



J A D E

Bp Premier Reports User Guide

Legal notices

This document is classified as commercial-in-confidence. Unauthorised distribution of this information may constitute a breach of our Code of Conduct, and may infringe our intellectual property rights. This information is collected and managed in accordance with our Privacy Policy, available on our [website](#).

© Copyright 2019

Best Practice Software believe the information in this User Manual is accurate as of its publication date. The information is subject to change without notice.

You may only copy, change, or use the User Manual as required for your own use as permitted under the End User Licence Agreement or the Order Form. User Manuals are intended for reference only and do not preclude the need for training.

Best Practice Software Pty Ltd
PO Box 1911
Bundaberg Queensland Australia 4670
www.bpsoftware.net

Best Practice Software New Zealand Ltd
PO Box 1459
Hamilton New Zealand 3240

The information contained in the User Manual is intended to be a guide only. BPS does not provide any warranty in relation to its currency, accuracy or completeness and, unless otherwise required by law, will not accept any liability in relation to any loss or damage suffered by you or any third party in reliance on the information contained in the User Manual.

Last updated: 27 May 2019

Intended for usage with Bp Premier version Jade SP2 and later. Some features in this User Manual may be available only in versions later than Jade.

What reports are available?

This user guide describes how to set up users to run reports, how to group and paginate reports to your preferences, and how to use the reports for practice operations like provider disbursement, banking reconciliation, and online claiming auditing.

The reports available in Bp Premier can be grouped into the following functional areas. Click on a link to view the full description in the report reference.

Reports are added and updated each monthly Data Update, so always keep up to date with Data Updates and check the Reports window in Bp Premier to view the latest versions of all reports.

Report group	Description
Services	The Services reports show an account of <i>work performed</i> in a reporting period. Services are included whether they unpaid, part paid, or fully paid.
Payments	The Payments reports show an account of <i>payments received</i> in a reporting period. Services that were created in the reporting period, but were not paid, are not included. Payments reports include details on deposits taken and allocated to invoices in the report period.
Transactions	The combined Transactions reports show an account of <i>work performed</i> and <i>payments received</i> in a reporting period. The transactions reports provide a single report that can be used to pay providers for services performed and fees taken. For an explanation of how services that are adjusted in the report period, or paid outside of the report period, appear in the report, see Shading on page 8 .
Online claiming	Provides information on Medicare and DVA batches created or paid in the date range. All online claiming reports use the payment created date (the date that Check for payments was run). However, this date may not correspond with the date of bank deposit; a report is available that groups by <i>payment run number</i> instead that can be reconciled with deposits on a bank statement.
Debtor	Shows all outstanding services as at a specific aging date. You can view this report aged by Service Date or aged by Invoice Date.
Banking	The Daily Takings report lists all payments created or adjusted in the date range. Unbanked payments reports shows all payments taken during the date range that are yet to be included in a banking batch. Banking reports list all banking batches that have been included in a banking batch during the date range. See also Auditing reports.

Report group	Description
Appointments	Provides information on all appointments in the date range, including details on invoice counts, service counts, and fees. A summary at the end of the report groups by appointment status, which can help identify DNA and unfinished appointments.
Clinical	Shared Health Summary Upload reports provide information on uploads to My Health Record by provider or patient. Referrals reports show incoming active referrals in the date range. The vaccines report shows vaccines given to patients.
Patient	Patient demographic reports provide lists of patients with various filters such as current patients, new patients, or missing Medicare or DVA number.
Administrative	Other administrative reports include custom practice fees created, SMS appointment reminder status, and provider days away from practice.
Deposits and payment reversals	Provides information about deposits (pre-payments) that have been received from patients, account holders and contacts as well as payment reversal credits created when payments were reversed.
Audit	Cancelled and Written off Services and Reversed Payments and Bounced Cheques reports show an audit of who has cancelled or written off services or have reversed payments during the report period. Corresponding adjustments are shown in the Services or Payment reports for the same date range.
Historical	Historical reports are only necessary for practices who have recently upgraded from a Bp Premier version prior to Lava and still need to report on data from before the upgrade.

The next section gives more guidance on which report type to run, depending on what you want to do and how you pay your providers.

Which report should I run?

The following terms are used in report titles and descriptions to distinguish between reports that contain very similar data, but group or present that data in different ways. The report to run will depend on how you pay your providers, whether you are comparing dates or amounts against a third party like a bank statement, Medicare, or DVA, or troubleshooting payments or claims.

Term	Description	Use this style of report when...
Detailed	Detailed reports include rows indicated by a + sign that can be expanded to show details of individual items in the report, such as invoices, services, patients, or payments. Most reports are detailed reports.	You want to view details or amounts for individual items and not just totals. You will most commonly run detailed reports.

Term	Description	Use this style of report when...
Summary	Summary reports are indicated in the report title and do not include rows showing details for individual items. Rows will show totals at the grouping level, such as by user or by location.	You only need to see totals at a grouping level. Summary reports also load faster when processing large data sets.
Payment run date	The Medicare or DVA payment run date according to the Payment Report issued by Medicare or DVA. This is the date that Medicare or DVA deposited the claim payment into the provider or practice bank account.	You want to reconcile claim payments with bank statements. The payment run date should reconcile with the bank statement deposit date.
Payment run number	The Medicare or DVA payment run number associated with a claim payment, listed on the Payment Report issued by Medicare or DVA.	You want to reconcile claim payments with bank statements. The payment run number can be used to correspond deposits shown in a bank statement. For example, a lump sum deposit will contain payments from multiple claims with the same payment run number.
Batch number	A unique identifier for a batch generated by Bp Premier when a batch is created. The batch number is passed to Medicare or DVA and will appear on the Medicare or DVA Payment Report.	You want to see the status of all services contained in a batch, not just those that have been paid.
Payment date	<p>The payment date reflects the actual date the payment was received by the practice, and not necessarily the date the payment was recorded in Bp Premier. For example, a payment may be backdated for a bank transfer or patient payment that occurred earlier in the week.</p> <p>The payment date is manually entered by the user when the payment is recorded and can be altered.</p>	<p>You want to see when payments (or adjustments) were actually received, for comparison against an external statement such as a bank statement.</p> <p>This type of report may produce different data when rerun, if backdated payments in the report period have been entered in the meantime. Because report data may change, Best Practice Software recommend that 'payment date' style reports not be used to pay providers.</p>
Payment created date	<p>Date that the payment record was created by Bp Premier when the payment is first recorded by an operator. This date cannot be changed.</p> <p>For payments by patients or account holders, this value is the date the transaction was recorded in Bp Premier.</p> <p>For DVA and Medicare payments, this value is the date when the Check for Payments was run and Bp Premier received the payment information from the Medicare or DVA reports.</p> <p>This date is usually different to the Medicare or DVA payment run date.</p>	<p>You pay your providers based on payments received and need to see payments made in a set period, or you want to troubleshoot discrepancies by comparing payments with transaction, service, or online claiming reports.</p> <p>Because this date cannot be changed, this type of report will produce the same data when rerun after the end date of the report period. That is, the report totals will not be affected by backdated payments.</p>

