirm that the patient's Medicare or DVA numbers are correct.

Add services to an invoice

5. Press the **Add item** button to add services to the invoice. The **Account item** screen will appear.



The fields in the account header are described below.

Field	Description
MBS Item	If you know the MBS item number you wish to add to the invoice, enter it here. Once entered, the short and full descriptions will appear in the fields below. The fee list will be populated.

Field	Description
Default list	When ticked, the list of services will be limited to the items that have been set up as custom items via the **Setup** > **Practice Fees** screen.
Search field / Search MBS	If you don't know the MBS item number, use the search fields to generate a list. Type in the term you wish to search for in the field to the left of the button. The list of services will filter to those that contain the entered text. To search the entire MBS item database, enter a search term and click the **Search MBS** button.
Description	Short description for the item.
Item No	MBS item number, or blank if a custom item has been selected.
GST	Indicates if the item fee attracts GST.
Full description	Full description for the item as provided by Medicare.
Fee list	List of fees that can be selected for this item based on the various schedules in the system.
No. of patients	Indicate the number of patients seen during the consultation. Only active for relevant items such as nursing home and hospital visits.
Description of service	Description of service of the selected item. This will be the text printed on the invoice. You can alter this text. If the **MBS item** field is blank, you can type in a manual description.
Fee to charge	Amount to be changed for this service.
Service detail	Enter any additional service text if required by the item number. This data will be transmitted to Medicare. Click **...** to add predefined Invoice notes.
Restriction code	Certain items can only be claimed together, or duplicate items on the same day, if you supply a Medicare Restrictive Override code (restriction code). See **Which restriction code should I use? on page 14** for more information.
Self deemed	Used for some diagnostic image services. Indicates a service provided by a consultant physician or specialist other than a specialist in diagnostic radiology or a self-deemed service by a radiologist as an additional service to a valid requested service.

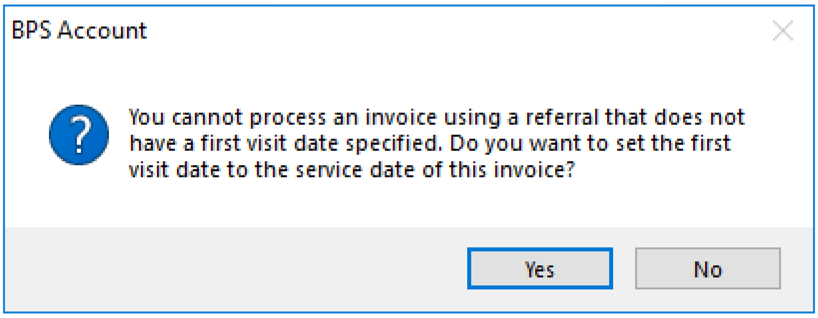
6. After searching for and listing the MBS item, double-click on the description or double-click on the fee in the **Fee list** to populate the **Description of service** and **Fee to charge** fields.

7. Click the **Add** button to close the **Account item** screen and return to the **Account details** screen, showing the item just added. Or click **Add Another** to add the item to the **Account details** screen and clear the existing screen ready to add another item.
8. Repeat for all services to be added to the invoice.

9. Enter clinical details about the account:
    - The **Visit duration** is calculated from the time that the patient record was opened.
    - Tick **Not normal aftercare** if the consultation is not normal aftercare. This option affects how Medicare handles other consultations on the same day.
    - Tick the **In hospital** checkbox if the consultation was performed in a hospital, and select the **Hospital name/No.** defined as a contact. You can also enter a hospital as free text.
    - The **Notes from provider** textbox shows any notes from the provider intended for front desk.
    - Enter any **Notes** specific to this invoice, or click **...** to select predefined Invoice notes. Invoice notes entered here are printed under the list of services when the invoice is printed.

    If the Provider and the MBS item you are using requires a referral, the **Referral details** field appears. The referral period starts on the **First visit** date on the **Referral details** screen. The **Referral details** field will be populated if you have previously invoiced the patient using this referral, there is a first visit date on the referral and the referral is not expired.

    If the **Referral details** field shows 'There is no current referral for this patient' then, click the ellipse button[...] to set the details. If the **Referral details** field shows 'First visit date not set' you will need to set one. When you save the invoice, you will be prompted to set the first visit date to the service date. If you want to set the first visit date to an earlier time, click the ellipse button[...] next to the **Referral details** field to set this date.



To find all patients that do not have a first visit date set for an active referral, run the following query in Bp Premier search.

```
select *
from bps_patients
where statustext in ('active', 'inactive')
 and internalid in (select internalid
 from referrals
 where recordstatus = 1
 and firstvisit is null
 and expirydate > cast(getdate() as date))
order by surname, firstname
```

10. Tick the post-settlement options to activate when the account is paid or stored:
    - **Print Medicare claim form** — Prints the *Medicare Assignment* form for Medicare and DVA accounts, otherwise the default invoice is printed.
    - **Do another account** — Keep the **Account details** screen open to process another account.
    - **Open Billing History** — Open the patient's **Billing History** for review.
11. When you have finished adding services, click one of the buttons along the bottom, depending on the billing type and whether the account is paid now or later:
    - **Pay now** — Pay the balance of a private account. The **Payment Details** screen will open to process payment.
    - **Print** — For Direct Bill accounts, prints the Medicare *Statement of Benefit for Claim* form for the patient to sign and stores the claim ready for batching.

      For private accounts, prints an invoice for the patient.
    - **Store** — Stores a Direct Bill claim ready for batching without printing a form.
    - **Hold** — Records the account in the patient's account history, but does not store the claim for batching. The account must be finalised before payment or batching.

      Accounts can be held if the operator is unsure of the correct item numbers to bill, for example. The account can be opened and finalised from the Billing History screen.

