



# Payment Posting Guide

Kareo Desktop Application (PM)

Updated: March 2023

# Introduction

Kareo Billing subscribers have access to both the Kareo Desktop Application (PM) and the Billing module in the Kareo Web Platform. The Payment Posting Guide will go over how the Payments feature of the Kareo Desktop Application (PM) enables you to easily enter, apply, and manage payments. This guide is designed to provide instructions for all user types. To complete your designated task(s), use the [Table of Contents](#) to navigate to the respective section(s) of the guide for instructions. If you don't have access to a specific task or function described within the payment topics of this guide, please contact the person in your office who is a System Administrator for Kareo.

# Table of Contents

Payment Posting .....	5
Manual Payment Posting .....	5
Enter General Payment Information .....	5
Apply Payment.....	11
Automatic Payment Posting.....	19
Post Electronic Remittance Advice (ERA) Payment .....	19
Additional Payment Posting Scenarios .....	24
Payment Reversals .....	24
Reverse Patient Payment .....	24
Reverse Insurance Payment .....	27
Payment Refunds .....	31
New Single Payment Refund .....	31
New Multiple Payment Refund .....	33
Insurance Denials .....	35

Manually Post Claim Denial .....	35
Adjustments .....	39
Post Adjustment on Payment Record .....	39
Post Adjustment on Claim Record .....	41
Learn More .....	44
Help Center .....	44
Kareo University .....	44
Guides .....	44

# Payment Posting

The Payments feature of Kareo enables you to easily enter, apply, and manage payments. Once patient, insurance, and other Payment records are created, you can view the complete log of all financial transactions to find, edit, or delete the payments when necessary. For more information about how to find, edit, and delete payments, review the [Payment Records](#) help article.

There are two ways to post payments:

- **Manual Payment Posting:** Payments received in person or by mail from patients (e.g., cash, card payments, electronic checks), insurance companies (e.g., paper provider remittance advices) and other payers are posted manually.
- **Automatic Payment Posting:** Payments received electronically and reported in an Electronic Remittance Advice (ERA) can be posted automatically.

## Manual Payment Posting

Payments received in person or by mail from patients (e.g., cash, card payments, electronic checks), insurance companies (e.g., paper provider remittance advices) and other payers are posted manually. There are essentially two steps to manual payment posting. First, the general information about the payment is entered. Then, the appropriate amounts of the payment are applied to the corresponding service lines.


### Enter General Payment Information

The first step to manually post a payment is to enter the information about the payment under the General tab of the Payment record. The following sections provide the available workflows for entering the general information for payments received from patients, insurances, and other payers.


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## Enter Payment from Patient

You can easily record or swipe a card to enter patient payments for copays and outstanding patient balances. There are several ways to create a new Payment record and the best workflow(s) for your practice depends on the practice's processes and enabled features.

- To create a new Payment record via the patient's record or appointment, review the [Collect Patient Payment](#) help article.  
 Note: This recommended workflow displays the patient's balance for review, has the option to save or use a credit card on file, and not only print a payment receipt but email it as well.
- For Kareo Patient Collect (KPC) powered by Stripe enabled customers, review the [KPC Powered by Stripe: Collect Patient Payment](#) help article.
- To directly create a Payment record for the patient payment, review the [Enter Payment from Insurance, Other Payer, or Patient](#) section.
- To create a Payment record by entering the patient payment information on a new encounter, review the *New Encounter Patient Payment* section of the [Enter Patient Payment](#) help article.

## Enter Payment from Insurance

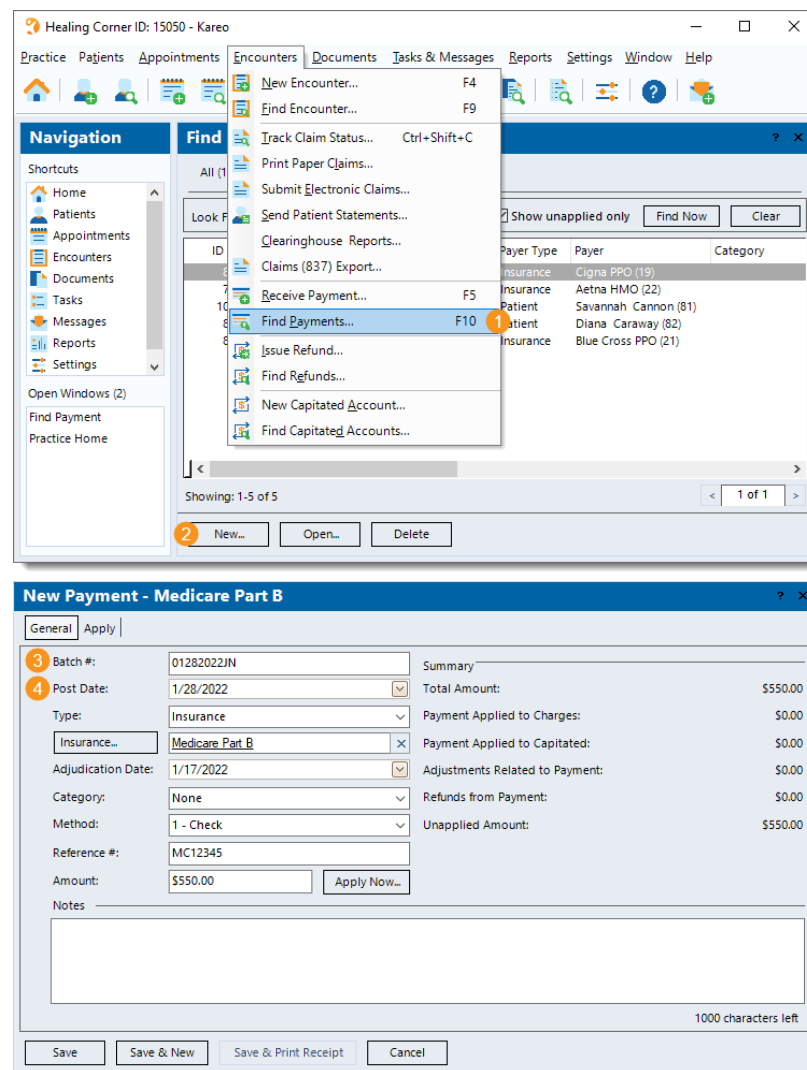
- To create Payment records for payments received in person or by mail (e.g., paper provider remittance advices) from insurance companies, review the [Enter Payment from Insurance, Other Payer, or Patient](#) section.  
 Note: When manually posting primary insurance payments, ensure all applicable payment information is entered and correct to prevent secondary electronic claim rejections for transferred balances.

## Enter Payment from Other Payer

- To create a Payment record for payments received from other payers (e.g., attorney, employer), review the [Enter Payment from Insurance, Other Payer, or Patient](#) section.


## Enter Payment from Insurance, Other Payer, or Patient

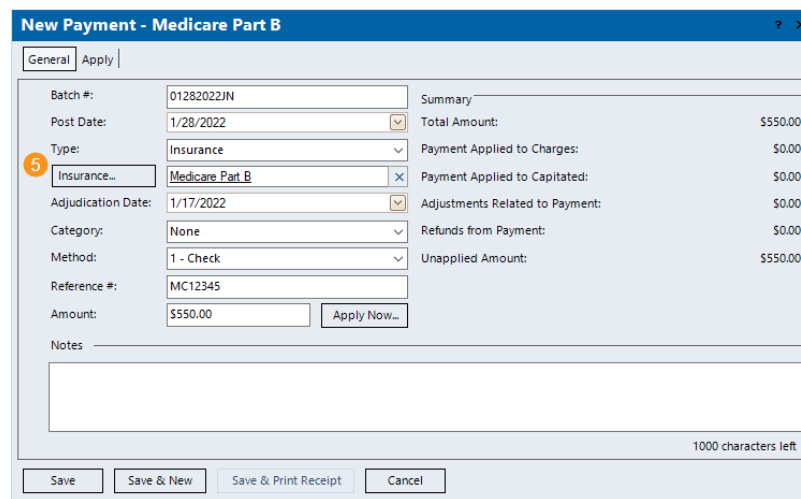
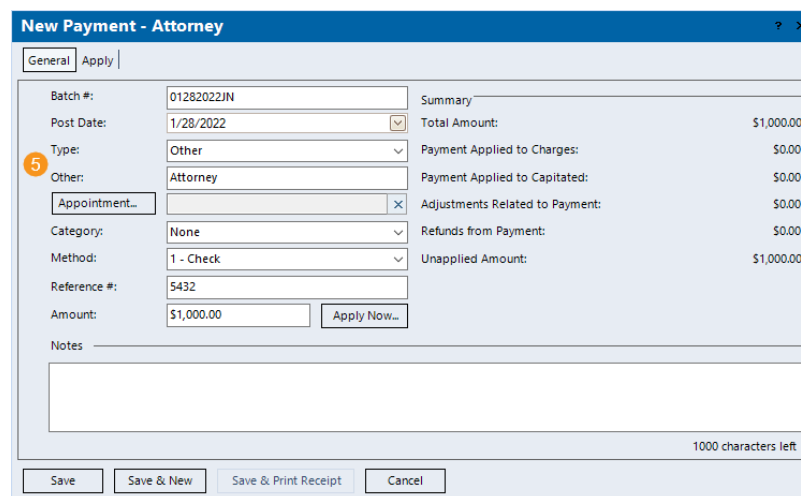
1. On the top menu bar, click **Encounters > Find Payments**. The *Find Payment* window opens.  
💡 Tip: For faster navigation, press F10 on your keyboard.
2. To prevent duplication, verify the payment is not in the system. Then, click **New**. The *New Payment* window opens.  
💡 Note: To ensure the payment is not already in the system, select the *All* tab and click to deselect "Show unapplied only" when searching for the record. For more information about how to find a Payment record, review the [Find Payment](#) section of the [Payment Records](#) help article.
3. **Batch #:** If applicable, enter a batch number for the payment.  
💡 Tip: Batch numbers are helpful for running reports when there is a consistent naming convention such as the posting date with the user's initials (e.g., MMDDYYYYAB). Then, when running a report (e.g., Payments Detail), customize and filter by that specific batch number.
4. **Post Date:** Defaults to the current date. If necessary, enter a different posting date for the payment.



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Enter Payment from Insurance, Other Payer, or Patient, cont.

5. **Type:** Select one of the following types of payment received (e.g., *Insurance*, *Other*, *Patient*). Additional options display depending on the selected type.
  - **Insurance:** Selected by default. To create a new record for a payment received from the insurance company, keep *Insurance* selected. Then, click **Insurance** to search and select the appropriate payer and enter the *Adjudication Date*.
    -  Note: The adjudication date is provided on the paper remittance advice (RA) which indicates the date the payer processed the claim(s).
  - **Other:** To create a new record for a payment received from another source (e.g., attorney, employer), click the **drop-down arrow** and select *Other*. Then, enter the *Other* source of payment.
    - If applicable, click **Appointment** to search and select the appropriate patient appointment related to the payment.