Term	Description	Use this style of report when...
Service date	<p>The service date reflects the actual date the service was provided by the practice, and not necessarily the date the service was recorded in Bp Premier. For example, a service could be backdated if the invoice was created after the appointment, or could be for a complex account covering services from different days.</p> <p>The service date can be altered by a user.</p>	<p>You want to see when a service was actually provided.</p> <p>This type of report may produce different data when rerun, if backdated services in the report period have been entered in the meantime. Because report data may change, Best Practice Software recommend that 'service date' style reports not be used to pay providers.</p>
Service created date	<p>Date that the service record was created by Bp Premier when the invoice is first recorded by an operator. This date cannot be changed.</p>	<p>You pay your providers based on services performed and want to see services billed in a set period.</p> <p>Because this date cannot be changed, this type of report will produce the same data when rerun after the end date of the report period. That is, the report totals will not be affected by backdated services.</p>
Service ID	<p>A unique identifier for a service generated by Bp Premier when an invoice is created.</p>	<p>You want to compare services across reports or functions in Bp Premier, for example, troubleshooting from the Billing History screen.</p>
Account type	<p>Corresponds to the Bill To field of the Account details window: Private (patient or HOF), Medicare, DVA, WorkCover, Other (account holders and contacts). GST amounts are included as a column under Account Type.</p>	<p>You pay your providers based on payments received or services provided and you want to see total amounts broken down by account type (for example, providers are paid on a scale based on account type).</p>
Payment type	<p>Payment method: Cash, EFT, Credit card, Cheque, Direct credit, Bp Premier deposit.</p>	<p>You want to see a breakdown of services or payments by payment method. This report can also be used to pay your providers when they are paid based on fees taken.</p>
Schedule	<p>Corresponds to the Billing Schedule field of the Account details window: Medicare, DVA, Private, health insurer, custom practice schedules.</p>	<p>You pay your providers based on payments received or services provided and you want to see total amounts broken down by billing schedule (for example, providers are paid on a scale based on schedule, such as a custom after-hours practice schedule).</p> <p>Schedule-grouped reports will show rows for each applicable schedule under payments or services.</p>

The next section describes how to set up user permissions for reporting so that users only have access to the reports required by their role.

Set up users to run reports

Before a user can run a report, you need to:

- set the user's **Reports** permission in Setup > Users > **Permissions** to 'Allow access'
- tick the reports that a user can access in Setup > Users > **Reports**.

The next time the user logs in, the ticked reports will be available when the user opens Management > Reports.

The next section describes how to manipulate how report data is grouped and displayed to suit your practice.

Grouping and shading

Grouping

When you run a report, you can select a grouping from the **Configuration** tab of the Report Parameters.

Choose the Report Parameters

Date, Locations, Providers | Billing | Banking | Configuration

Default zoom: Page Width

First day of billing cycle: Sunday

Default report period: None

Default report grouping : Location

Inactive Users

Exclude all

Only those inactive for more than 1 months

Apply exclusions to Debtor reports

Page break between each top level group

Save

View Report Cancel

Grouping changes how amounts or counts in a report are totalled. By default, reports group by **Location** first, meaning that amounts are aggregated for each practice location first, and then broken down by report content (services, payments, or patients, for example).

However, your practice may want to see totals broken down by provider. For example, you have multiple practice locations with providers that work at each, but you pay providers the same regardless of which location they've attended. In this instance, you could set the Grouping to **User** instead, which would show total amounts for each provider across all locations.

Grouping	Use this grouping when...
Location	You want to see total amounts aggregated for each practice location.
User	You want to see total amounts aggregated for each provider.
User (Location)	You want to see total amounts aggregated for each provider, and also subtotals for each location for each provider.

Tick **Page break between each top level group** if you want the printed version to start a new page for every new top level group.

To work out which grouping method is best for your practice, run the Services and Payments reports with different grouping and view or print the reports to see the result. When you find a grouping and report combination that works for you, click **Save** in the **Configuration** tab to save the selected grouping as the default for all reports.

Shading

Shaded rows in a report indicate that a service or payment was **created** outside of the date range of a report, but the payment or invoice was **adjusted** in the report period.

Shading provides context and detail for an item that appears in a report, but is not included in the totals in that report. You can expand a shaded row to see details of an invoice or service, for example.

Other report types also have shading:

Shading	Description
Yellow	The service was created outside of the report range, but part of invoice was adjusted in the report range.
Blue	The payment was created outside the date range, but the payment was adjusted inside the date range. In batch reports, the batch or service was created inside the date range, but the payment shown in the batch was made outside of the date range
Pink	The invoice or payment in the row contains errors. Click the + sign to view the details.
Green	Used in appointment reports to indicate a held account; the booking has been invoiced but not yet paid.

An explanation of shading also appears in the legend of each report.

The next section explains how to run a report and what the report parameters do.

Run a report with parameters

1. Select **Management > Reports** from the main Bp Premier screen to display the **Bp Premier Reports** screen. The list of reports shown is determined by the reports that you have been given permission to access.