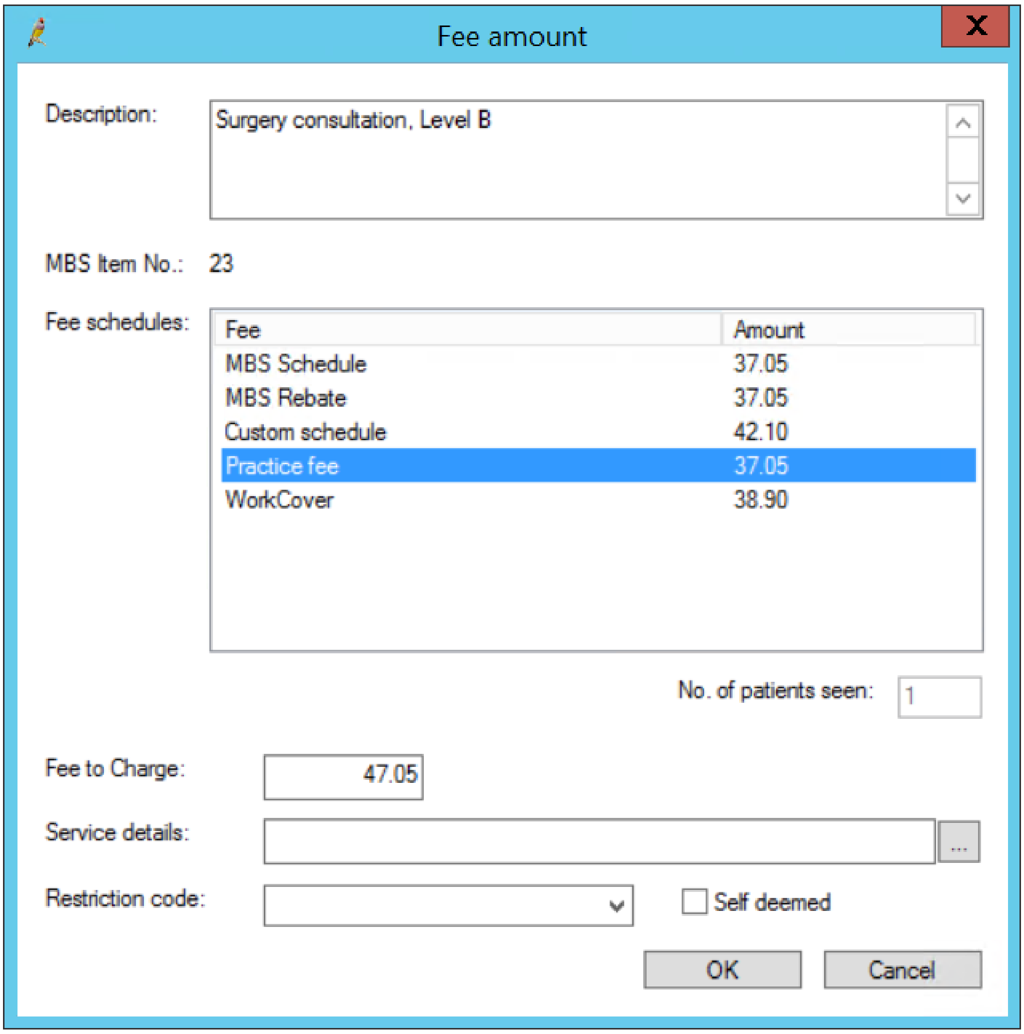
NOTE Incentive items are added automatically when you bill an account to Medicare or DVA and the patient is eligible.

NOTE Due to Medicare rules, it is not possible to bill two consultation items on the same invoice. If this is attempted, the original item will be automatically replaced with the new item number. For example, if item 23 is added to an invoice and you add item 36, 36 will automatically replace item 23. To create an invoice with multiple consultation items, you must create a complex account.

Edit a service on an invoice

You can change an item that has been added to an invoice.

1. From the **Account details** screen, double-click on the service or select the service and click the **Vary Item** button. The **Fee amount** screen will appear.



2. From this screen, you can:
   - adjust the **Fee to charge**
   - change how the GST is calculated (if applicable)
   - change the No. of patients seen
   - edit the Service details
   - Change the restriction code
   - enable or disable the **Self deemed** checkbox.
3. Click **OK** to return to the **Account details** screen, where the changes will appear.

Which restriction code should I use?

For some Medicare items or combinations of Medicare items that can be claimed, or duplicate items on the same day, you will need to supply additional or 'override' information with the item on the invoice. The **Restriction**

Code on the Account Item window supplies additional information that will prevent a claim containing multiple similar items from being rejected.

Code	Restriction Code to select	Use when...
SP	Separate Sites	A service was performed at the same attendance (or same day) to different sites on the patient's body.
NC	Not for comparison	There was a separate clinical requirement for each item, and the service was not performed for reasons of comparison. Usually only applies to diagnostic and radiology services.
NR	Not related	A service was performed that is not associated with the patient's current care plan or cycle of care. For example, an unrelated service was performed at the same attendance as a care plan review.

For additional information and override codes, review the **Department of Human Services online resource** for Easyclaim terms.

Create a complex account

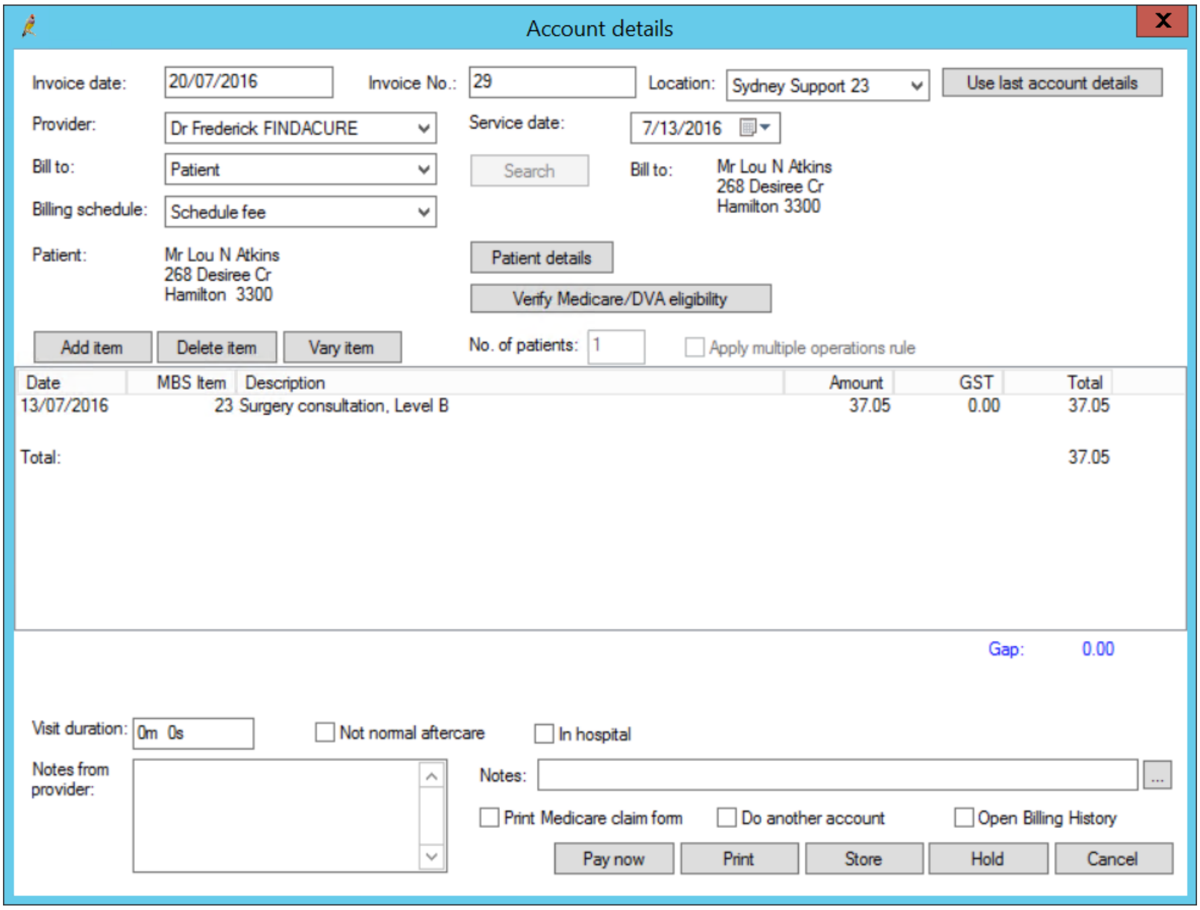
You should create a complex account if services have been performed over a range of dates, and you need to address all services in a single account.

If the account is for a single consultation and all services have the same service date, you should create a simple account instead.

Create new account

1. Depending on where you are in Bp Premier:
   - From the main screen, select **Management** > **Create complex account**
   - From the **Patient Billing History** screen, go to **File** > **New complex account**
   - From the **Account Holder History** screen, go to **File** > **New complex account**.
2. If you are creating the complex account from the main screen, the **Select Patient** screen will be displayed. Search for a patient and click **Select**.

   The **Account details** screen will be displayed.