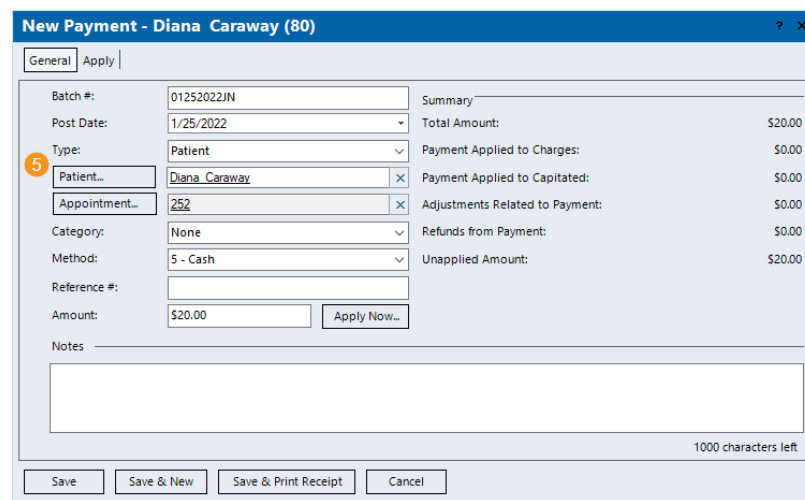
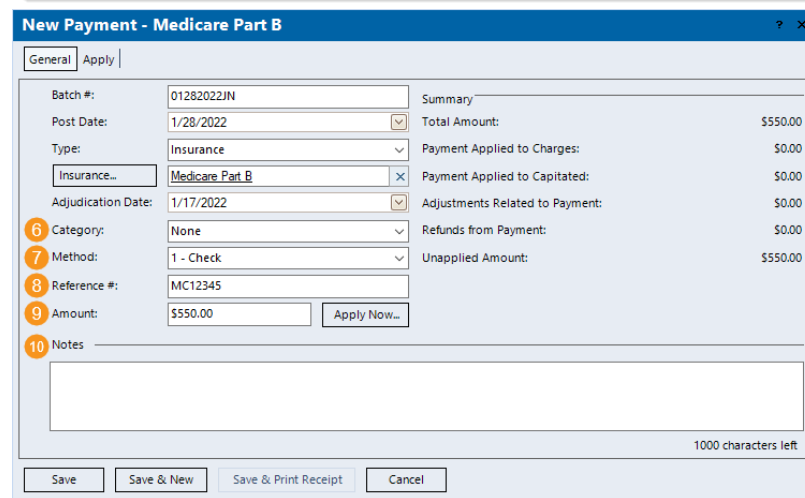
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Enter Payment from Insurance, Other Payer, or Patient, cont.

- **Patient:** To create a new record for a payment received from a patient, click the **drop-down arrow** and select **Patient**. Then, click **Patient** to search and select the appropriate patient.
  - If applicable, click **Appointment** to search and select the appropriate patient appointment related to the payment.

6. **Category:** If the practice uses categories for certain payment reports, click the **drop-down arrow** and select the appropriate category. For more information about categories, review the [Categories](#) help article.
7. **Method:** Click the **drop-down arrow** to select how the payment is being made.
8. **Reference #:** If applicable, enter the reference number for the payment (e.g., check number, authorization number).
9. **Amount:** Enter the total amount of the payment.
10. **Notes:** Enter any internal notes related to the payment.

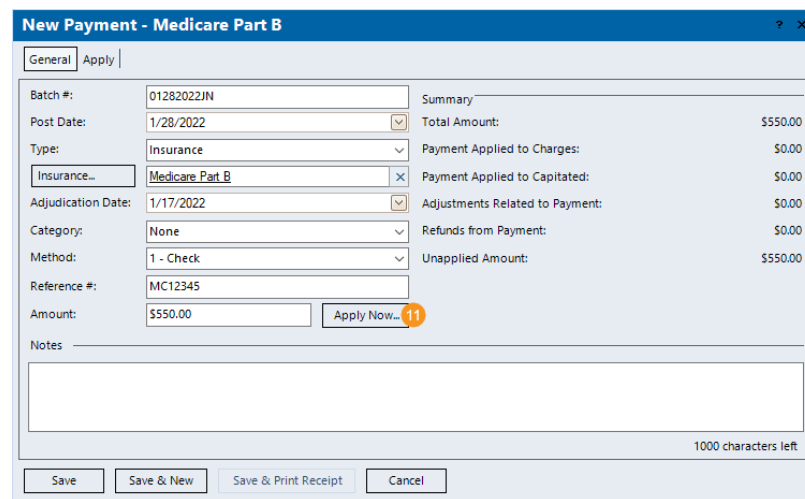



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Enter Payment from Insurance, Other Payer, or Patient, cont.

11. When finished, click **Apply Now** and refer to the [Apply Payment](#) section to apply the payment.

- To save the Payment record without applying the payment, click **Save**. A confirmation pop-up appears then click **Yes** to continue without applying the payment. When ready to apply the payment, refer to the [Apply Payment](#) section.
- To save and print a receipt for a patient's Payment record without applying the payment, click **Save & Print Receipt**. A confirmation pop-up appears, click **Yes** to continue without applying the payment then print the receipt using the computer's print function. When ready to apply the payment, refer to the [Apply Payment](#) section.



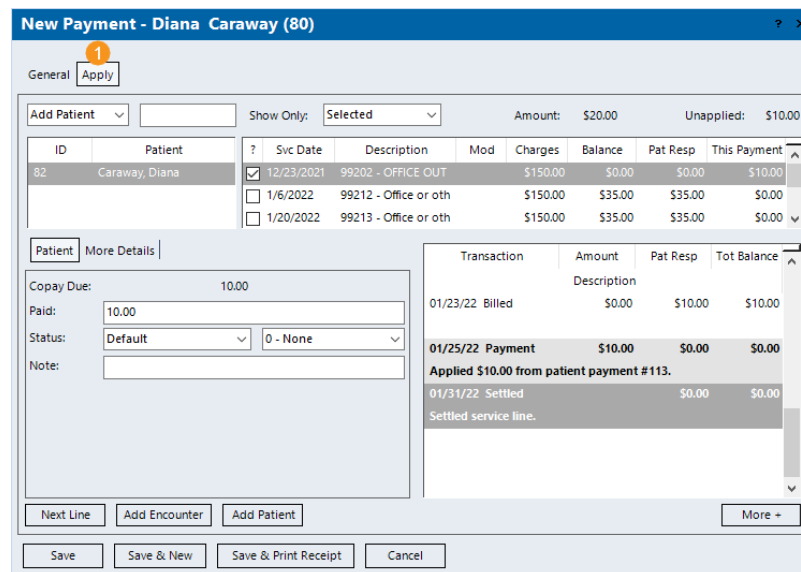
## Apply Payment

The second step to manually post a payment is to apply the appropriate amount(s) of the payment to the corresponding service line(s). The following sections provide instructions for applying patient, insurance, and other payments.

### Apply Payment from Patient or Other Payer

Once the *General* tab information for a payment from the patient or other payer is entered, follow the steps below to manually apply the payment amount(s) to the corresponding service line(s).

- On the *Apply* tab of the payment, use the top options to add a patient or an encounter. If necessary, select the *Apply* tab or click **Apply Now** and the *Apply* tab opens.
  - If the payment is not currently open, find the payment then double click to open it. For more information about how to find a Payment record, review the *Find Payment* section of the [Payment Records](#) help article.
  - If the payment has not yet been entered, refer to the [Enter Payment from Patient](#) section for patient payments, or the [Enter Payment from Other Payer](#) section for other payments.



**New Payment - Diana Caraway (80)**

General **Apply**

Add Patient:  Show Only:  Amount: \$20.00 Unapplied: \$10.00

ID	Patient	? Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Payment
82	Caraway, Diana	<input checked="" type="checkbox"/> 12/23/2021	99202 - OFFICE OUT		\$150.00	\$0.00	\$0.00	\$10.00
		<input type="checkbox"/> 1/6/2022	99212 - Office or oth		\$150.00	\$35.00	\$35.00	\$0.00
		<input type="checkbox"/> 1/20/2022	99213 - Office or oth		\$150.00	\$35.00	\$35.00	\$0.00

Patient More Details

Copay Due: 10.00

Paid:  10.00

Status:  Default  0 - None

Note:

Transaction Amount Pat Resp Tot Balance

01/23/22 Billed \$0.00 \$10.00 \$10.00

01/25/22 Payment \$10.00 \$0.00 \$0.00

Applied \$10.00 from patient payment #113.

01/31/22 Settled \$0.00 \$0.00

Settled service line.

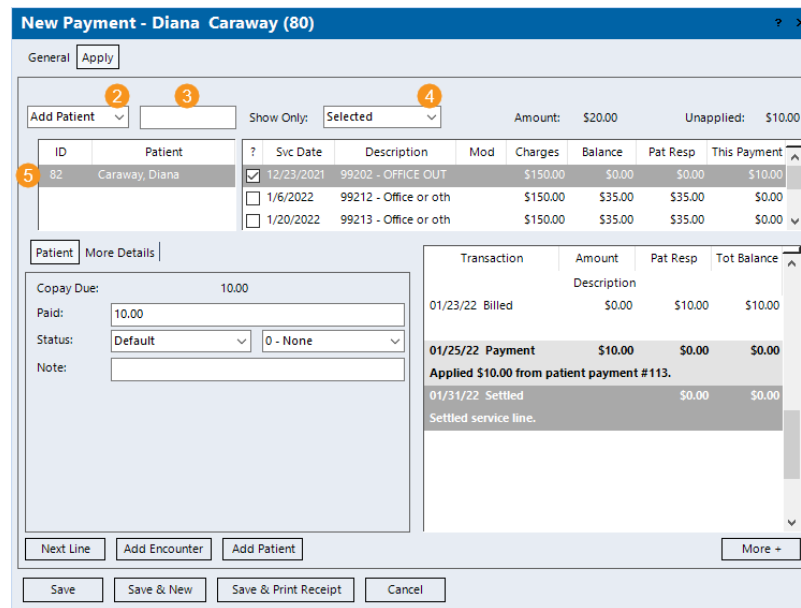
Next Line Add Encounter Add Patient More +

Save Save & New Save & Print Receipt Cancel

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## Apply Payment from Patient or Other Payer, cont.