Available reports:

Report name	Last updated
Appointments (grouped by type)	14/12/2017
Appointments (grouped by user)	14/12/2017
Banking (grouped by date)	14/12/2017
Banking (grouped by date) using payment created date	14/12/2017
Banking (grouped by provider)	14/12/2017
Banking (grouped by provider) using payment created date	14/12/2017
Cancelled and Written off services	14/12/2017
Daily takings report	14/12/2017
Daily takings report by payment date	14/12/2017
Debtors (grouped by account type)	14/12/2017
Debtors (grouped by account type) - aged by Invoice Date	14/12/2017
Debtors (grouped by provider)	14/12/2017
Debtors (grouped by provider) - aged by Invoice Date	14/12/2017
Deposits and Payment reversal credits (grouped by payer)	14/12/2017
Health Care Homes - Visits and Invoices	14/12/2017
Online Claiming - Batches including services and payments	06/12/2017
Online Claiming - Paid Services by Batch number	06/12/2017
Online Claiming - Paid Services by Payment Run number	06/12/2017
Patients - Current List	06/12/2017
Patients - Deceased	06/12/2017
Patients - Inactive list	06/12/2017

Report Types: New

Displays all appointments for the range of dates grouped by appointment Type showing count of appointments, invoices and services as well as total fee billed. At a glance you can see if an appointment has not been billed. Held accounts are showing in the counts but not included in the total fee billed.

Further groupings are provided by Provider, Appointment date and time to allow you to drill down to the service level if required.

Select Close

Leave the **Report Types** drop down set to 'New'.

2. Select a report to view a description in the right hand panel.
3. To run a report, click **Select**, or double-click the report name. The **Report Viewer** will be loaded and the **Choose the Report Parameters** window will appear.

The screenshot shows a window titled "Choose the Report Parameters" with four tabs: "Date, Locations, Providers", "Billing", "Banking", and "Configuration". The "Date, Locations, Providers" tab is active. It contains a "Dates:" section with "Range:" selected (Start: 12/09/2014, End: 12/09/2014) and "Period:" unselected. Below is a "Locations:" section with "Select All" and "Deselect All" buttons. To the right is a "Providers:" list with 15 items, all checked, and "Select All" and "Deselect All" buttons. At the bottom are "View Report" and "Cancel" buttons.

The four tabs in this window filter the data shown in the report.

Tab	Description
Date, Locations, Providers	Set the date range for the report, and data from which practice locations and providers to include.
Billing	Set the MBS items, payment methods, and billing groups to include. For example, you could filter the report to show only how many MBS item 23 services have been performed broken down by provider, or to view takings by cash or EFT only.
Banking	Set the bank accounts to include. You may want to view payments into a particular account only.
Configuration	Set defaults for the banking tab. Set report view options including grouping and pagination, and whether to include inactive users in the report.

4. Complete the parameters in each tab to filter the data for your report.

Not all tabs will need to be completed for all types of reports. For example, appointment reports generally do not need billing or banking parameters to run the report, and demographics reports will generally just run without asking for parameters.

TIP The first time you use the reports, Best Practice Software recommend starting with the **Configuration** tab, which customises the other tabs to suit your most commonly used parameters.

5. Click **View Report** to preview the report in the **Bp Report Viewer**.

Patients by age and sex		Best Practice Clinic
Year of Birth : 1908		Total : 1
Sex : Male	Aldridge, Alfred Charles	
Year of Birth : 1922		Total : 1
Sex : Female	Marlene, Olga	
Year of Birth : 1923		Total : 1
Sex : Female	Nicole, Patsy	
Year of Birth : 1926		Total : 1
Sex : Female	Bishop, Rose	
Year of Birth : 1928		Total : 3
Sex : Male	Adams, Felix	
	Allen, Kenneth	
	Bartholomew, Raymond	
Year of Birth : 1930		Total : 1
Sex : Male	Alfreds, David Charles	
Year of Birth : 1933		Total : 2
Sex : Female		

6. At the top of the report viewer, the report toolbar allows you to change the zoom, change the print layout and page setup, and export the report to file or print. Hover the mouse pointer over an icon to see what the icon does. The print layout toggles the view from 'online' (you can expand and collapse sections) to 'print' (appears as per the printed output).

Use reports to pay providers

Each practice has a different methodology for paying their providers. However, common methodologies include:

- [Pay providers on the services that have been billed](#)
- [Pay providers on the payments that have been received](#)
- [Pay providers on payments received, based on service item numbers](#)
- [Pay providers based on services billed, based on service item numbers](#)

- Pay providers on batch services paid for Bulk bill practices
- Pay providers using a combination of the above methods.

Practices will often use a combination of or a variation of these methods. The sections below provide some guidance on the best reports to run for how you pay your providers.

Pay providers on services billed

Which reports should I run?

Reports for paying providers by services billed
Services - by Account Type (grouped by service created date)
Services - by Account Type (grouped by item)
Services – by Account Type (grouped by service created and item)
Services - by Account Type (grouped by item and schedule)
Services Summary - by Account Type (grouped by service created)
Services Summary – by Account Type (grouped by item)
Services Summary – by Account Type (grouped by service created and item)

What do these reports show?

The **Services** reports show details of services included in invoices and billed to an account type. The invoice might be paid or unpaid.

Service amount totals are shown for each Account type (Private, Medicare, DVA, Other, WorkCover). You can group these reports by location or user at the top level. For example, you can view the total for all services created per date for each location, or you could view the total per date for each provider regardless of location.

The 'grouped by item' versions will group by schedule item rather than service created date. For example, this type of report would show totals billed for an item 23 across all account types.

'Grouped by item and schedule' will group by schedule first, and then items underneath the schedule. This type of report can be useful if you pay your providers a different rate based on the schedule on the invoice (for example, a custom after-hours schedule, or different private schedules for different locations).