Depending upon the configuration settings for your practice and the patient selected, some fields will be pre-populated, such as **Provider** and **Bill to**.

3. Complete the invoicing fields in the top of the screen:

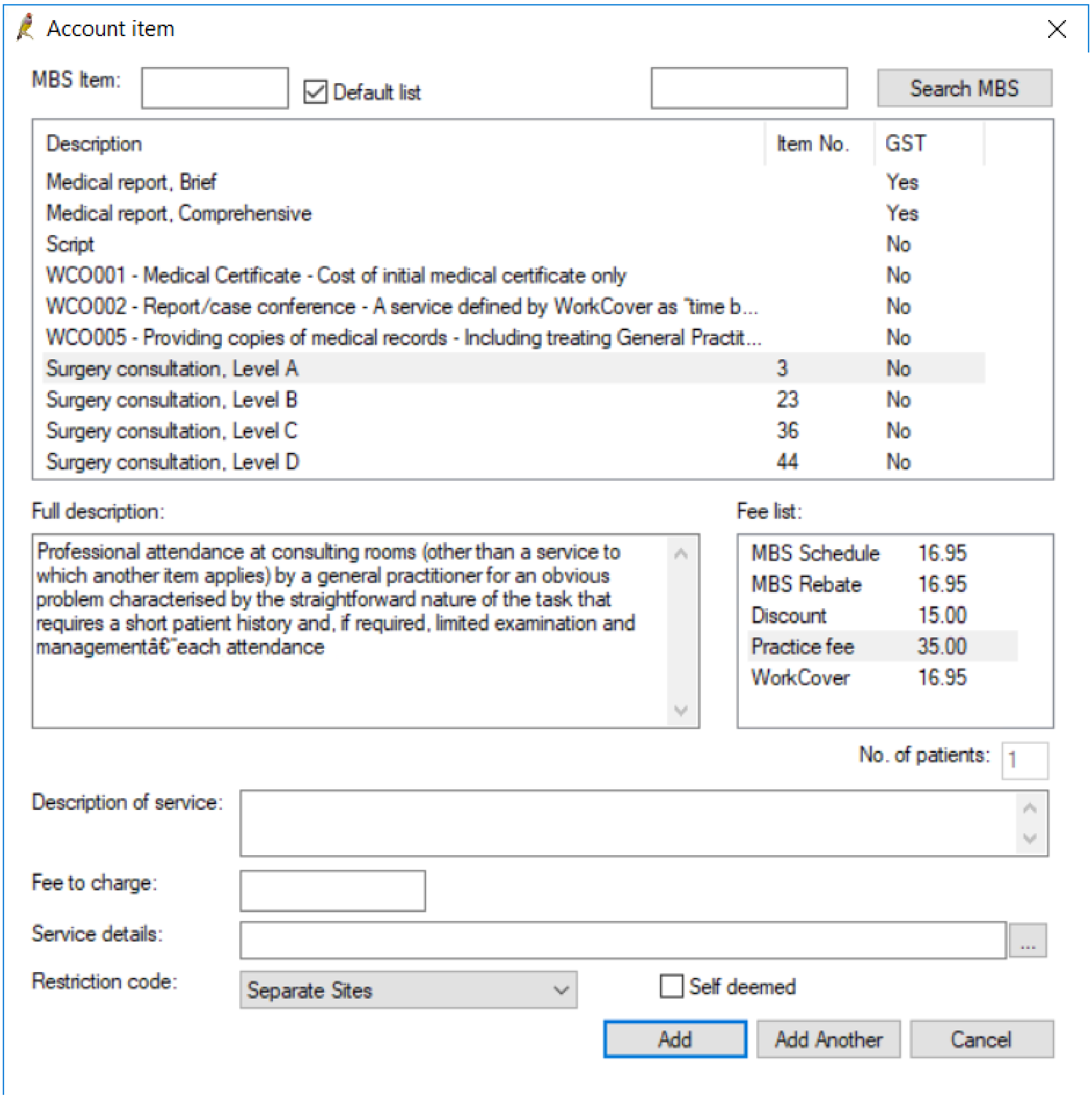
Name	Field
Invoice date	Defaults to today's date and cannot be changed.
Invoice no	Increments automatically and cannot be changed.
Location	Practice location at which services were performed. Only select a location for which the provider has a provider number.
Use last account details	Automatically fills in the account details from the last account for the selected patient. This is a handy shortcut when creating a standard consultation account for a patient.
Provider	Select the provider that the account is for.

Name	Field
Bill to	Select the type of account to be created: patient, head of family, WorkCover, or Other. If you need to send an account to a third party, such as the patient's employer, select 'Other'. When you click the **Search** button, you can bill to an account holder or contact. If you need to create an account holder or contact, from the Bp Premier main screen, select **View** > **Contacts** or **View** > **Account Holders**.
Billing schedule	Select the billing schedule to be used. This affects the fee to be charged for an item.

NOTE WorkCover defaults to the WorkCover address entered in the **Setup** > **Configuration** > **Workcover** screen. This is only valid in states where accounts are sent directly to WorkCover (such as Queensland).

Add service details

4. To add items to the account, click **Add item** to display the **Account item** screen.



5. Enter the item number into the **MBS item** box at the top of the screen.
6. Tick the **Default list** checkbox to only show items that have been customised by the practice through the **Setup** > **Practice fees** screen.
7. If you do not know the MBS Item number, you can **Search** for it in two ways:
   - type text into the search field and the list of current items will filter to those containing the search text.
   - type text into the search field and click **Search MBS**. The list will perform a full MBS seaerch and return all matching item numbers.

8. Click an item in the list to view the **Full description** and associated **Fee list**.
9. Double-click on the item you want to add. The **Description of service** and **Fee to charge** fields will be populated from the schedule. Update the description or fee charged if you need to.
10. **Service Date** will default to today's date but can be changed if the service was performed on another date. Complex accounts allow you to add items over a range of service dates.
11. If the service was performed in a hospital, tick the **In Hospital** checkbox. This will change the fee for the service.
12. If the service item claimed has a derived fee that changes depending upon the number of patients seen, enter the number of patients seen in total into the **No of patients** box. Otherwise, leave at '1'.
13. Some services, such as excisions and care plans, require additional information such as location, or type. Enter this information into the **Service details** field.
14. Certain items can only be claimed together, or duplicate items on the same day, if you supply a **Restriction Code** (Medicare Restrictive Override code). See **Which restriction code should I use? below** for more information.
15. The **Self deemed** checkbox is used for radiology services where the provider does not require a referral.
16. Tick the **Not Normal Aftercare** checkbox if applicable for this service.
17. Check that the **Fee to charge** is correct and click the **Add** button to return to the **Account details** screen. Or click **Add another** to add the item to the account and clear the current screen to add another item.
18. Repeat for each service you want to add to the account.

Finalise the Account

19. Finalise the account and process the payment for the account by selecting one of the buttons:
    - **Pay now** — saves the invoice and displays the payment screen ready for the payment details to be entered
    - **Print** — saves the invoice and prints a copy of the account for the patient
    - **Store**— saves the invoice so that it can be finalised later
    - **Cancel** — cancels the account or undoes any changes made to an existing account.

Which restriction code should I use?

For some Medicare items or combinations of Medicare items that can be claimed, or duplicate items on the same day, you will need to supply additional or 'override' information with the item on the invoice. The **Restriction Code** on the Account Item window supplies additional information that will prevent a claim containing multiple similar items from being rejected.