2. **Add Patient:** Selected by default. To add service lines by encounter ID instead, click the **drop-down arrow** and select *Add Encounter*.  
 ⓘ Note: For patient payments, the *Patient* entered on the *General* tab is automatically added and all open service lines associated with the patient are listed. When an encounter is added, all service lines associated with the encounter will be listed.
3. If necessary, enter the patient's name or encounter ID. Then, press Enter on the keyboard. The service lines are listed.
  - 💡 Tip: When adding an encounter, enter the encounter ID + Z (e.g., 176Z) to quickly add the appropriate record and avoid having to search and select it.
  - If the *Find Patient* or *Select Encounter* window opens, search and select the appropriate record.
4. **Show Only:** Defaults to *Selected*. If necessary, click the **drop-down arrow** to select to list *All*, *Open*, *Settled*, or *Negative Balances* service lines.
5. Click to select the patient and/or service line the payment amount needs to be applied to.



**New Payment - Diana Caraway (80)**

General Apply

Add Patient  Show Only: Selected Amount: \$20.00 Unapplied: \$10.00

ID	Patient	? Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Payment
82	Caraway, Diana	<input checked="" type="checkbox"/> 12/23/2021	99202 - OFFICE OUT		\$150.00	\$0.00	\$0.00	\$10.00
		<input type="checkbox"/> 1/6/2022	99212 - Office or oth		\$150.00	\$35.00	\$35.00	\$0.00
		<input type="checkbox"/> 1/20/2022	99213 - Office or oth		\$150.00	\$35.00	\$35.00	\$0.00

Patient More Details

Copay Due: 10.00

Paid: 10.00

Status: Default 0 - None

Note:

Transaction Amount Pat Resp Tot Balance

Transaction	Amount	Pat Resp	Tot Balance
01/23/22 Billed	\$0.00	\$10.00	\$10.00
01/25/22 Payment	\$10.00	\$0.00	\$0.00
Applied \$10.00 from patient payment #113.			
01/31/22 Settled	\$0.00	\$0.00	\$0.00
Settled service line.			

Next Line Add Encounter Add Patient More +

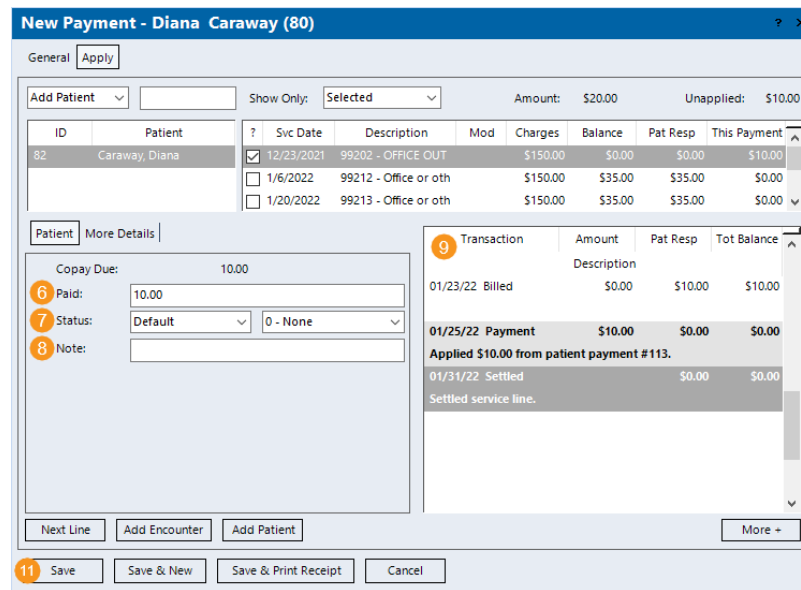
Save Save & New Save & Print Receipt Cancel

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## Apply Payment from Patient or Other Payer, cont.

6. **Paid:** Enter the amount of the payment to apply to the selected service line.
7. **Status:** If there is a remaining balance after the payment amount is applied, click the **drop-down arrow** to select the appropriate status update. Then, enter a reason code if applicable.
8. **Note:** Enter any internal notes related to the payment amount applied that will display when viewing transaction line details on the corresponding Claim record.
9. Verify the posted transaction line(s) on the right side of the window are correct.
 

**Note:** The transaction line(s) in bold are posted under the *Transactions* section of the corresponding Claim record once the payment is saved.
10. To continue applying amounts of the payment, click **Next Line** if the amount should be applied to the next service line listed, or click to select the appropriate service line. Then, repeat steps 6-10 as necessary.
11. When finished applying the appropriate payment amount(s) to the corresponding service line(s), click **Save**.



**New Payment - Diana Caraway (80)**

General Apply

Add Patient: [Dropdown] Show Only: Selected Amount: \$20.00 Unapplied: \$10.00

ID	Patient	? Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Payment
82	Caraway, Diana	<input checked="" type="checkbox"/> 12/23/2021	99202 - OFFICE OUT		\$150.00	\$0.00	\$0.00	\$10.00
		<input type="checkbox"/> 1/6/2022	99212 - Office or oth		\$150.00	\$35.00	\$35.00	\$0.00
		<input type="checkbox"/> 1/20/2022	99213 - Office or oth		\$150.00	\$35.00	\$35.00	\$0.00

Patient More Details

Copay Due: 10.00

6 Paid: 10.00

7 Status: Default 0 - None

8 Note:

9 Transaction Amount Pat Resp Tot Balance

Transaction	Amount	Pat Resp	Tot Balance
01/23/22 Billed	\$0.00	\$10.00	\$10.00
<b>01/25/22 Payment</b>	<b>\$10.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Applied \$10.00 from patient payment #113.</b>			
01/31/22 Settled	\$0.00	\$0.00	\$0.00
Settled service line.			

Next Line Add Encounter Add Patient

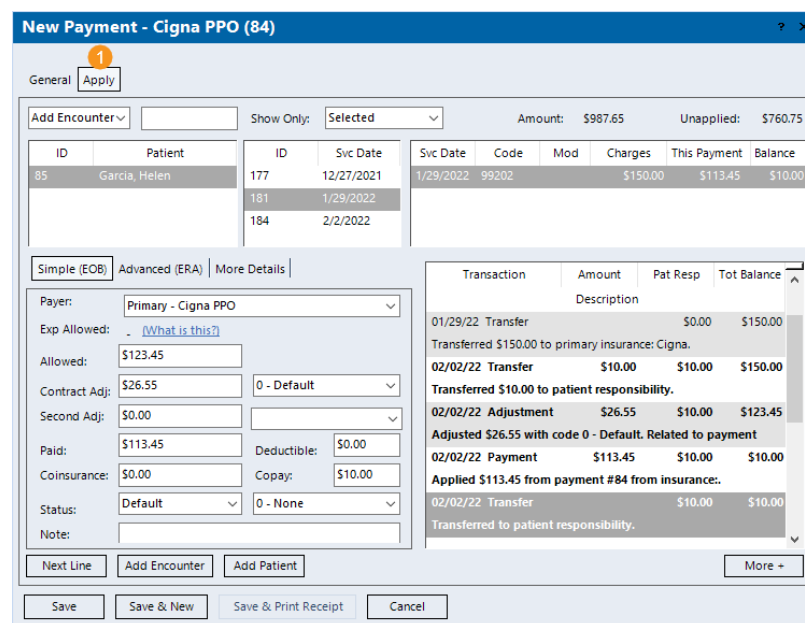
11 Save Save & New Save & Print Receipt Cancel

## Apply Payment from Insurance

Once the *General* tab information for a payment from the insurance company is entered, follow the steps below to manually apply the appropriate amounts of the payment to the corresponding service lines as reported on a paper provider remittance advice (RA) (e.g., explanation of payment, standard paper remittance) or the patient explanation of benefits (EOB).

### Apply Payment from Paper Remittance Advice (RA)

- On the *Apply* tab of the payment, use the top options to add an encounter or a patient. If necessary, select the *Apply* tab or click **Apply Now** and the *Apply* tab opens.
  - If the payment is not currently open, find the payment then double click to open it. For more information about how to find a Payment record, review the *Find Payment* section of the [Payment Records](#) help article.
  - If the payment has not yet been entered, refer to the [Enter Payment from Insurance](#) section.



**New Payment - Cigna PPO (84)**

General **Apply**

Add Encounter:  Show Only:  Amount: \$987.65 Unapplied: \$760.75

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
85	Garcia, Helen	177	12/27/2021	1/29/2022	99202		\$150.00	\$113.45	\$10.00
		181	1/29/2022						
		184	2/2/2022						

Simple (EOB) **Advanced (ERA)** More Details

Payer:  Primary - Cigna PPO

Exp Allowed:  [What is this?](#)

Allowed:  \$123.45

Contract Adj:  \$26.55  0 - Default

Second Adj:  \$0.00

Paid:  \$113.45 Deductible:  \$0.00

Coinurance:  \$0.00 Copay:  \$10.00

Status:  Default  0 - None

Note:

Transaction	Amount	Pat Resp	Tot Balance
01/29/22 Transfer		\$0.00	\$150.00
Transferred \$150.00 to primary insurance: Cigna.			
02/02/22 Transfer	\$10.00	\$10.00	\$150.00
Transferred \$10.00 to patient responsibility.			
02/02/22 Adjustment	\$26.55	\$10.00	\$123.45
Adjusted \$26.55 with code 0 - Default. Related to payment			
02/02/22 Payment	\$113.45	\$10.00	\$10.00
Applied \$113.45 from payment #84 from insurance.			
02/02/22 Transfer		\$10.00	\$10.00
Transferred to patient responsibility.			

Next Line Add Encounter Add Patient

Save Save & New Save & Print Receipt Cancel

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## Apply Payment from Paper RA, cont.

2. **Add Encounter:** Selected by default. To add service lines by patient, click the **drop-down arrow** and select *Add Patient*.

**Note:** When an encounter is added, all service lines associated with the encounter are listed. When a patient is added, all open service lines associated with the patient are listed.

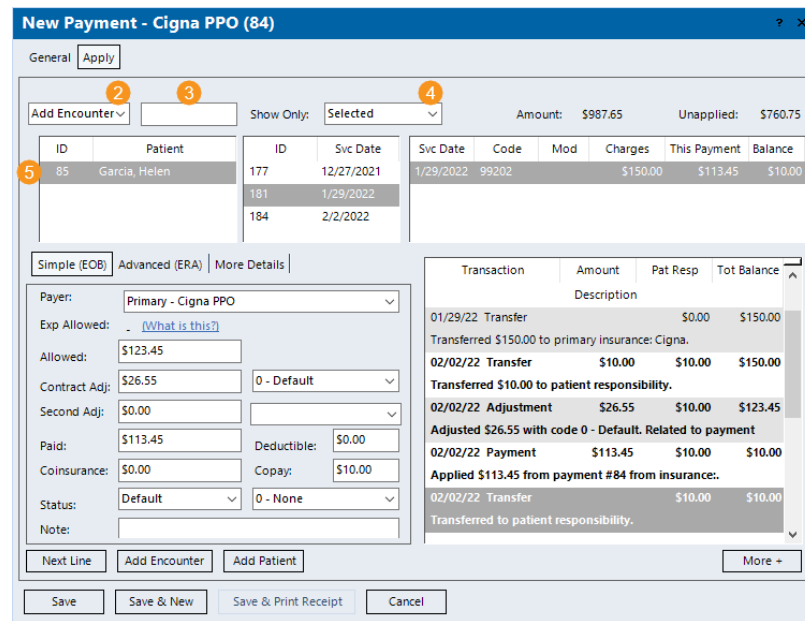
3. Enter the encounter ID or patient's name. Then, press Enter on the keyboard. The service lines are listed.