Examples

Services - by Account Type (grouped by service created date) **BP Test Practice**

Inv. No.	Inv. Date	Patient Name	Billed to	Account Type						
Item	Srv. Created	Srv. Date	Service Details	Private	Medicare	D.V.A.	Workcover	Other	GST	Total Fee
BP Test Location 1				\$20,349.60	\$36,071.30	\$2,813.55	\$0.00	\$1,429.50	\$23.05	\$60,687.00
Dr Dave Best				\$808.00	\$10,215.95	\$595.05	\$0.00	\$172.00	\$0.00	\$11,791.00
Dr Dave Best percentage				6.85%	86.64%	5.05%	0.00%	1.46%		
Dr Rick Doctor				\$4,398.00	\$5,270.30	\$540.45	\$0.00	\$213.00	\$7.50	\$10,429.25
Service created date: 01/11/2012				\$889.00	\$1,015.45	\$186.95	\$0.00	\$0.00	\$0.00	\$2,091.40
Service created date: 02/11/2012				\$724.00	\$856.90	\$104.80	\$0.00	\$0.00	\$0.00	\$1,685.70
Service created date: 06/11/2012				\$1,495.00	\$469.50	\$143.90	\$0.00	\$69.00	\$0.00	\$2,177.40
Service created date: 07/11/2012				\$722.00	\$1,420.60	\$0.00	\$0.00	\$0.00	\$0.00	\$2,142.60
Service created date: 08/11/2012				\$568.00	\$1,507.85	\$104.80	\$0.00	\$144.00	\$7.50	\$2,332.15
Service created date: 13/11/2012				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Service created date: 14/11/2012				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Dr Rick Doctor percentage				42.20%	50.57%	5.19%	0.00%	2.04%		

Services - by Account Type (grouped by item) **BP Test Practice**

Inv. No.	Inv. Date	Patient Name	Billed to		Account Type						
Item	Srv. Created	Srv. Date	Service Details	Count	Private	Medicare	D.V.A.	Workcover	Other	GST	Total Fee
BP Test Location 1				1382	\$20,349.60	\$36,071.30	\$2,813.55	\$0.00	\$1,429.50	\$23.05	\$60,687.00
Dr Dave Best				320	\$808.00	\$10,215.95	\$595.05	\$0.00	\$172.00	\$0.00	\$11,791.00
Custom: AA010 Workcover Lev el A Consultation				1	\$0.00	\$0.00	\$0.00	\$0.00	\$34.00	\$0.00	\$34.00
Custom: AA020 Workcover Lev el B Consultation				2	\$0.00	\$0.00	\$0.00	\$0.00	\$138.00	\$0.00	\$138.00
Item : 3 Surgery consultation, Lev el A				24	\$0.00	\$348.60	\$57.30	\$0.00	\$0.00	\$0.00	\$405.90
Item : 23 Surgery consultation, Lev el B				72	\$723.00	\$1,996.50	\$83.50	\$0.00	\$0.00	\$0.00	\$2,803.00
Item : 35 Nursing Home consultation, Lev el B, 2 patie				12	\$0.00	\$525.25	\$185.45	\$0.00	\$0.00	\$0.00	\$710.70
Item : 36 Surgery consultation, Lev el C				8	\$85.00	\$492.10	\$0.00	\$0.00	\$0.00	\$0.00	\$577.10
Item : 43 Nursing Home consultation, Lev el C, 2 patie				3	\$0.00	\$319.35	\$0.00	\$0.00	\$0.00	\$0.00	\$319.35
Item : 707 Health Assessment, Prolonged				4	\$0.00	\$1,054.20	\$0.00	\$0.00	\$0.00	\$0.00	\$1,054.20
Item : 721 GP management plan				7	\$0.00	\$989.80	\$0.00	\$0.00	\$0.00	\$0.00	\$989.80
Item : 723 Team care arrangement				7	\$0.00	\$784.35	\$0.00	\$0.00	\$0.00	\$0.00	\$784.35
Item : 732 Review of GP Management Plan or Team C				30	\$0.00	\$1,978.20	\$162.50	\$0.00	\$0.00	\$0.00	\$2,140.70
Item : 2700 Preparation by a medical practitioner who				1	\$0.00	\$70.30	\$0.00	\$0.00	\$0.00	\$0.00	\$70.30

Pay providers on services that the practice has been paid for

Which reports should I run?

Reports for paying providers by services paid for
Payments - by Account Type (grouped by payment created date) including related services
Payments - by Payment Method (grouped by date) including related services
Payments - by Account Type (grouped by item) including related services
Payments - by Account Type (grouped by item and schedule)

Reports for paying providers by services paid for
Payments Summary - by Account Type (grouped by payment created date)
Payments Summary - by Payment Method (grouped by date)

What do these reports show?

The **Payments** reports show payments made to the practice, and details of associated invoices and services.

'By Payment created date' reports group payments by provider, then by the date that the payment or adjustment was created.

Payment totals can be shown split by Account type (Private, Medicare, DVA, Other, WorkCover), or Payment Method (cash, EFT, credit card, direct credit, cheque). You can group these reports by location or user at the top level. For example, you can view the totals for all payments per date by practice location, or you could view the totals of payments per date by provider regardless of location.