Code	Restriction Code to select	Use when...
SP	Separate Sites	A service was performed at the same attendance (or same day) to different sites on the patient's body.

Code	Restriction Code to select	Use when...
NC	Not for comparison	There was a separate clinical requirement for each item, and the service was not performed for reasons of comparison. Usually only applies to diagnostic and radiology services.
NR	Not related	A service was performed that is not associated with the patient's current care plan or cycle of care. For example, an unrelated service was performed at the same attendance as a care plan review.

For additional information and override codes, review the **Department of Human Services online resource** for Easy-claim terms.

Find an invoice or cheque

If you know the number recorded in Bp Premier against a cheque or an invoice, you can search for and open the record without needing to search through the billing history screens. You can also mark a cheque as bounced from the **Find a cheque** screen.

NOTE You will need to know the exact invoice or cheque number. You cannot search based on a partial number.

To find an invoice:

1. From the main screen of Bp Premier, select **Management** > **Find Invoice**, or press Ctrl+F2. The **Find Invoice** screen will appear.
2. Enter the invoice or voucher number and click **Find**. The **Find Invoice** screen will appear.
3. The buttons along the top offer the same options to process invoices as the **Patient Billing History** or **Account Holder History** screens.
4. Double-click the invoice to open the **Account Details** screen and view details of the account to be paid.

To find a cheque:

1. From the main screen of Bp Premier, select **Management** > **Find Cheque**. The **Find Cheque** screen will appear.
2. Enter the cheque number and click **Find**. The **Find Cheque** screen will appear.
3. Click **Mark as bounced** to record a cheque as bounced. Invoices that have been paid by the cheque will be reversed to 'Unpaid'.

Process a payment

You can process payments through the **Management** menu for account holders and patients if the invoice was not created and paid from the appointment book after the consultation.

Which screen do I use?

You can record a payment from several screens in Bp Premier:

- To enter a payment for an existing account for a patient, account holder, or contact — **Management** > **Process Payment**
- To create an account and enter a payment — **Management** > **Create patient account** > **Pay now**
- To enter a payment by a patient from their Billing History — **Management** > **Patient billing history** > **Pay Single Invoice / Pay all**

The method you select will depend on your practice's workflows and your account settlement process, and whether you are processing payments from patients or account holders, such as an employer or company.

The instructions below demonstrate the first option. This option is usually used where a patient has a number of invoices outstanding and are being paid all at once, or for a hospital or insurance company that will be paying a set of accounts (often from a statement generated from the Debtors List).

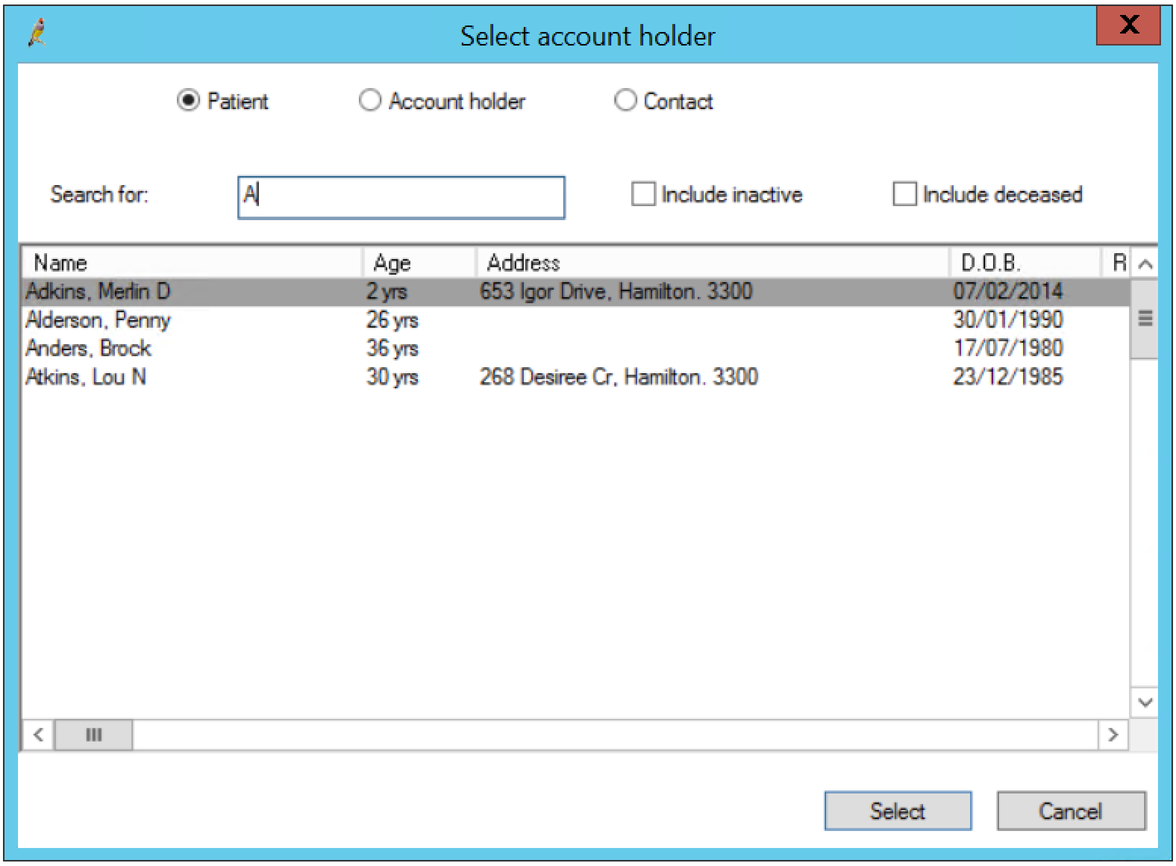
Regardless of which method you use, the steps are the same: select the account holder, select the invoices being paid, and enter the amount in each applicable payment method.

What if I need to pay a lot of invoices?