**Note:** The encounter ID may be indicated as the *Patient Account Number* or *Claim Reference ID* on the paper RA as follows Encounter ID + Z + Kareo ID (e.g., 176Z15050).

**Tip:** Enter the encounter ID + Z (e.g., 176Z) to quickly add the appropriate record and avoid having to search and select it.

- If the *Select Encounter* or *Find Patient* window opens, search and select the appropriate record.

4. **Show Only:** Defaults to *Selected*. If necessary, click the **drop-down arrow** to select to list *All*, *Open*, *Settled*, or *Negative Balances* service lines.
5. Click to select the patient, encounter, and/or service line the payment amount needs to be applied to.



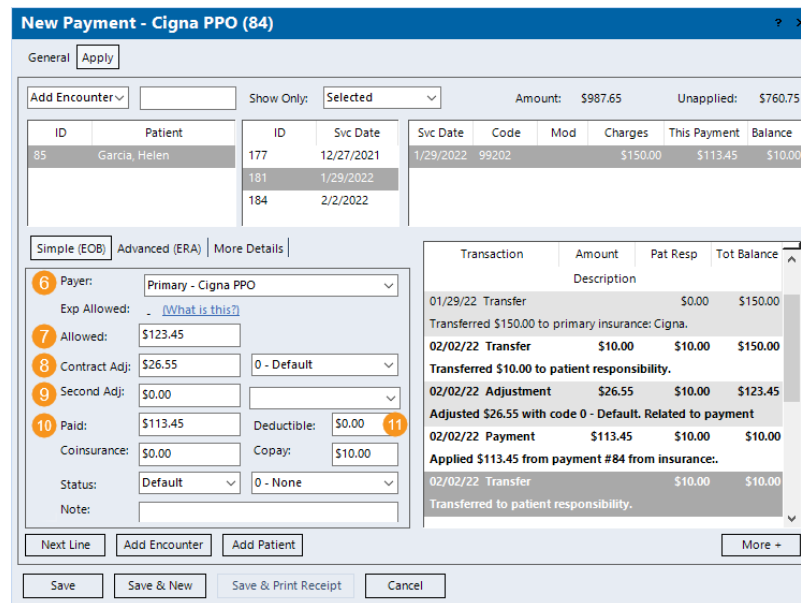
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## Apply Payment from Paper RA, cont.

6. **Payer:** The payer auto-populates from the *Insurance* entered on the *General* tab of the payment.
7. **Allowed:** Enter the reported allowed amount. If the claim was denied, leave as \$0.00.
8. **Contract Adj:** Automatically calculates when using Tab on the keyboard to advance to the next field. If necessary, enter a different amount. Then, select the appropriate adjustment code.
 

**Note:** The codes available for selection pull from the Adjustment Codes list. For more information, review the [Adjustment Codes](#) help article. If a *Default Adjustment* is entered on the Insurance Company General Settings for the payer, that adjustment code auto-populates. For more details about insurance company settings, review the [Insurance Company General Settings](#) help article.
9. **Second Adj:** If applicable, enter the reported second adjustment amount and adjustment code.
10. **Paid:** Enter the amount of the payment to apply to the selected service line.
11. **Deductible:** If applicable, enter the reported deductible amount.

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**New Payment - Cigna PPO (84)**

General Apply

Add Encounter: [ ] Show Only: Selected Amount: \$987.65 Unapplied: \$760.75

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
85	Garcia, Helen	177	12/27/2021	1/29/2022	99202		\$150.00	\$113.45	\$10.00
		181	1/29/2022						
		184	2/2/2022						

Simple (EOB) Advanced (ERA) More Details

6 Payer: Primary - Cigna PPO

7 Exp Allowed: \$123.45

8 Allowed: \$123.45

8 Contract Adj: \$26.55 0 - Default

9 Second Adj: \$0.00

10 Paid: \$113.45 Deductible: \$0.00

Coinurance: \$0.00 Copay: \$10.00

Status: Default 0 - None

Note: [ ]

Transaction Amount Pat Resp Tot Balance

01/29/22 Transfer \$0.00 \$150.00

Transferred \$150.00 to primary insurance: Cigna.

02/02/22 Transfer \$10.00 \$10.00 \$150.00

Transferred \$10.00 to patient responsibility.

02/02/22 Adjustment \$26.55 \$10.00 \$123.45

Adjusted \$26.55 with code 0 - Default. Related to payment

02/02/22 Payment \$113.45 \$10.00 \$10.00

Applied \$113.45 from payment #84 from insurance.

02/02/22 Transfer \$10.00 \$10.00

Transferred to patient responsibility.


Next Line Add Encounter Add Patient More +


Save Save & New Save & Print Receipt Cancel



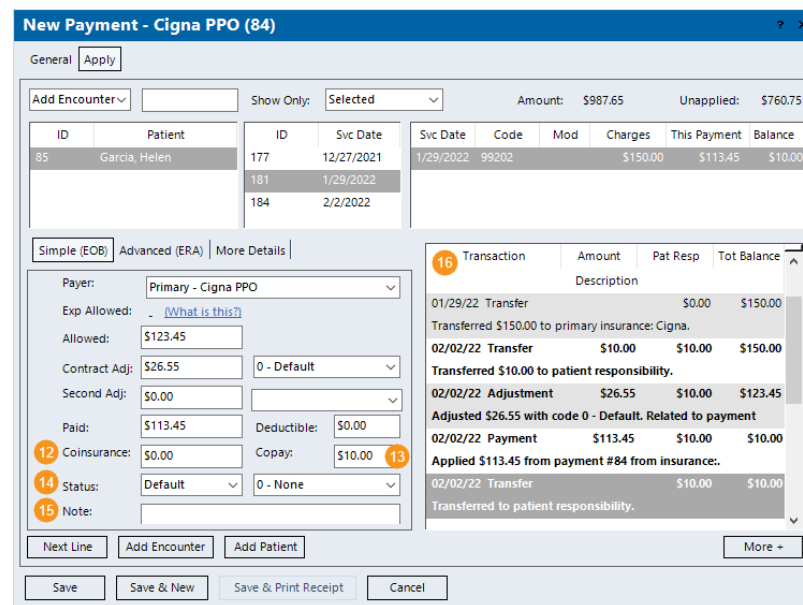
## Apply Payment from Paper RA, cont.

12. **Coinsurance:** If applicable, enter the reported coinsurance amount.
13. **Copay:** If applicable, enter the reported copay amount.
14. **Status:** If there is a remaining balance after the payment amount is applied, click the **drop-down arrow** to select the appropriate status update. Then, enter a reason code if applicable.
15. **Note:** Enter any internal notes related to the payment amount applied that will display when viewing transaction line details on the corresponding Claim record.
16. Verify the posted transaction line(s) on the right side of the window are correct.

 **Note:** The transaction line(s) in bold are posted under the *Transactions* section of the corresponding Claim record once the payment is saved.

 **Tips for primary insurance payments:**

- The sum of the *Allowed*, *Contract Adj*, and *Secondary Adj* amounts should equal the charge amount.
- The sum of the *Paid*, *Deductible*, *Coinsurance*, and *Copay* amounts should equal the *Allowed* amount.




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## Apply Payment from Paper RA, cont.

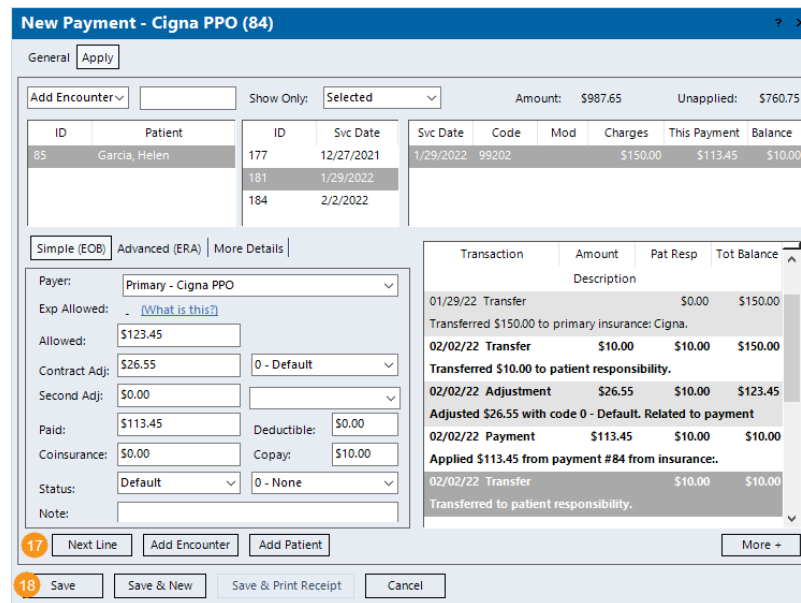
17. To continue applying amounts of the payment, click **Next Line** if the amount should be applied to the next service line listed, or click to select the appropriate service line. Then, repeat steps 7-17 as necessary.

- To return to the top options and add another encounter or patient, click **Add Encounter** or **Add Patient**. Then, repeat steps 3-17 as necessary.

18. When finished applying all payment amount(s) to the corresponding service line(s), verify the *Unapplied* amount displays \$0.00 then click **Save**.

 Note: Once saved, it is recommended to open the Payment record and upload the paper RA under the *Documents* tab. Refer to the Kareo account's agreement details and [Pricing Policy](#) page for applicable document storage fees.

 Tip: To view a report of how the payment was allocated, open the Payment record, click **Reports** on the bottom of the *Edit Payment* window and select *Payments Application*.



The screenshot shows the 'New Payment - Cigna PPO (84)' window. The 'General' tab is active, displaying patient information (Garcia, Helen), encounter dates (12/27/2021, 1/29/2022, 2/2/2022), and a table of charges. The 'Amount' is \$987.65 and 'Unapplied' is \$760.75. The 'Simple (EOB)' tab is selected, showing a transaction history table with columns: Transaction, Amount, Pat Resp, and Tot Balance. The transactions include transfers to primary insurance, patient responsibility, and adjustments. At the bottom, there are buttons for 'Next Line', 'Add Encounter', 'Add Patient', 'Save', 'Save & New', 'Save & Print Receipt', and 'Cancel'.