Examples

Inv. No.	Inv. Date	Patient Name	Billed to	Schedule	Total Fee	Private	Medicare	DVA	Workcover	Other	GST in Total	Total Paid		
Inv. Created	Inv. Date	Service Details	Service Fee	GST	Total Fee	Pay. No.	Pay. Date	Pay. Type						
BP Test Location 1					\$44,939.80	\$2.00	\$44,941.80	\$20,119.35	\$35,546.60	\$4,426.20	\$0.00	\$1,659.30	\$24.00	\$61,780.45
Practice - BP Test Practice					\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$33.00	\$3.00	\$33.00	
Practice - BP Test Practice percentage								0.00%	0.00%	0.00%	100.00%			
Dr Dave Best					\$7,281.05	\$0.00	\$7,281.05	\$997.35	\$8,952.50	\$1,069.10	\$0.00	\$138.00	\$0.00	\$11,176.95
Payment created date: 01/11/2012					\$47.00	\$0.00	\$47.00	\$236.35	\$1,216.05	\$694.50	\$0.00	\$0.00	\$0.00	\$2,146.90
194874	18/10/2012	Emily Patient	Patient, Emily	Practice Disc	\$0.00		\$114.00						\$114.00	
194875	18/10/2012	Emily Patient	Patient, Emily	Practice Disc	\$0.00		\$75.35						\$75.35	
195441	23/10/2012	Colin Patient	Medicare Australia	Medicare	\$0.00			\$44.50					\$44.50	
196172	30/10/2012	Klaus Patient	Dept. of Veterans Affairs	DVA	\$0.00			\$306.95					\$306.95	
196181	30/10/2012	Janice Patient	Medicare Australia	Medicare	\$0.00			\$25.20					\$25.20	
196204	30/10/2012	Mary Patient	Medicare Australia	Medicare	\$0.00			\$201.00					\$201.00	
196213	30/10/2012	Jason Patient	Medicare Australia	Medicare	\$0.00			\$44.50					\$44.50	
196216	30/10/2012	Lorraine Patient	Medicare Australia	Medicare	\$0.00			\$201.00					\$201.00	
196219	30/10/2012	Florence Patient	Dept. of Veterans Affairs	DVA	\$0.00			\$29.20					\$29.20	

Inv. No.	Inv. Date	Patient Name	Billed to	Schedule	Total Fee	EFT	Cash	Cheque	Cr. Card	Dir. Credit	GST in Total	Total Paid		
Item	Inv. Created	Inv. Date	Service Details	Service Fee	GST	Total Fee	Pay. No.	Pay. Date	Pay. Type					
BP Test Location 1					\$44,939.80	\$2.00	\$44,941.80	\$14,819.30	\$4,825.75	\$1,915.50	\$0.00	\$40,219.90	\$24.00	\$61,780.45
Practice - BP Test Practice					\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$33.00	\$3.00	\$33.00	
Dr Dave Best					\$7,281.05	\$0.00	\$7,281.05	\$21.00	\$476.35	\$106.00	\$0.00	\$1,910.55	\$0.00	\$11,176.95
Payment created date: 01/11/2012					\$47.00	\$0.00	\$47.00	\$0.00	\$26.35	\$0.00	\$0.00	\$1,910.55	\$0.00	\$2,146.90
194874	18/10/2012	Emily Patient	Patient, Emily	Practice Disc	\$0.00		\$0.00	\$114.00	\$0.00	\$0.00	\$0.00		\$114.00	
194875	18/10/2012	Emily Patient	Patient, Emily	Practice Disc	\$0.00		\$0.00	\$75.35	\$0.00	\$0.00	\$0.00		\$75.35	
195441	23/10/2012	Colin Patient	Medicare Australia	Medicare	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	\$44.50		\$44.50	
196172	30/10/2012	Klaus Patient	Dept. of Veterans Affairs	DVA	\$0.00		\$0.00	\$0.00	\$0.00	\$306.95			\$306.95	
196181	30/10/2012	Janice Patient	Medicare Australia	Medicare	\$0.00		\$0.00	\$0.00	\$0.00	\$25.20			\$25.20	
196204	30/10/2012	Mary Patient	Medicare Australia	Medicare	\$0.00		\$0.00	\$0.00	\$0.00	\$201.00			\$201.00	
196213	30/10/2012	Jason Patient	Medicare Australia	Medicare	\$0.00		\$0.00	\$0.00	\$0.00	\$44.50			\$44.50	

Notes on usage

Service totals only include those services **paid** in the period and will not reflect the total services **created** within the period.

Pay providers on services paid for, based on item numbers

Which reports should I use?

Reports for paying providers by services paid for, using item numbers
Payments - by Account Type (grouped by item) including related services
Payments - by Account Type (grouped by item and schedule)

What do these reports show?

The 'grouped by item' versions will group by item rather than payment created date. For example, this type of report would show totals paid for an item 23 across all account types.

'Grouped by item and schedule' will group by schedule first, and then items underneath the schedule. This type of report can be useful if you pay your providers a different rate based on the schedule on the invoice.