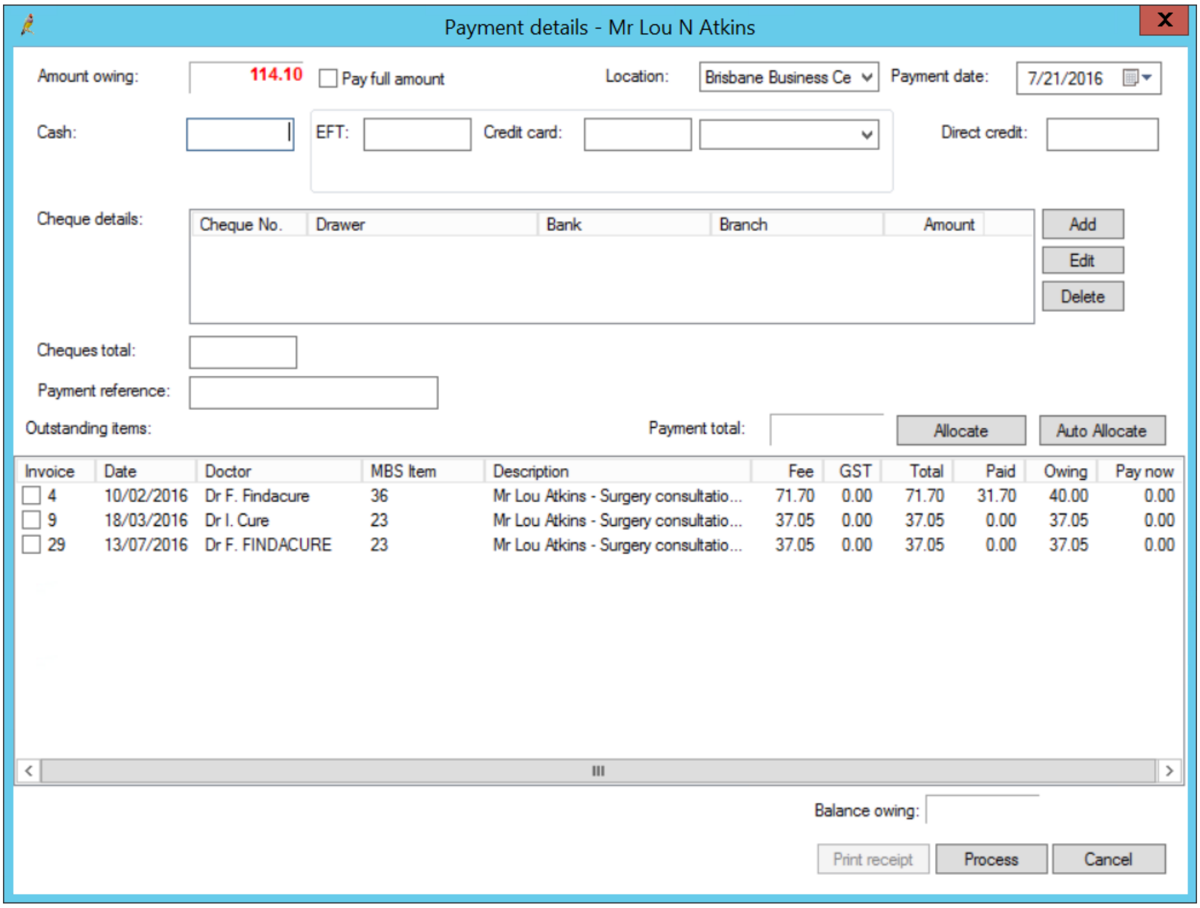
The **Bulk payment** screen is a more streamlined screen for processing irregular or very large numbers of invoices. Your practice may find this screen useful if it processes invoices with non-standard fees from hospitals or insurance companies.

Process a payment

1. Select **Management** > **Process payment** from the main screen. The **Select account holder** screen will appear.



2. Select **Patient**, **Account holder**, or **Contact** to filter the account holders shown.
3. Tick **Include inactive** or **Include deceased** checkboxes if you are processing an old payment for inactive or deceased account holders.
4. Enter the surname into the **Search by surname** field. Select the patient or company from the list and click **Select**. The **Payment details** screen will appear.



This screen is similar to the one shown when a patient account is paid after consultation, except the screen shows **all** invoices outstanding.

The next steps depend on whether the account is being paid in full or in part.

Pay in full

5. Place the cursor in one of the **Cash**, **EFT**, **Credit Card**, **Direct credit**, or **Cheque total** fields (depending on how the account is being paid) and tick the checkbox **Pay full amount**.
6. If the payment is by cheque, the **Cheque details** screen will appear. If it does not appear, click **Add**.
7. Enter the cheque details and click **Save**. This information will appear on the **Payment details screen** and the **Banking** report.
8. Check that the payment amount has been entered correctly into the payment type field you clicked in step 5.
9. All outstanding items will be ticked automatically and the **Pay now** column filled with the amount owing for each item. If not, click **Auto allocate** to allocate the entire amount across all of the accounts. When the entire payment amount has been allocated, the **Balance owing** field at the bottom will be zero.
10. Click **Print receipt** to save the payment, print the receipt, and exit the screen, or click **Save** to save the payment and exit the screen.

Pay in part

5. If the account is being only partly paid, enter the split amounts to be paid into the **Cash**, **EFT**, **Credit Card**, or **Direct credit** fields. For example, for an account of $75.00, you could enter $25.00 into the **Cash** field and $50.00 into the **Cash** field.
6. If you are part-paying by cheque, click **Add** to open the **Cheque details** screen.
7. Enter the cheque details and click **Save**. The **Payment total** field at the bottom of the screen will update to display the total amount entered in all payment fields.
8. Click **Auto allocate** to allocate the amount being paid sequentially across the account items. The **Pay now** column indicates the amount allocated for each item.

EXAMPLE

$107.10 is paid and auto-allocated against three account items, with a part payment on one.

Outstanding items: Payment total: 107.10 Allocate Auto Allocate

Invoice	Date	Doctor	MBS Item	Description	Fee	GST	Total	Paid	Owing	Pay now
☑ 102	06/09/2007	Dr. Frederick Finda...	23	Mrs. Madeline Jane Abbott - Surge...	45.00	0.00	45.00	20.00	25.00	25.00
☑ 228	03/10/2007	Dr. Frederick Finda...	23	Mrs. Madeline Jane Abbott - Surge...	32.10	0.00	32.10	10.00	22.10	22.10
☑ 371	03/10/2008	Dr. Adonis Lanver	23	Mrs. Madeline Jane Abbott - Surge...	60.00	0.00	60.00	0.00	60.00	60.00

9. Instead of auto-allocating, you can manually tick a checkbox next to an account item to pay that item. The **Pay now** column indicates the full amount of the item.

EXAMPLE

The first and third account items are being paid in this transaction. To allocate a payment of $85 to individual items, tick the items the payment is for.

Outstanding items: Payment total: 85.00 Allocate Auto Allocate

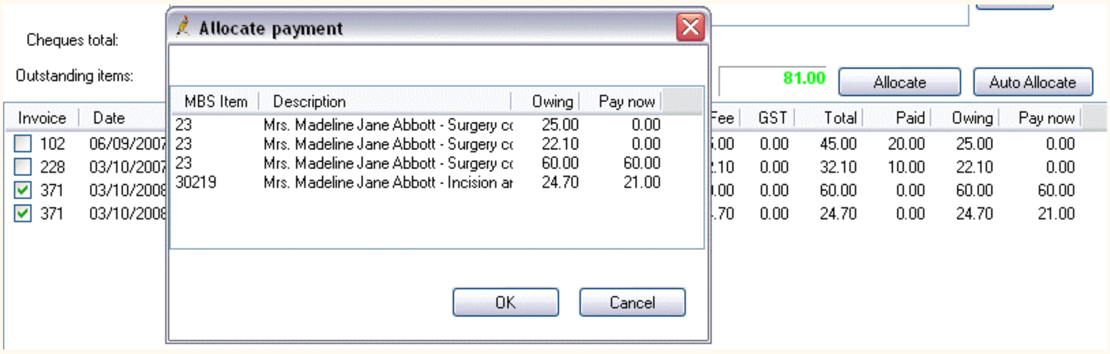
Invoice	Date	Doctor	MBS Item	Description	Fee	GST	Total	Paid	Owing	Pay now
☑ 102	06/09/2007	Dr. Frederick Finda...	23	Mrs. Madeline Jane Abbott - Surge...	45.00	0.00	45.00	20.00	25.00	25.00
☐ 228	03/10/2007	Dr. Frederick Finda...	23	Mrs. Madeline Jane Abbott - Surge...	32.10	0.00	32.10	10.00	22.10	0.00
☑ 371	03/10/2008	Dr. Adonis Lanver	23	Mrs. Madeline Jane Abbott - Surge...	60.00	0.00	60.00	0.00	60.00	60.00

10. You can also part-pay individual items. Click **Allocate**. Select the item that you want to part pay and edit the amount in the **Pay now** column. Click **Ok**.