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
85	Garcia, Helen	177	12/27/2021	1/29/2022	99202		\$150.00	\$113.45	\$10.00
		181	1/29/2022						
		184	2/2/2022						

Transaction	Amount	Pat Resp	Tot Balance
01/29/22 Transfer		\$0.00	\$150.00
Transferred \$150.00 to primary insurance: Cigna.			
02/02/22 Transfer	\$10.00	\$10.00	\$150.00
Transferred \$10.00 to patient responsibility.			
02/02/22 Adjustment	\$26.55	\$10.00	\$123.45
Adjusted \$26.55 with code 0 - Default. Related to payment			
02/02/22 Payment	\$113.45	\$10.00	\$10.00
Applied \$113.45 from payment #84 from insurance.			
02/02/22 Transfer		\$10.00	\$10.00
Transferred to patient responsibility.			

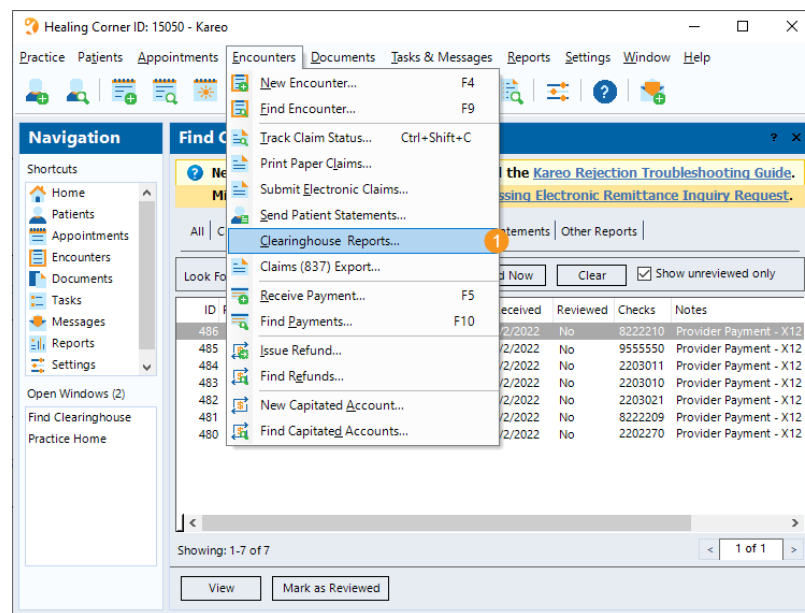
# Automatic Payment Posting

Kareo’s electronic remittance services include the delivery of electronic remittance advice (ERA) reports. All remittance reports are routed to the practice(s) within your Kareo account and payments reported in an ERA can be automatically posted. The automatic posting supports denials, reversals, underpayments, over-payments, and other complex electronic remittance scenarios. For more information about ERA reports, review the [Electronic Remittance Reports](#) help article.

## Post Electronic Remittance Advice (ERA) Payment

Follow the steps below to automatically post payments reported in an ERA.

1. Click **Encounters > Clearinghouse Reports**. The *Find Clearinghouse Report* window opens.

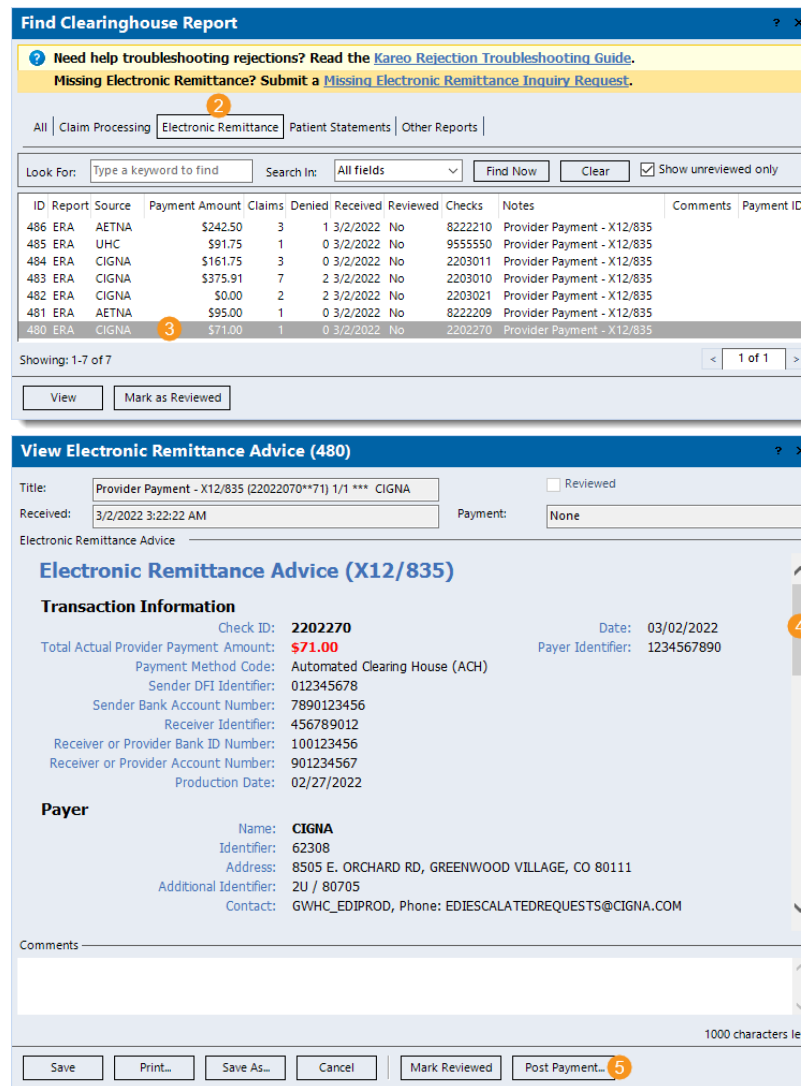


(Continued next page...)

## Post ERA Payment, cont.

2. Click the *Electronic Remittance* tab. The *Electronic Remittance* reports list displays.
3. Double click the ERA report to open. The *View Electronic Remittance Advice* window opens.
 

**Note:** It is recommended to address the ERA reports from oldest to newest and confirm payment was received by check or bank deposit prior to applying ERA payments.
4. Scroll down and review the ERA report information as necessary.
5. Click **Post Payment**. The ERA payment amount(s) posts automatically. Then, the *General* tab of the *New Payment from ERA* window opens.
  - If the ERA report included any payment amounts that could not be posted automatically (e.g., payments for claims that were not submitted through Kareo), the *ERA Errors* tab of the *New Payment from ERA* window opens. Review the [Post Electronic Remittance Advice \(ERA\) Payment with ERA Errors](#) help article.



**Find Clearinghouse Report**

Need help troubleshooting rejections? Read the [Kareo Rejection Troubleshooting Guide](#).  
Missing Electronic Remittance? Submit a [Missing Electronic Remittance Inquiry Request](#).

All | Claim Processing | **Electronic Remittance** | Patient Statements | Other Reports

Look For:  Search In:  Find Now Clear ☒ Show unreviewed only

ID	Report Source	Payment Amount	Claims	Denied	Received	Reviewed	Checks	Notes	Comments	Payment ID
486	ERA AETNA	\$242.50	3	1	3/2/2022	No	8222210	Provider Payment - X12/835		
485	ERA UHC	\$91.75	1	0	3/2/2022	No	9555550	Provider Payment - X12/835		
484	ERA CIGNA	\$161.75	3	0	3/2/2022	No	2203011	Provider Payment - X12/835		
483	ERA CIGNA	\$375.91	7	2	3/2/2022	No	2203010	Provider Payment - X12/835		
482	ERA CIGNA	\$0.00	2	2	3/2/2022	No	2203021	Provider Payment - X12/835		
481	ERA AETNA	\$95.00	1	0	3/2/2022	No	8222209	Provider Payment - X12/835		
480	ERA CIGNA	\$71.00	1	0	3/2/2022	No	2202270	Provider Payment - X12/835		

Showing: 1-7 of 7

View Mark as Reviewed

---

**View Electronic Remittance Advice (480)**

Title:  Provider Payment - X12/835 (22022070\*\*71) 1/1 \*\*\* CIGNA ☐ Reviewed

Received:  3/2/2022 3:22:22 AM Payment:  None

Electronic Remittance Advice

**Electronic Remittance Advice (X12/835)**

**Transaction Information**

Check ID: **22022270** Date: 03/02/2022

Total Actual Provider Payment Amount: **\$71.00** Payer Identifier: 1234567890

Payment Method Code: Automated Clearing House (ACH)

Sender DFI Identifier: 012345678

Sender Bank Account Number: 7890123456

Receiver Identifier: 456789012

Receiver or Provider Bank ID Number: 100123456

Receiver or Provider Account Number: 901234567

Production Date: 02/27/2022

**Payer**

Name: **CIGNA**

Identifier: 62308

Address: 8505 E. ORCHARD RD, GREENWOOD VILLAGE, CO 80111

Additional Identifier: 2U / 80705

Contact: GWHC\_EDIPROD, Phone: EDIESCALATEDREQUESTS@CIGNA.COM

Comments

1000 characters left

Save Print... Save As... Cancel Mark Reviewed **Post Payment**


(Continued next page...)

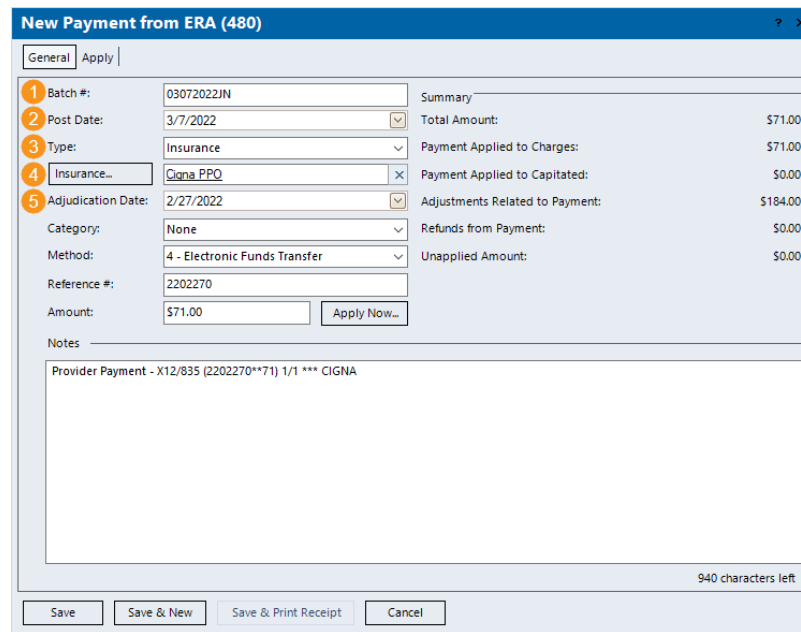
## Post ERA Payment, cont.