Examples

Payments by Account Type (grouped by item)										BP Test Practice				
Inv. No.	Inv. Date	Patient Name	Billed to	Schedule	Total Fee		Private	Medicare	D.V.A.	Workover	Other	GST In	Total Paid	
1/09/09	Svc. Created	Svc. Date	Service Details	Service Fee	GST	Total Fee	Paj. No.	Paj. Date	Paj. Type			Total		
<input type="checkbox"/> BP Test Location 1					\$44,939.80	\$2.00	\$44,941.80							
<input type="checkbox"/> Practice - BP Test Practice					\$0.00	\$0.00	\$0.00					\$33.00	\$33.00	
<input type="checkbox"/> Custom: Medical Report for Insurance Purposes					\$0.00	\$0.00	\$0.00					\$33.00	\$33.00	
Practice - BP Test Practice percentage								0.00%	0.00%	0.00%	0.00%	100.00%		
<input type="checkbox"/> Dr Dave Best					\$7,281.05	\$0.00	\$7,281.05							
<input type="checkbox"/> Custom: A&O Workover Level B Consultation					\$0.00	\$0.00	\$0.00	\$997.35	\$8,952.50	\$1,069.10	\$0.00	\$138.00	\$0.00	\$11,176.95
<input type="checkbox"/> Item : 3 Surgery consultation, Level A					\$218.30	\$0.00	\$218.30	\$0.00	\$0.00	\$0.00	\$0.00	\$138.00	\$138.00	
<input type="checkbox"/> Item : 23 Surgery consultation, Level B					\$1,890.05	\$0.00	\$1,890.05	\$0.00	\$297.00	\$37.85	\$0.00	\$0.00	\$334.85	
<input type="checkbox"/> Item : 24 Hospital Visit, Level B, 2 patients					\$0.00	\$0.00	\$0.00	\$723.00	\$1,837.30	\$123.55	\$0.00	\$0.00	\$2,683.95	
<input type="checkbox"/> Item : 35 Nursing Home consultation, Level B, 2 patients					\$231.00	\$0.00	\$231.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$75.35	
<input type="checkbox"/> Item : 36 Surgery consultation, Level C					\$505.80	\$0.00	\$505.80	\$0.00	\$154.20	\$98.80	\$0.00	\$0.00	\$231.00	
<input type="checkbox"/> Item : 37 Hospital Visit, Level C, 2 patients					\$0.00	\$0.00	\$0.00	\$85.00	\$450.80	\$0.00	\$0.00	\$0.00	\$535.80	
<input type="checkbox"/> Item : 43 Nursing Home consultation, Level C, 2 patients					\$319.35	\$0.00	\$319.35	\$82.00	\$0.00	\$0.00	\$0.00	\$0.00	\$82.00	
<input type="checkbox"/> Item : 787 Health Assessment, Prolonged, 787 unrelated to					\$527.10	\$0.00	\$527.10	\$0.00	\$319.35	\$0.00	\$0.00	\$0.00	\$319.35	
<input type="checkbox"/> Item : 721 GP management plan, item 23,721 & 723 not dupli					\$555.50	\$0.00	\$555.50	\$0.00	\$527.10	\$0.00	\$0.00	\$0.00	\$527.10	
<input type="checkbox"/> Item : 723 Team care arrangement, item 23,721 & 723 not du					\$448.20	\$0.00	\$448.20	\$0.00	\$704.35	\$319.20	\$0.00	\$0.00	\$1,023.55	
<input type="checkbox"/> Item : 732 Review of GP Management Plan or Team Care Arran					\$1,434.20	\$0.00	\$1,434.20	\$0.00	\$555.15	\$252.90	\$0.00	\$0.00	\$811.05	
<input type="checkbox"/> 195188 30/10/2012 Sonia Patient Medicare Australia Medicare					\$0.00								\$138.70	
<input type="checkbox"/> 195204 30/10/2012 Mary Patient Medicare Australia Medicare					\$0.00								\$138.70	
<input type="checkbox"/> 195215 30/10/2012 Lomane Patient Medicare Australia Medicare					\$0.00								\$138.70	

Notes on usage

Service totals only include those services **paid** in the period and will not reflect the total services **created** within the period.

Pay providers on services billed, based on item numbers

Which reports should I use?

Reports for paying providers by services paid for, using item numbers
Services - by Account Type (grouped by item)
Services – by Account Type (grouped by service created and item)
Services - by Account Type (grouped by item and schedule)
Services Summary – by Account Type (grouped by item)
Services Summary – by Account Type (grouped by service created and item)

What do these reports show?

The 'grouped by item' versions will group by item rather than service created date. For example, this type of report would show totals billed (invoice created) for an item 23 across all account types.

'Grouped by item and schedule' will group by schedule first, and then items underneath the schedule. This type of report can be useful if you pay your providers a different rate based on the schedule on the invoice.

Bulk bill practices that pay providers on services paid by Medicare and DVA

Which reports should I use?

Reports for paying providers by Medicare and DVA services paid
Online Claiming - Paid Services by Payment Run Number
Online Claiming - Paid Services by Batch Number

What do these reports show?

The 'Paid Services by Payment run number' report groups batches by payment run number, for easy comparison with deposits on a bank statement

The 'Paid Services by Batch number' report groups batches by provider, then batch number, for easy calculation of amounts paid per provider.

Totals are provided for Medicare and for DVA by grouping level, such as location. Each batch can be expanded to show the paid invoices and services .

Examples

Online Claiming - Paid Services by Payment Run number								BP Test Practice			
Inv. No.	Inv. Date		Patient Name		Fee Claimed	Pay			Medicare	D.V.A.	Total Paid
	Srv Created	Srv Date	Service Details	Pay No.		Pay Run Date	Pay Date				
<input type="checkbox"/> BP Test Location 1								\$35,546.60	\$4,426.20	\$39,972.80	
<input type="checkbox"/> Payment Run Number: 277 - 01/11/2012								\$5,953.95	\$0.00	\$5,953.95	
<input type="checkbox"/> Batch No.: L9628 Date: 31/10/2012 Dr Rick Doctor								\$1,919.00	\$0.00	\$1,919.00	
<input type="checkbox"/> Batch No.: L9629 Date: 31/10/2012 Dr Dave Best								\$1,216.05	\$0.00	\$1,216.05	
<input type="checkbox"/> Batch No.: L9630 Date: 31/10/2012 Dr Don France								\$626.60	\$0.00	\$626.60	
<input type="checkbox"/> Batch No.: L9631 Date: 31/10/2012 Dr Kate Hamond								\$445.70	\$0.00	\$445.70	
<input type="checkbox"/> Batch No.: L9632 Date: 31/10/2012 Dr Alan Hodgjes								\$842.80	\$0.00	\$842.80	
<input type="checkbox"/> Batch No.: L9633 Date: 31/10/2012 Dr Bruce Lucas								\$183.20	\$0.00	\$183.20	
<input type="checkbox"/> Batch No.: L9634 Date: 31/10/2012 Dr Malcolm Palmer								\$720.60	\$0.00	\$720.60	
<input type="checkbox"/> Payment Run Number: 278 - 02/11/2012								\$6,371.80	\$0.00	\$6,371.80	