    You must allocate all of the amount paid from this screen (for example, if the payer is paying a total of $100.00, the entire amount must be allocated from the **Allocate payment** screen).

EXAMPLE

A payment of $85 is being allocated in this transaction: the third item is being paid in full, and the fourth item is being part-paid with $21.00.



11. After allocating payments, check that the amounts in the **Pay now** column total to the **Payment Total** field.
12. Click **Print receipt** to save the payment, print the receipt, and exit the screen, or click **Save** to save the payment and exit the screen.

Correct an unpaid account

Unpaid accounts with errors can be cancelled or adjusted from:

- **Management** > **Patient billing history** (for patients)
- **Management** > **Account holder history** (for account holders).

Cancel an account

If you created an account from the **Management** menu, but you have not yet clicked any of the **Pay Now**, **Print**, **Store**, or **Hold** buttons, you can just click **Cancel** to close the **Account Details** screen without saving the account.

If the doctor has finalised a visit, or you have stored an account but have not yet recorded any payment, you must cancel the account from the billing history:

1. From the main menu, press Ctrl+F6 to open the **Patient billing history**, or Ctrl+F4 to open the **Account holder history**.
2. Select the patient or account holder with the account that needs cancelling and click **Select**.
3. Select the account to be adjusted and click **Cancel**.
4. Bp Premier will prompt for confirmation. Click **Yes**.
5. Bp Premier will prompt for a Reason for cancellation. Select a reason from the list and click **OK**.

If the **Cancel** button is not enabled when you select an account, the account may be direct-billed rather than a practice fee.

You can now recreate the account with the correct details.

If you want to include cancelled accounts in the list displayed in the billing history screens, tick **Include cancelled invoices** from the list of filters at the top of the screen. Cancelled invoices are shown in purple with a **Status** of 'Cancelled'.

Adjust an account with a status of Unpaid

1. From the main menu, press Ctrl+F6 to open the **Patient billing history**, or Ctrl+F4 to open the **Account holder history**.
2. Select the patient or account holder with the account that needs correcting and click **Select**.
3. Select the account to be adjusted and click **Adjust** to display the **Account details** screen, showing the details of the account.

4. You can alter any of the following:
    - Invoice date
    - Bill to
    - Billing Schedule
    - Add, Delete or Vary items
    - No. of Patients
    - Notes.
5. After being adjusted, you can print the account, print the Medicare claim form, pay now, or store the changes.

Understanding adjustments

Adjustments to invoices and payments are recorded and shown on the transaction history screens.

What type of changes are recorded?

Change type	Changes recorded
Invoices	Adjust Invoice Change from one consultation item to another Add an item Delete an item Change fee Change schedule Change location Change 'Bill to' Change Payer Change in No. of Patients Tick / Untick In-Hospital Tick / Untick NNAC Cancel Invoice Write off Invoice / Service Partly Write off Invoice / Service Complex Accounts Update service date

Change type	Changes recorded
Payments	Reverse Payment Adjust Payment Change Payment Type Change location Change date Change included services Change payment amount
Deposits	Allocate to Invoice Change deposit amount Change payment type Refund remaining deposit
Online Claiming	Mark as fully paid Change item number Edit voucher details Change billing Write off service

Invoice adjustments

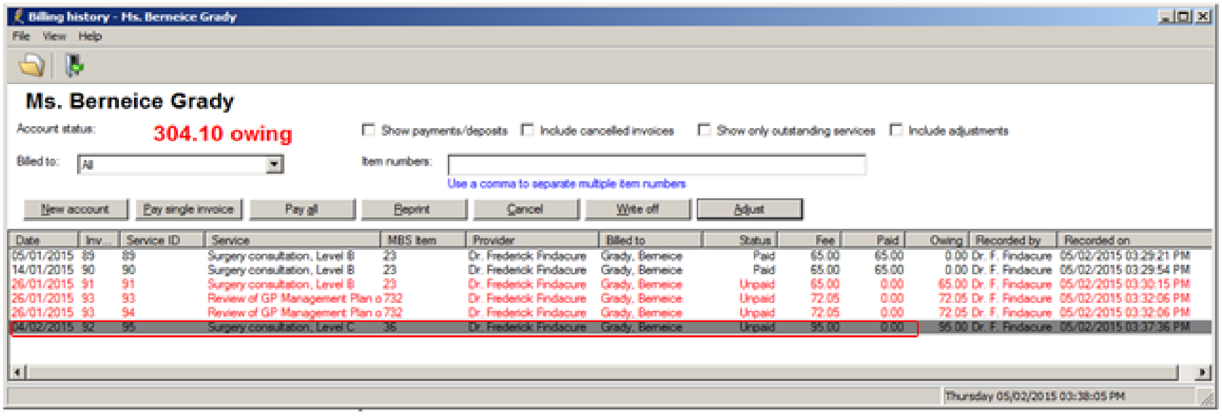
Adjustments, cancellations and write-offs to invoices are made using Patient Billing History, Account Holder History, or Online claiming batches.

- To **adjust** an invoice, highlight an unpaid invoice and press **Adjust**. You can only adjust an invoice that has **not** been paid in part or whole.
- To **cancel** an invoice, highlight an unpaid invoice and press **Cancel**. You cannot cancel an invoice that is partly or fully paid.
- To **write off** an invoice, highlight an unpaid or partly paid invoice and press **Write off**

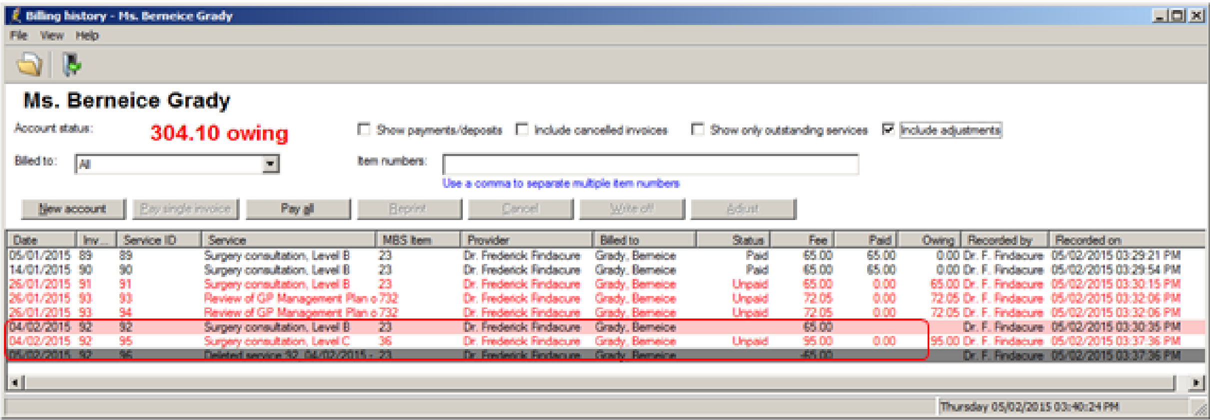
Viewing invoice adjustments

Say Invoice No 95 was created for item 23 for $65.00, and was adjusted and the item changed to item 36 for $95.00.

When you first open the **Patient Billing History** screen, the system shows only active invoices so you only see the current state of each invoice. Invoice 95 is listed only once with its current value of $95.00.



To see all adjustments made to invoices, tick the **Include adjustments** checkbox.