### Verify New Payment from ERA Information

Once the ERA payment has automatically posted, it is important to verify the information for accuracy prior to saving the payment. When posting primary insurance payments, this also helps prevent secondary electronic claim rejections for transferred balances.

**Note:** If the *Unapplied Amount* does not display \$0.00 and there is an **ERA Errors** tab, review the [Post Electronic Remittance Advice \(ERA\) Payment with ERA Errors](#) help article.

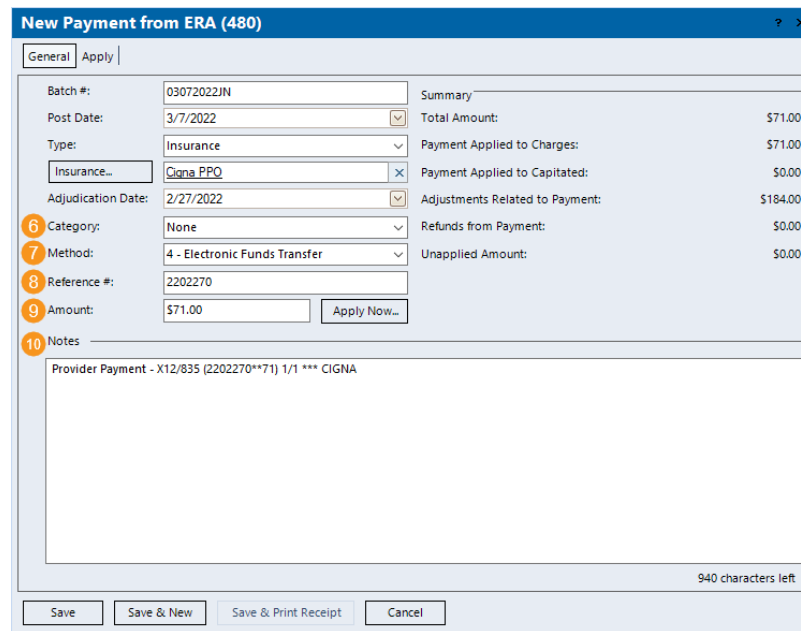
1. **Batch #:** If applicable, enter a batch number for the payment.  
 **Tip:** Batch numbers are helpful for running reports when there is a consistent naming convention such as the posting date with the user's initials (e.g., MMDDYYYYAB). Then, when running a report (e.g., Payments Detail), customize and filter by that specific batch number.
2. **Post Date:** Auto-populates with the current date. If necessary, enter a different posting date for the payment.
3. **Type:** Auto-populates with *Insurance*.
4. **Insurance:** Auto-populates with the payer in Kareo that could be matched to the reported payer. If necessary, click **Insurance** to search and select the appropriate payer.
5. **Adjudication Date:** Auto-populates with the reported adjudication date.



(Continued next page...)

## Post ERA Payment, cont.

6. **Category:** If the practice uses categories for certain payment reports, click the **drop-down arrow** and select the appropriate category. For more information about categories, review the [Categories](#) help article.
7. **Method:** Auto-populates with *Electronic Funds Transfer*. If necessary, click the **drop-down arrow** and select the appropriate method.
8. **Reference #:** Auto-populates with the reported *Check ID* number.
9. **Amount:** Auto-populates with the reported total actual payment amount.
10. **Notes:** Auto-populates with the reported *Notes/Title*. If applicable, enter any internal notes related to the payment.



**New Payment from ERA (480)**

General | Apply

Batch #: 03072022JN

Post Date: 3/7/2022

Type: Insurance

Insurance: Cigna PPO

Adjudication Date: 2/27/2022

Category: None

Method: 4 - Electronic Funds Transfer

Reference #: 2202270

Amount: \$71.00

Apply Now...

Summary:

Total Amount:	\$71.00
Payment Applied to Charges:	\$71.00
Payment Applied to Capitated:	\$0.00
Adjustments Related to Payment:	\$184.00
Refunds from Payment:	\$0.00
Unapplied Amount:	\$0.00

Notes:

Provider Payment - X12/835 (2202270\*\*71) 1/1 \*\*\* CIGNA

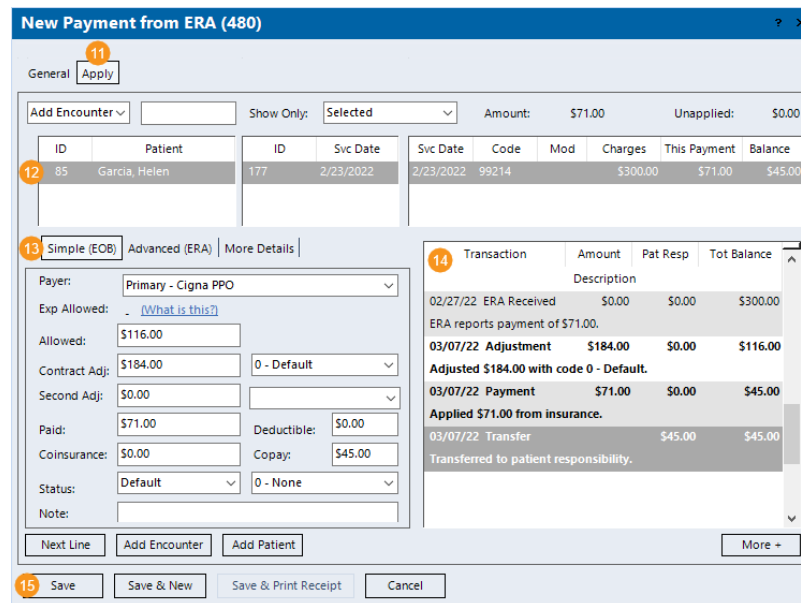
940 characters left

Save Save & New Save & Print Receipt Cancel

(Continued next page...)

## Post ERA Payment, cont.

11. Select the *Apply* tab. Additional payment details display.
12. Click to select each patient, encounter, and/or service line to review the auto-populated information.  
💡 Tip: The Next Line button can also be used to navigate to the next service line.
13. Review the auto-populated *Simple (EOB)* payment information and make any changes as necessary.  
💡 Note: It is especially important to ensure the amounts are correct for balances transferred to secondary insurance policies as this information is sent to payers that support secondary electronic claim submission.
14. Verify the posted transaction line(s) on the right side of the window is correct and make any changes as necessary.  
💡 Note: The transaction line(s) in bold are posted under the *Transactions* section of the corresponding Claim record once the payment is saved.
15. When finished, click **Save**. The payment is saved and the ERA report is marked as reviewed.  
💡 Tip: To view a report of how the payment was allocated, open the Payment record, click **Reports** on the bottom of the *Edit Payment* window and select *Payments Application*.



**New Payment from ERA (480)**

General **Apply**

Add Encounter:  Show Only:  Amount: \$71.00 Unapplied: \$0.00

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
85	Garcia, Helen	177	2/23/2022	2/23/2022	99214		\$300.00	\$71.00	\$45.00

**13 Simple (EOB)** Advanced (ERA) More Details

Payer:  Primary - Cigna PPO

Exp Allowed:  [What is this?](#)

Allowed:  \$116.00

Contract Adj:  \$184.00  0 - Default

Second Adj:  \$0.00

Paid:  \$71.00 Deductible:  \$0.00

Coinsurance:  \$0.00 Copay:  \$45.00

Status:  Default  0 - None

Note:

Next Line Add Encounter Add Patient More +

**15 Save** Save & New Save & Print Receipt Cancel

**14 Transaction** Amount Pat Resp Tot Balance

Transaction	Amount	Pat Resp	Tot Balance
02/27/22 ERA Received	\$0.00	\$0.00	\$300.00
ERA reports payment of \$71.00.			
03/07/22 Adjustment	\$184.00	\$0.00	\$116.00
Adjusted \$184.00 with code 0 - Default.			
03/07/22 Payment	\$71.00	\$0.00	\$45.00
Applied \$71.00 from insurance.			
03/07/22 Transfer	\$45.00	\$45.00	\$45.00
Transferred to patient responsibility.			

# Additional Payment Posting Scenarios

This section of the guide covers additional common payment posting scenarios such as reversals, refunds, denials, and adjustments. For more payment posting scenarios, browse the [Post Payments](#) help articles.

## Payment Reversals

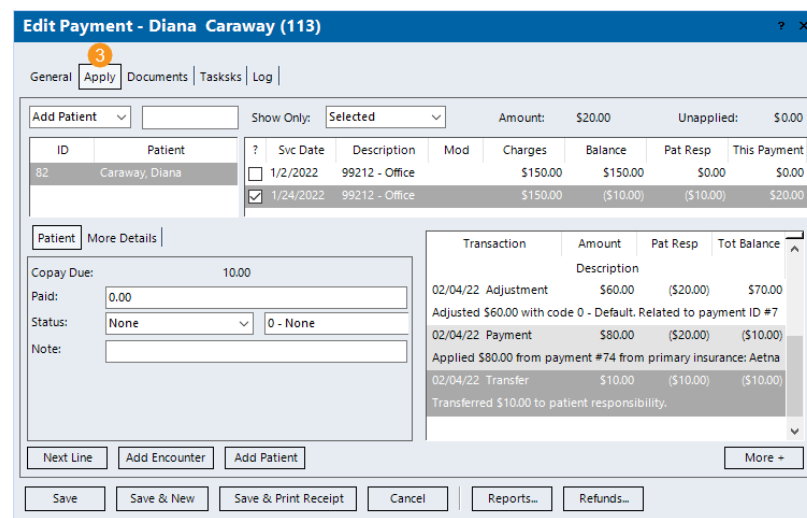
Some situations require a payment reversal (e.g., the insurance covers all or a portion of the patient's copayment, the insurance overpaid or paid in error). Once the applied payment amount is reversed, you can either refund the unapplied payment amount or apply it later to another service line. For insurance overpayments, contact the insurance company directly for specific instructions.

### Reverse Patient Payment

Follow the steps below to reverse a patient payment amount.

1. Click **Encounters > Find Payments**. The *Find Payment* window opens.  
💡 Tip: For faster navigation, press F10 on your keyboard.
2. Find the payment then double click to open. The *Edit Payment* window opens.  
💡 Tip: To return more accurate search results, select the *All* tab, enter all or part of a keyword for the payment in the *Look For* search bar, and click to clear "Show unapplied only" as necessary. Then, click **Find Now**.
3. Select the *Apply* tab. The additional payment details display.