Online Claiming - Paid Services by Batch number								BP Test Practice			
Inv. No.	Inv. Date		Patient Name		Fee Claimed	Pay			Medicare	D.V.A.	Total Paid
	Srv Created	Srv Date	Service Details	Pay No.		Pay Date	Pay Run Date	Pay Run Num.			
<input type="checkbox"/> BP Test Location 1								\$35,546.60	\$4,426.20	\$39,972.80	
<input type="checkbox"/> Dr Dave Best								\$8,952.50	\$1,089.10	\$10,041.60	
<input type="checkbox"/> Batch No.: L9629 Date: 31/10/2012								\$1,216.05	\$0.00	\$1,216.05	
<input type="checkbox"/> 195441	23/10/2012	23/10/2012	Colin Patient					\$44.50	\$0.00	\$44.50	
<input type="checkbox"/> 23	23/10/2012	23/10/2012	Surgeryconsultation, Level B	\$35.60	82344	01/11/2012	01/11/2012	\$35.60	\$0.00	\$35.60	
<input type="checkbox"/> 10991	23/10/2012	23/10/2012	Direct-Billing Incentive	\$8.90	82344	01/11/2012	01/11/2012	\$8.90	\$0.00	\$8.90	
<input type="checkbox"/> 196181	30/10/2012	30/10/2012	Janice Patient					\$25.20	\$0.00	\$25.20	
<input type="checkbox"/> 196204	30/10/2012	30/10/2012	Mary Patient					\$201.00	\$0.00	\$201.00	
<input type="checkbox"/> 196213	30/10/2012	30/10/2012	Jason Patient					\$44.50	\$0.00	\$44.50	
<input type="checkbox"/> 196216	30/10/2012	30/10/2012	Lorraine Patient					\$201.00	\$0.00	\$201.00	
<input type="checkbox"/> 196242	30/10/2012	30/10/2012	Belinda Patient					\$44.50	\$0.00	\$44.50	
<input type="checkbox"/> 196252	30/10/2012	30/10/2012	Fred Patient					\$44.50	\$0.00	\$44.50	
<input type="checkbox"/> 196253	30/10/2012	30/10/2012	Lola Patient					\$16.30	\$0.00	\$16.30	
<input type="checkbox"/> 196266	30/10/2012	30/10/2012	Diane Patient					\$154.95	\$0.00	\$154.95	
<input type="checkbox"/> 196275	30/10/2012	30/10/2012	Henry Patient					\$44.50	\$0.00	\$44.50	
<input type="checkbox"/> 196287	30/10/2012	30/10/2012	Patricia Patient					\$44.50	\$0.00	\$44.50	

Notes on usage

The Paid Services by Payment Run Number report is ideal for use to reconcile against bank statements. The grouping of payments by payment run number and payment should correspond with deposits appearing in the bank statement.

The payment run date and payment date shown is the date that Medicare indicated the payment was made into the bank account. The date of deposit is **not** usually the payment created date that the user performed the **Check for Payments** in Bp Premier, which is the date used in the report. Therefore, this report will tie up with the Payment or Transaction reports for the same date ranges but some Payment Runs that appear on your bank statement may not appear on this report if those batches were updated in Bp Premier after the end date for the report.

Pay providers using a combination of methods

Most practices have both principal and employee providers on staff who are often paid using different criteria. **Transaction Reports** combine services and payments on one report.

While transaction reports do not have columns for Payment Type or Account type, the reports provide a comprehensive view of all services and payments across the report range on a single report.

Which reports should I use?

Reports for paying providers using a combination of methods
Transaction Report (grouped by service created date)
Transaction Report (grouped by payment created date)
Transaction Summary Report (grouped by payment created)
Transaction Report (grouped by item)
Transaction Report (grouped by item and schedule)

The 'grouped by service created date', 'grouped by payment created date', and 'grouped by item and schedule' variations of the Transactions reports will group records the same way as the different versions of the Services or Payments reports.

Examples

Transaction Report (grouped by service created date)										BP Test Practice		
Inv. No.	Inv. Date	Patient Name		Billed to		Schedule	Total Fee		Total	GST Paid	Total Paid	
Provider	Srv. Created	Srv. Date	Service Details	Service Fee	GST	Total Fee	Payment Date	Payment No.	Payment Type			
BP Test Location 1				\$60,063.95	\$23.05	\$60,087.00				\$61,756.45	\$24.00	\$61,780.45
Practice - BP Test Practice				\$0.00	\$0.00	\$0.00				\$30.00	\$3.00	\$33.00
Dr Dave Best				\$11,791.00	\$0.00	\$11,791.00				\$11,176.95	\$0.00	\$11,176.95
Service created date: 25/09/2012				\$0.00	\$0.00	\$0.00				\$69.00		\$69.00
Service created date: 19/10/2012				\$0.00	\$0.00	\$0.00				\$258.35		\$258.35
Service created date: 23/10/2012				\$0.00	\$0.00	\$0.00				\$128.20		\$128.20
Service created date: 30/10/2012				\$0.00	\$0.00	\$0.00				\$2,067.05		\$2,067.05
Service created date: 31/10/2012				\$0.00	\$0.00	\$0.00				\$1,373.30		\$1,373.30
Service created date: 01/11/2012				\$2,001.00		\$2,001.00				\$2,567.00	\$0.00	\$2,567.00
Service created date: 02/11/2012				\$182.40		\$182.40				\$182.40		\$182.40
Service created date: 05/11/2012				\$2,318.80		\$2,318.80				\$2,318.80		\$2,318.80
Service created date: 06/11/2012				\$2,057.25		\$2,057.25				\$2,011.85	\$0.00	\$2,011.85
Service created date: 07/11/2012				\$2,789.65		\$2,789.65				\$154.00	\$0.00	\$154.00
Service created date: 08/11/2012				\$1,841.90	\$0.00	\$1,841.90				\$47.00	\$0.00	\$47.00
197404	08/11/2012	Ferdinand Patient	Medicare Australia		Medicare	\$25.70				\$25.70		\$25.70
197409	08/11/2012	Jeffrey Patient	Unknown		AMA Reconn	\$69.00				\$69.00		\$69.00
197418	08/11/2012	Lewis Patient	Medicare Australia		Medicare	\$317.05				\$317.05		\$317.05

Transaction Report (grouped by payment created date)