Payment adjustments

Adjustments or reversals of payments are made using Patient Billing History or Account Holder History:

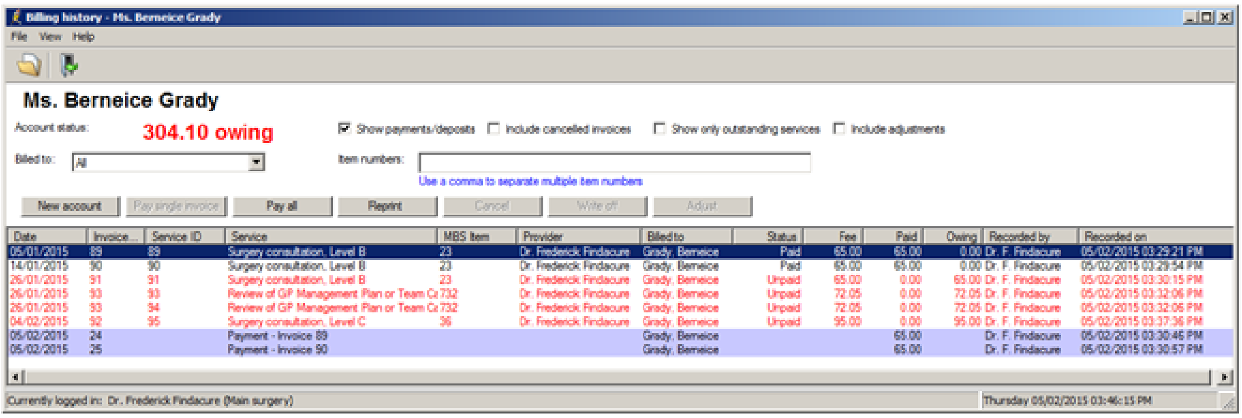
- To adjust a payment, highlight a payment and press **Adjust**.
- To reverse a payment, highlight a payment and press **Reverse**.

Viewing payment adjustments

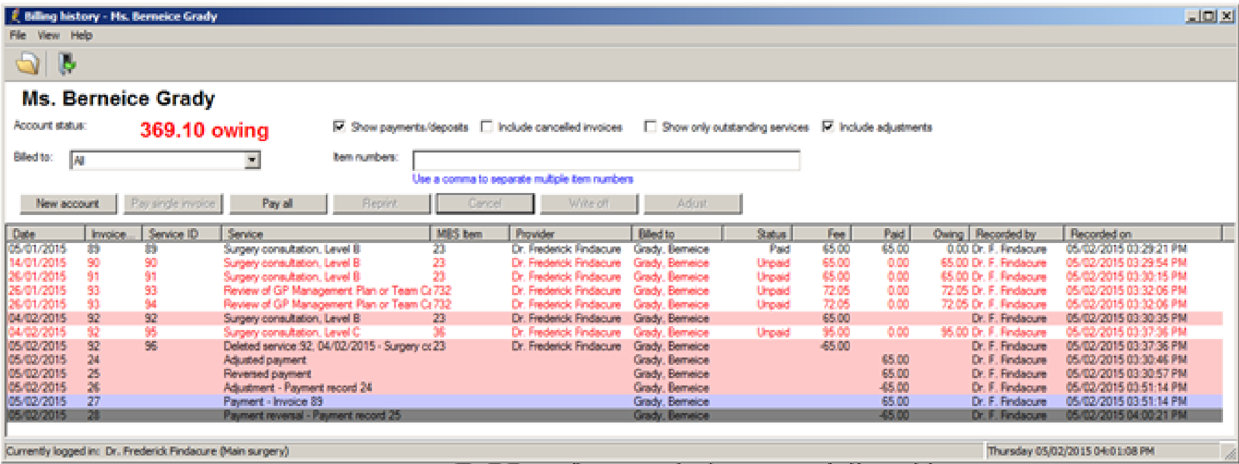
1: Payment no 24 was for $65.00 Cash then changed to EFT on the same day

2: Payment no 25 was for $65.00 Cash then reversed after the 1st screen shot below was taken.

When you first open the **Patient Billing History** screen, the system shows only active invoices so you only see the current state of each invoice. Tick **Show payments** for the payments to appear.



To show adjustments, tick the **Include adjustments** checkbox. All adjustment records will appear. The original payments that were adjusted have their description changed to **Adjusted payment** or **Reversed payment**, and will be shaded in pink to show they are no longer active.



Pay with or refund a deposit

Deposits allow your practice to take money in advance as payment for future services, or as holding fee for equipment hire, for example. Deposits are recorded in a similar way to payments. However, deposits can be allocated as payment for individual or multiple invoices as a whole payment or in combination with other payments.

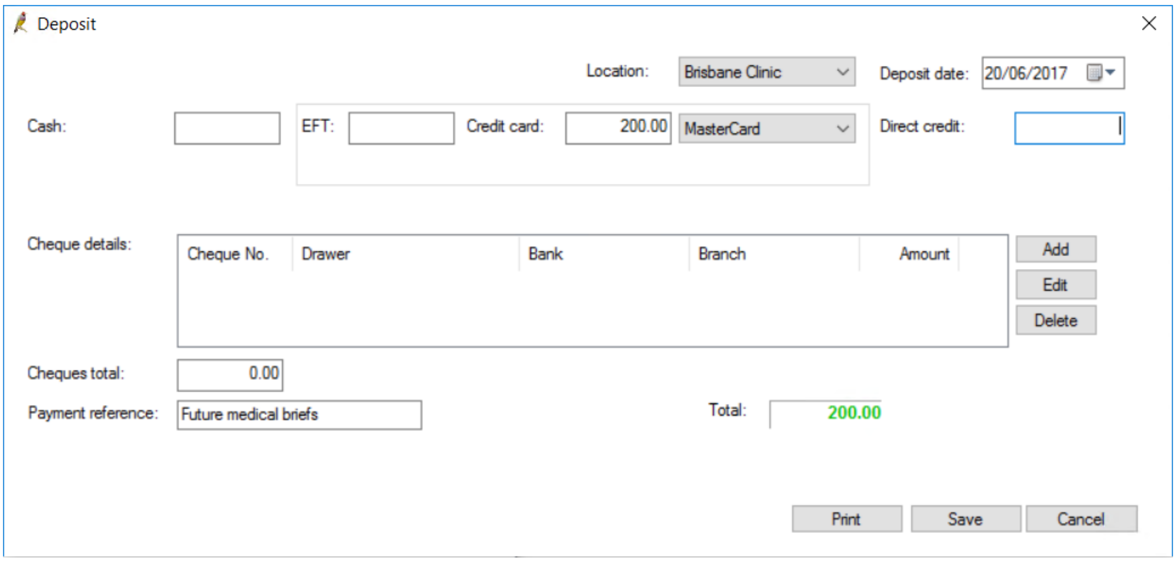
Bp Premier regards deposits as belonging to the practice, rather than belonging to a specific provider.

Deposits are made in the same way as payments, from the **Patient Billing History** or **Account Holder History** screens:

- To record a deposit, select **File** > **Record Deposit**
- To view deposits, tick the **Show payments / deposits** checkbox.
- To adjust a deposit, select the deposit record and click the **Adjust** button.
- To allocate a deposit to an invoice, pay the invoice (click **Pay single invoice**) and select the **Use deposit** button.
- To refund a deposit, select the deposit record and click the **Refund** button.

Record a deposit

1. From the Bp Premier main screen, press Ctrl+F6 to open the **Patient Billing History**, or Ctrl+F4 to open the **Account Holder History**. Search for the account holder for whom you are recording a deposit. The **Billing History** screen appears.
2. Select **File** > **Record deposit**. The **Deposit** screen will appear.