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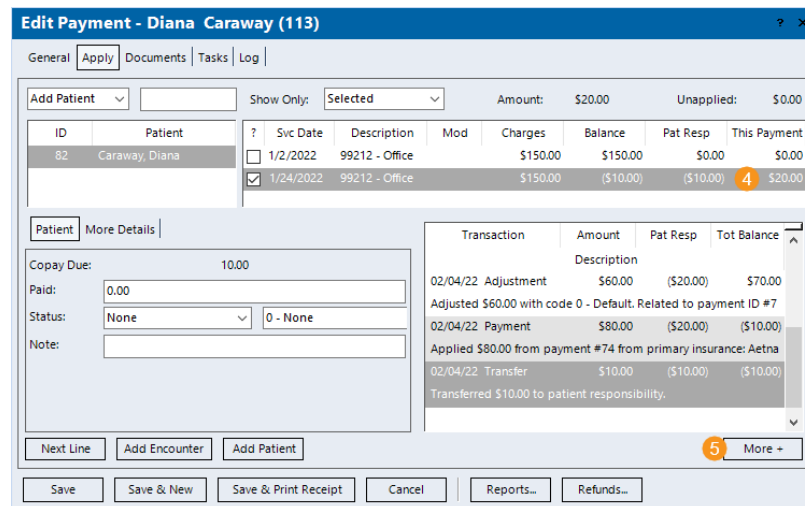


Transaction	Amount	Pat Resp	Tot Balance
02/04/22 Adjustment	\$60.00	(\$20.00)	\$70.00
Adjusted \$60.00 with code 0 - Default. Related to payment ID #7			
02/04/22 Payment	\$80.00	(\$20.00)	(\$10.00)
Applied \$80.00 from payment #74 from primary insurance: Aetna			
02/04/22 Transfer	\$10.00	(\$10.00)	(\$10.00)
Transferred \$10.00 to patient responsibility.			



## Reverse Patient Payment, cont.

4. Click to select the service line with the applied payment amount that requires the reversal.
5. Click **More +** in the lower right of the window. Additional options display.
  - If the service line was settled, click the **drop-down arrow** and select *Reopen*. Then, click **Post**.
6. Click the **drop-down arrow** and select *1 - Payment*. Once selected, an additional field becomes available.
7. Enter the minus (-) sign and the payment amount that needs to be reversed/unapplied (e.g., -12.34).
8. Click **Post**. The *Payment* transaction line for the reversal is posted.



**Edit Payment - Diana Caraway (113)**

General | Apply | Documents | Tasks | Log

Add Patient: [ ] Show Only: Selected Amount: \$20.00 Unapplied: \$0.00

ID	Patient	Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Payment
82	Caraway, Diana	1/2/2022	99212 - Office		\$150.00	\$150.00	\$0.00	\$0.00
		1/24/2022	99212 - Office		\$150.00	(\$10.00)	(\$10.00)	\$20.00

Transaction | Amount | Pat Resp | Tot Balance

Description

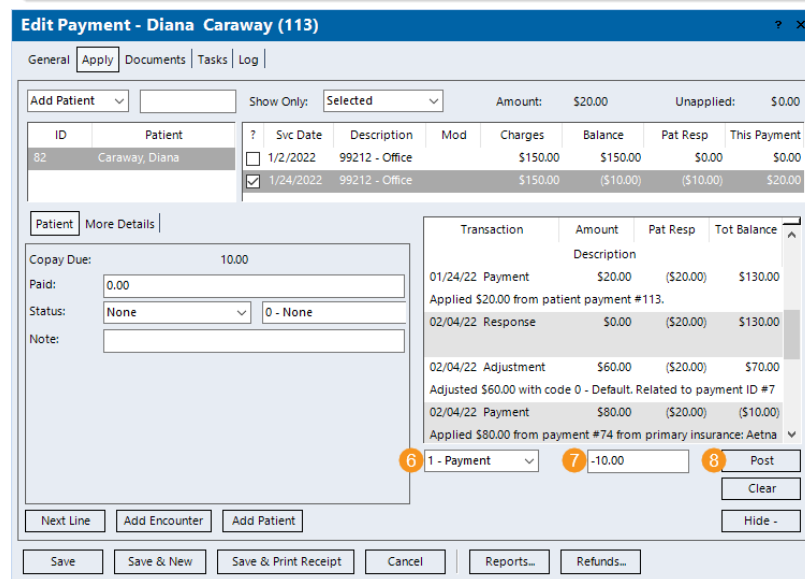
02/04/22 Adjustment \$60.00 (\$20.00) \$70.00  
Adjusted \$60.00 with code 0 - Default. Related to payment ID #7

02/04/22 Payment \$80.00 (\$20.00) (\$10.00)  
Applied \$80.00 from payment #74 from primary insurance: Aetna

02/04/22 Transfer \$10.00 (\$10.00) (\$10.00)  
Transferred \$10.00 to patient responsibility.

Next Line | Add Encounter | Add Patient

Save | Save & New | Save & Print Receipt | Cancel | Reports... | Refunds...



**Edit Payment - Diana Caraway (113)**

General | Apply | Documents | Tasks | Log

Add Patient: [ ] Show Only: Selected Amount: \$20.00 Unapplied: \$0.00

ID	Patient	Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Payment
82	Caraway, Diana	1/2/2022	99212 - Office		\$150.00	\$150.00	\$0.00	\$0.00
		1/24/2022	99212 - Office		\$150.00	(\$10.00)	(\$10.00)	\$20.00

Transaction | Amount | Pat Resp | Tot Balance

Description

01/24/22 Payment \$20.00 (\$20.00) \$130.00  
Applied \$20.00 from patient payment #113.

02/04/22 Response \$0.00 (\$20.00) \$130.00

02/04/22 Adjustment \$60.00 (\$20.00) \$70.00  
Adjusted \$60.00 with code 0 - Default. Related to payment ID #7

02/04/22 Payment \$80.00 (\$20.00) (\$10.00)  
Applied \$80.00 from payment #74 from primary insurance: Aetna

1 - Payment -10.00 Post


Next Line | Add Encounter | Add Patient

Save | Save & New | Save & Print Receipt | Cancel | Reports... | Refunds...

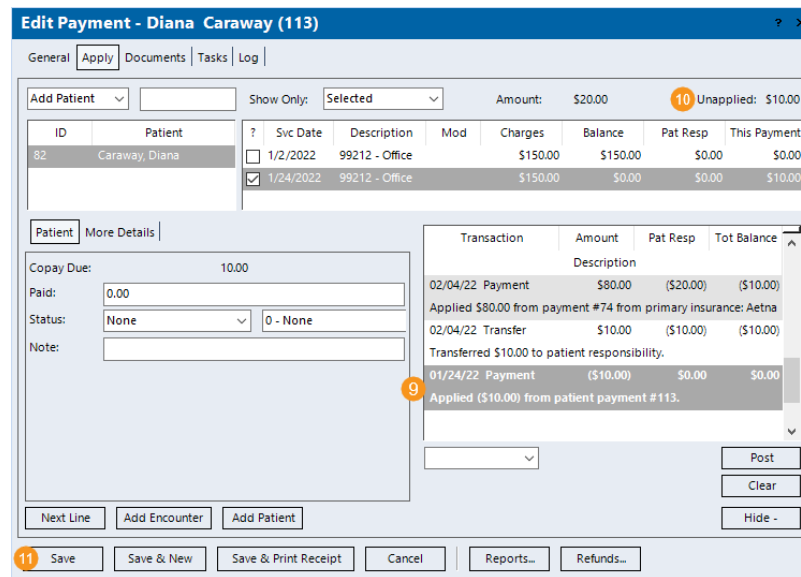
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## Reverse Patient Payment, cont.

9. Verify the posted *Payment* transaction line reflects the correct amount reversed.
  - If the posted transaction line needs to be removed, right click on the transaction line then select *Remove*.
  - For additional actions (e.g., add note, settle service line), click the **drop-down arrow** to select the appropriate option and enter information as necessary. Then, click **Post**.

 Note: It is recommended to add a note indicating the reason for the payment reversal.
10. Verify the *Unapplied* amount reflects the correct total payment amount reversed.
11. When finished, click **Save**.

The payment amount is now reversed and remains unapplied until a refund is issued to the patient or the amount is applied to another service line. For more information, review the [Payment Refunds](#) and [Apply Payment](#) sections.



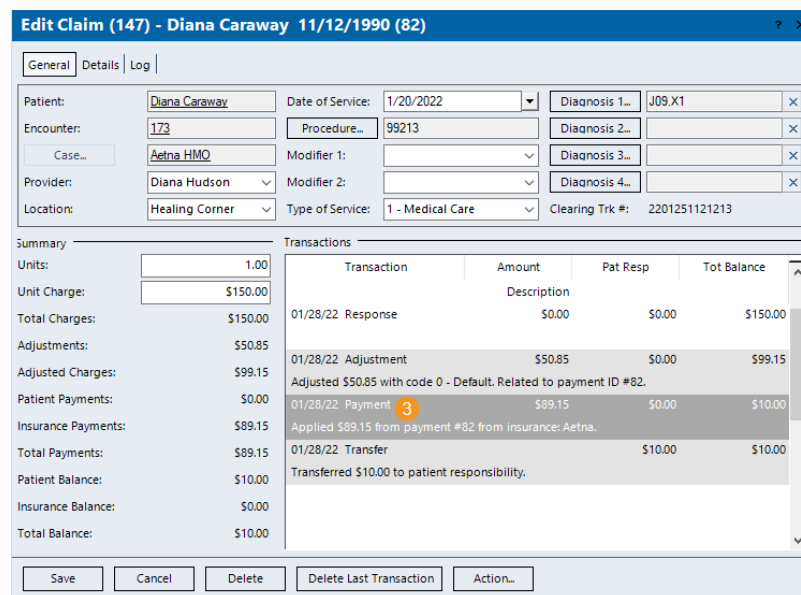
## Reverse Insurance Payment

Follow the steps below to locate and open the specific Payment record (related to the insurance payment that needs to be reversed) then post the reversal of the payment amount(s).

**Note:** It is recommended to complete the Advanced Payment Posting training prior to posting insurance payment reversals. If you have not completed this training and would like more information or have completed this training but need further assistance with posting an insurance payment reversal, contact [Customer Care](#).

- Click **Encounters > Track Claim Status**. The *Find Claim* window opens.
  - If the Payment record details (e.g., payment ID, check number, payer) are available, click **Encounters > Find Payments**. Find the payment and double click to open it. The *Edit Payment* window opens then proceed to step 4.
- Find the claim with the applied payment amount that requires the reversal and double click to open. The *Edit Claim* window opens.
- Under the *Transactions* section, double click the insurance *Payment* transaction line to open. The *Edit Payment* window opens.
 

**Note:** The insurance *Payment* transaction line description includes the applied payment amount, Payment ID number, and payer.