BP Test Practice

Inv. No.	Inv. Date	Patient Name	Billed to	Schedule	Total Fee	Payment Date	Payment No.	Payment Type	Total	GST Paid	Total Paid
Srv. Created	Srv. Date	Service Details	Service Fee	GST	Total Fee						
BP Test Location 1			\$38,884.85	\$0.00	\$38,884.85				\$38,972.80	\$0.00	\$38,972.80
Dr Dave Best			\$10,811.00	\$0.00	\$10,811.00				\$10,041.00	\$0.00	\$10,041.00
Payment created date: 01/11/2012			\$0.00	\$0.00	\$0.00				\$1,910.55	\$0.00	\$1,910.55
Payment created date: 02/11/2012			\$16,294.40	\$0.00	\$423.30				\$2,036.80	\$0.00	\$2,036.80
Payment created date: 05/11/2012			\$109,201.20	\$0.00	\$2,096.70				\$2,141.20	\$0.00	\$2,141.20
195400	23/10/2012	Waren Patient	Medicare Australia	Medicare	\$106.55				\$231.05		\$231.05
195824	09/11/2012	John Patient	Medicare Australia	Medicare	\$16.80				\$16.80		\$16.80
195833	09/11/2012	Kim Patient	Medicare Australia	Medicare	\$236.90				\$236.90		\$236.90
195837	09/11/2012	Michael Patient	Medicare Australia	Medicare	\$159.50				\$159.50		\$159.50
195848	09/11/2012	Hilda Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195849	09/11/2012	Fay Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195859	09/11/2012	George Patient	Medicare Australia	Medicare	\$544.30				\$544.30		\$544.30
195872	09/11/2012	Helen Patient	Medicare Australia	Medicare	\$25.70				\$25.70		\$25.70
195874	09/11/2012	Keith Patient	Medicare Australia	Medicare	\$271.65				\$271.65		\$271.65
195875	09/11/2012	Mabel Patient	Medicare Australia	Medicare	\$159.50				\$159.50		\$159.50
195880	09/11/2012	Karen Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195882	09/11/2012	Iris Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195883	09/11/2012	Nadine Patient	Medicare Australia	Medicare	\$25.70				\$25.70		\$25.70
195886	09/11/2012	Iris Patient	Medicare Australia	Medicare	\$25.70				\$25.70		\$25.70
195897	09/11/2012	Helen Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195904	09/11/2012	Frank Patient	Medicare Australia	Medicare	\$79.40				\$79.40		\$79.40
195905	09/11/2012	Waren Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195906	09/11/2012	Beverley Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
195911	09/11/2012	Margaret Patient	Medicare Australia	Medicare	\$45.40				\$45.40		\$45.40
Payment created date: 06/11/2012			\$1,366.80	\$0.00	\$227.80				\$227.80	\$0.00	\$227.80
Payment created date: 07/11/2012			\$116,733.20	\$0.00	\$1,995.40				\$1,995.40	\$0.00	\$1,995.40
Payment created date: 08/11/2012			\$94,762.05	\$0.00	\$1,729.85				\$1,729.85	\$0.00	\$1,729.85
Payment created date: 13/11/2012			\$216,165.05	\$0.00	\$2,592.35				\$0.00	\$0.00	\$0.00

Transaction Report (grouped by item)

BP Test Practice

Inv. No.	Inv. Date	Patient Name	Billed to	Schedule	Total Fee	Count	Total	GST Paid	Total Paid
Srv. Created	Srv. Date	Service Details	Count	Service Fee	GST	Total Fee	Pay. Date	Pay. No.	Pay. Type
BP Test Location 1			1382	\$60,863.95	\$23.05	\$60,887.00			
Practice - Practice - BP Test Practice			0	\$0.00	\$0.00	\$0.00			
Dr Dave Best			320	\$11,791.00	\$0.00	\$11,791.00			
Custom: AAQ20 Workover Level B Consultation			2	\$138.00	\$0.00	\$138.00			
Custom: AAQ10 Workover Level A Consultation			1	\$34.00	\$0.00	\$34.00			
Item : 3 Surgery consultation, Level A			24	\$405.90	\$0.00	\$405.90			
Item : 23 Surgery consultation, Level B			72	\$2,803.00	\$0.00	\$2,803.00			
Item : 24 Hospital Visit, Level B, 2 patients			0	\$0.00	\$0.00	\$0.00			
194875 18/10/2012 Emily Patient			Patient, Emily	Practice Disc	\$0.00				
Item : 35 Nursing Home consultation, Level B, 1 patient			12	\$710.70	\$0.00	\$710.70			
195820 01/11/2012 Joyce Patient			Dept. of Veterans Affairs	DVA	\$68.80				
195713 02/11/2012 Connie Patient			Medicare Australia	Medicare	\$82.10				
195766 02/11/2012 Connie Patient			Medicare Australia	Medicare	\$82.10				
197309 07/11/2012 Arthur Patient			Medicare Australia	Medicare	\$59.20				
							\$59.20	\$0.00	\$59.20

Count Health Summary Uploads

As part of the reporting requirements for PIP eHealth Incentive eligibility, practices will calculate the number of Shared Health Summaries uploaded to My Health Record. To assist this, Bp Premier provided a new **Shared Health Summaries - Uploaded** report in the February 2019 Data Update that provides information on uploads, broken down by location.

However, the Bp Premier user who is creating and uploading the shared health summary **must** also ensure he or she saves the upload as a visit before closing the patient record. If the user opens the patient record, uploads the health summary, and skips saving the visit when prompted, the Shared Health Summaries Uploaded report will **not** include the upload in its count.

If your practice workflow and configuration settings allow for a provider or nurse to open and close a patient record without recording a visit, the Shared Health Summaries Uploaded report may not accurately report how many shared health summaries you have uploaded by location.

If this applies to your practice, you can use a database search query to accurately calculate how many health summaries have been uploaded for a date range. Select **Utilities > Search** from the main menu to open the Database Search utility and run the following query.

All active patients with a shared health summary uploaded within the date range

```
SELECT *
FROM bps_patients p
WHERE statustext = 'active'
AND internalid IN (SELECT InternalID
FROM pcehrdocuments
WHERE recordstatus = 1
AND documenttype = 1
AND documentdate between '20180701' and '20181231') /* change the dates in this line to the dates you
want using format YYYYMMDD */
ORDER BY surname, firstname
```

The number of matching records is shown in the Database Search window above the list of results.