3. Change the practice **Location** for the deposit and the **date**, if necessary, from the default.

4. Enter the amount that the patient is paying as a deposit into a payment type field: **Cash**, **EFT**, **Credit Card**, or **Cheque**).

   If the patient is paying by EFT or Credit Card, you can use Tyro functionality to process the payment (if Tyro has been installed). You can enter a mixture of payment types if the patient is paying by two different methods.

5. Press **Print** or **Save** to record the deposit. If **Print** is selected, a receipt will be printed that can be given to the patient. You will return to the **Billing History** screen.
6. The deposit will appear shaded in light green in the list of transactions for the patient. If the deposit does not appear, tick the **Show payments/deposits** checkbox at the top of the screen.

Adjust a deposit

A deposit can be adjusted to correct mistakes made in data entry until the deposit has been banked, refunded, or allocated to an invoice. Otherwise, you will receive a message saying **This deposit is the remainder of a previous deposit that has been partially used. It cannot be adjusted.**

1. To adjust a deposit, select the deposit in the **Patient Billing History** screen and click the **Adjust** button. The **Deposit details** screen will appear, which is similar to the **Deposit** screen.
2. Update the **Location**, **Deposit date**, **Deposit amount**, **Payment type** or **Payment reference**.
3. Click **Print** or **Save** to record the adjustment.
4. Adjustments will appear on the **Patient Billing History** screen when you tick the **Include adjustments** check-box.

Allocate a deposit to an invoice

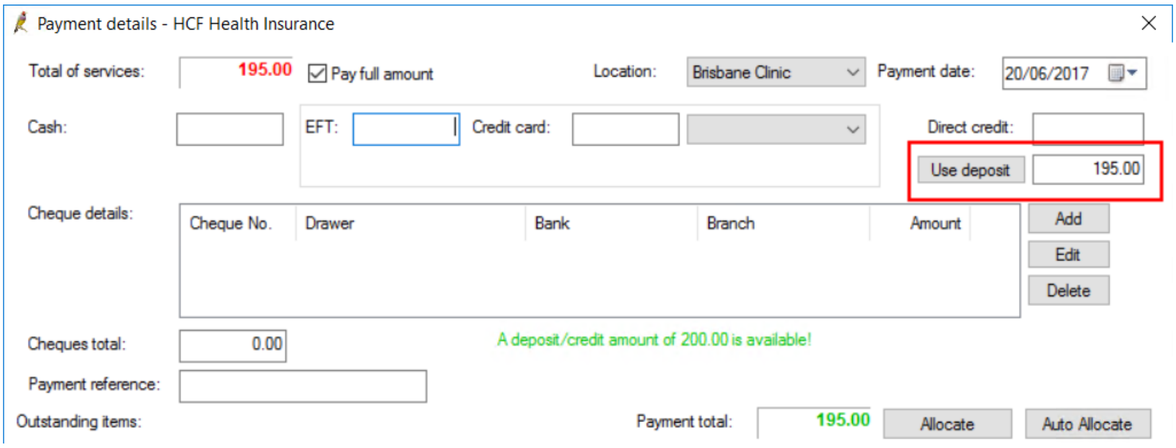
You can pay an invoice using a recorded deposit.

1. Pay a new or existing invoice by one of:
   - Press the **Pay Now** button when creating a new invoice
   - Select an invoice from the **Patient Billing History** screen and click **Pay single invoice**
   - Click **Pay all** on the **Patient Billing History** screen.

   The **Payment details** screen will appear.

2. If there is a deposit recorded for that patient, the **Use deposit** button will be available in the top right of the screen.

   If a deposit is recorded for a patient with an outstanding balance, the cursor will default to the **Use deposit** field. The deposit amount available is shown in the middle of the screen in green text.



NOTE If the **Use deposit** field does not appear, no deposits are recorded for this patient.

3. From this point, you can:
   - pay all of the outstanding balance with a deposit
   - use part of a deposit to pay the balance (for example, use part of a $100 deposit to pay a $50 invoice)
   - or use a deposit with other payment types to pay all of the outstanding balance.

Pay using all of a deposit

4. Click the **Use deposit** button.

   If the **Amount owing** value is less than or equal to the remaining deposit value, the **Payment details** screen will:
   1. display the outstanding value in the **Use deposit** field
   2. enter the full payment amount into the **Pay now** field on each of the services
   3. tick all the services to indicate they are being paid.

   If the **Amount owing** value is greater than the remaining deposit value, the **Payment details** screen will:
   1. display the entire deposit balance in the **Use deposit** field
   2. enter a value into the **Pay now** field on each service from first to last until the deposit value is fully allocated
   3. tick the services that have had an amount allocated to them.

Pay using part of a deposit

4. Enter the amount to be allocated out of the deposit into the **Use deposit** field.
5. Allocate the amount using one of:

- Tick the service lines that you want to be paid using this deposit allocation
- Click the **Allocate** button and enter the amount to be allocated for each service
- Click the **Auto allocate** button to distribute the amount automatically between the services.

Pay all using a deposit and other payment types

If the total of all payments is less than the amount owing:

4. Enter the amount to be paid as a deposit into the **Use deposit** field.
5. Enter the amount of the new payment into the payment field.
6. Allocate the payment / deposit values against the services.

If the total of all payments will pay the full value of the invoice:

4. Enter the amount to be paid as a deposit into the **Use deposit** field.
5. Click in the payment type field (such as Cash, or EFT)
6. Tick **Pay full amount** at the top of the screen to automatically allocate the total payment value across the services.

Process the payment

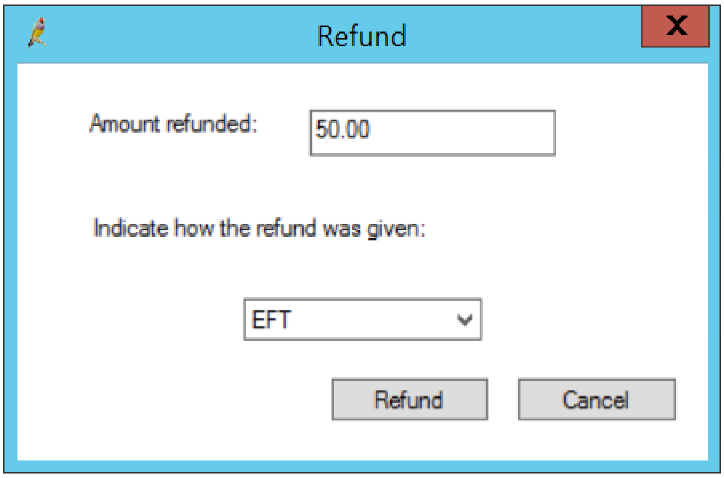
If the item can be claimed from Medicare, the **Send via Patient Claiming** and the **Send via Easyclaim** check boxes will be available.

Review the payment details and click **Process** to finalise the payment.

Refund a deposit

You can refund an entire deposit or a part value.

1. From the **Patient Billing History** screen, select the most recent deposit record (in green).
2. Click the **Refund** button and the **Refund** screen will appear. By default, the screen shows the remaining deposit balance, but this value can be reduced.



3. Select the payment type used to give the money back to the patient or account holder (for example, Cash or EFT) and click **Refund**.
4. An adjustment will be created in the account holder transaction record and a negative value will appear in the **Banking** screen that can be taken into account when reconciling.

NOTE Deposit refunds can not be processed through Tyro.