**Edit Claim (147) - Diana Caraway 11/12/1990 (82)**

General | Details | Log

Patient: Diana Caraway Date of Service: 1/20/2022 Diagnosis 1: J09.X1  
 Encounter: 173 Procedure: 99213 Diagnosis 2:  
 Case: Aetna HMO Modifier 1: Diagnosis 3:  
 Provider: Diana Hudson Modifier 2: Diagnosis 4:  
 Location: Healing Corner Type of Service: 1 - Medical Care Clearing Trk #: 2201251121213

**Summary**

Units:	1.00
Unit Charge:	\$150.00
Total Charges:	\$150.00
Adjustments:	\$50.85
Adjusted Charges:	\$99.15
Patient Payments:	\$0.00
Insurance Payments:	\$89.15
Total Payments:	\$89.15
Patient Balance:	\$10.00
Insurance Balance:	\$0.00
Total Balance:	\$10.00

**Transactions**

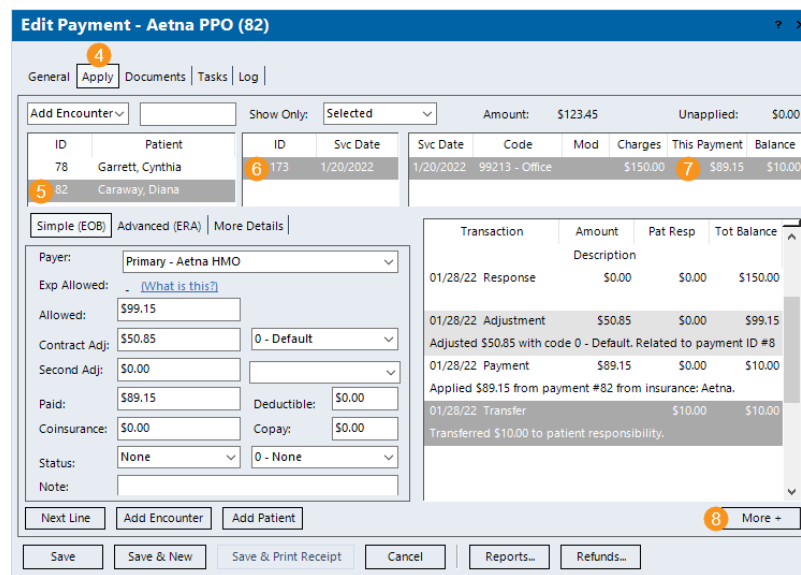
Transaction	Amount	Pat Resp	Tot Balance
01/28/22 Response	\$0.00	\$0.00	\$150.00
01/28/22 Adjustment	\$50.85	\$0.00	\$99.15
Adjusted \$50.85 with code 0 - Default. Related to payment ID #82.			
01/28/22 Payment 3	\$89.15	\$0.00	\$10.00
Applied \$89.15 from payment #82 from insurance: Aetna.			
01/28/22 Transfer		\$10.00	\$10.00
Transferred \$10.00 to patient responsibility.			

Save Cancel Delete Delete Last Transaction Action...

(Continued next page...)

## Reverse Insurance Payment, cont.

4. Select the *Apply* tab. The additional payment details display.
5. Click to select the appropriate patient if necessary.
6. Click to select the appropriate encounter if necessary.
7. Click to select the service line with the applied payment amount that requires the reversal.
8. Click **More +** in the lower right of the window. Additional options display.
  - If the service line was settled, click the **drop-down arrow** and select *Reopen*. Then, click **Post**.



**Edit Payment - Aetna PPO (82)**

General **4** Apply Documents Tasks Log

Add Encounter:  Show Only:  Amount: \$123.45 Unapplied: \$0.00

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
78	Garrett, Cynthia	6	1/20/2022	1/20/2022	99213 - Office		\$150.00	7	\$10.00
82	Caraway, Diana								

Simple (EOB) Advanced (ERA) More Details

Payer:  Primary - Aetna HMO

Exp Allowed:  [What is this?](#)

Allowed:  \$99.15

Contract Adj:  \$50.85  0 - Default

Second Adj:  \$0.00

Paid:  \$89.15 Deductible:  \$0.00

Coinsurance:  \$0.00 Copay:  \$0.00

Status:  None  0 - None

Note:

Transaction	Amount	Pat Resp	Tot Balance
01/28/22 Response	\$0.00	\$0.00	\$150.00
01/28/22 Adjustment	\$50.85	\$0.00	\$99.15
Adjusted \$50.85 with code 0 - Default. Related to payment ID #8			
01/28/22 Payment	\$89.15	\$0.00	\$10.00
Applied \$89.15 from payment #82 from Insurance: Aetna.			
01/28/22 Transfer	\$10.00	\$10.00	\$10.00
Transferred \$10.00 to patient responsibility.			

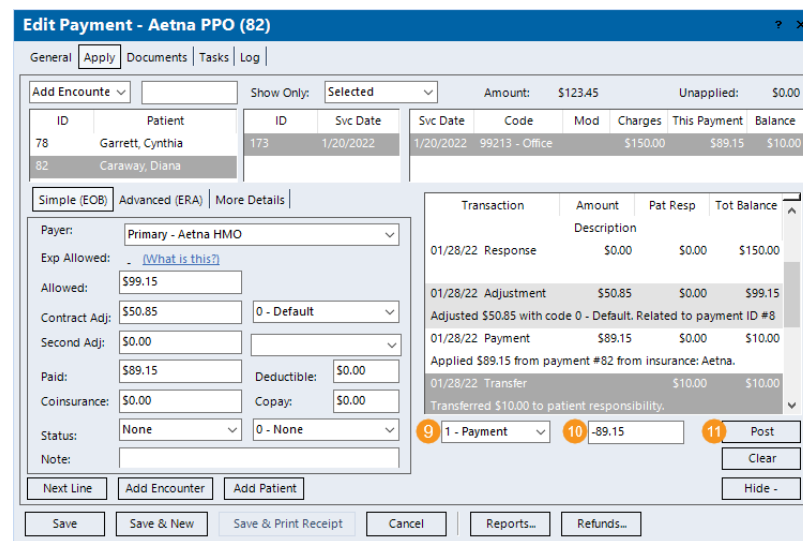
Next Line Add Encounter Add Patient **8** More +

Save Save & New Save & Print Receipt Cancel Reports... Refunds...

(Continued next page...)

## Reverse Insurance Payment, cont.


9. Click the **drop-down arrow** and select *1 - Payment*. Once selected, an additional field becomes available.
10. Enter the minus (-) sign and the payment amount that needs to be reversed/unapplied (e.g., -12.34).
11. Click **Post**. The *Payment* transaction line for the reversal is posted.
  - If the adjustment associated with the payment also needs to be reversed, click the **drop-down arrow** and select *2 - Adjustment*. Additional fields become available. Click the second **drop-down arrow** and select the adjustment code previously used to post the adjustment. Then, enter the minus (-) sign and the adjustment amount that needs to be reversed (e.g., -12.34) in the field. When finished, click **Post**. The *Adjustment* transaction line for the reversal is posted. For more information about reversing adjustments, review the [Reverse Adjustment](#) help article.



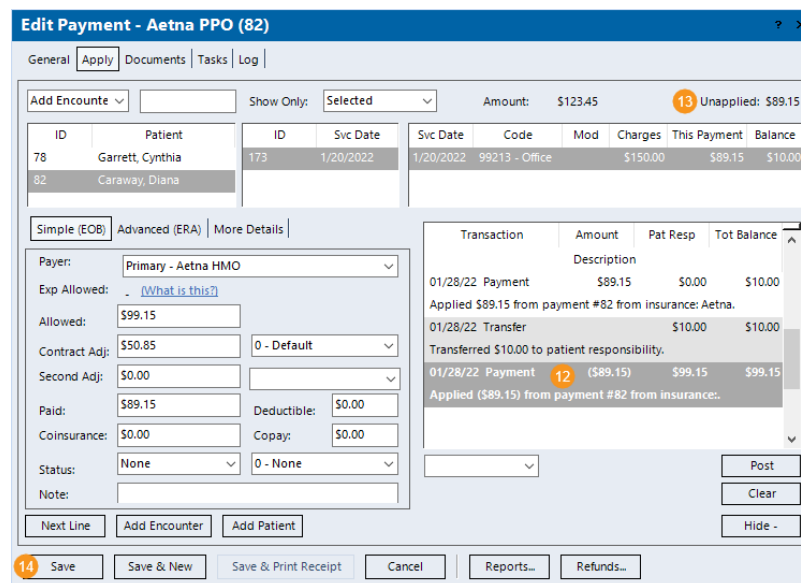
(Continued next page...)

## Reverse Insurance Payment, cont.

12. Verify the posted transaction line(s) are correct.
  - If a posted transaction line needs to be removed, right click on the transaction line then select *Remove*.
  - For additional actions (e.g., add note, settle service line, transfer balance), click the **drop-down arrow** to select the appropriate option and enter information as necessary. Then, click **Post**.

 Note: It is recommended to add a note indicating the reason for the payment reversal.
13. Verify the *Unapplied* amount reflects the correct total payment amount reversed.
14. When finished, click **Save**.

The payment amount is now reversed and remains unapplied until a refund is issued to the insurance or the amount is applied to another service line. Contact the insurance company directly for specific instructions. Then, review the [Payment Refunds](#) and [Apply Payment](#) sections as needed.



**Edit Payment - Aetna PPO (82)**

General | Apply | Documents | Tasks | Log

Add Encounte: [ ] Show Only: [Selected] Amount: \$123.45 13 Unapplied: \$89.15

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
78	Garrett, Cynthia	173	1/20/2022	1/20/2022	99213 - Office		\$150.00	\$89.15	\$10.00
82	Caraway, Diana								

Simple (EOB) | Advanced (ERA) | More Details

Payer: [Primary - Aetna HMO] Exp Allowed: [ ] [What is this?](#)

Allowed: \$99.15 Contract Adj: \$50.85 0 - Default

Second Adj: \$0.00 Paid: \$89.15 Deductible: \$0.00

Coinsurance: \$0.00 Copay: \$0.00 Status: [None] 0 - None

Note: [ ]

Transaction	Amount	Pat Resp	Tot Balance
Description			
01/28/22 Payment	\$89.15	\$0.00	\$10.00
Applied \$89.15 from payment #82 from insurance: Aetna.			
01/28/22 Transfer		\$10.00	\$10.00
Transferred \$10.00 to patient responsibility.			
01/28/22 Payment <span style="border: 1px solid orange; border-radius: 50%; padding: 2px;">12</span>	(\$89.15)	\$99.15	\$99.15
Applied (\$89.15) from payment #82 from insurance: Aetna.			

Post Clear Hide -

14 Save Save & New Save & Print Receipt Cancel Reports... Refunds...


# Payment Refunds

You can create refund records for unapplied overpayment amounts that may have resulted from reversing insurance or patient payments. For information on how to reverse payments, review the [Payment Reversals](#) section. Once refunds are created, they can be managed as necessary to help accurately track statuses and payments associated with them. There are two workflows to create and post refund amounts depending on how many payments, single or multiple, need to be added to the refund.


## New Single Payment Refund

Follow the steps below to locate the payment and refund the unapplied overpayment amount for a single payment.


1. Click **Encounters > Find Payments**. The *Find Payment* window opens.

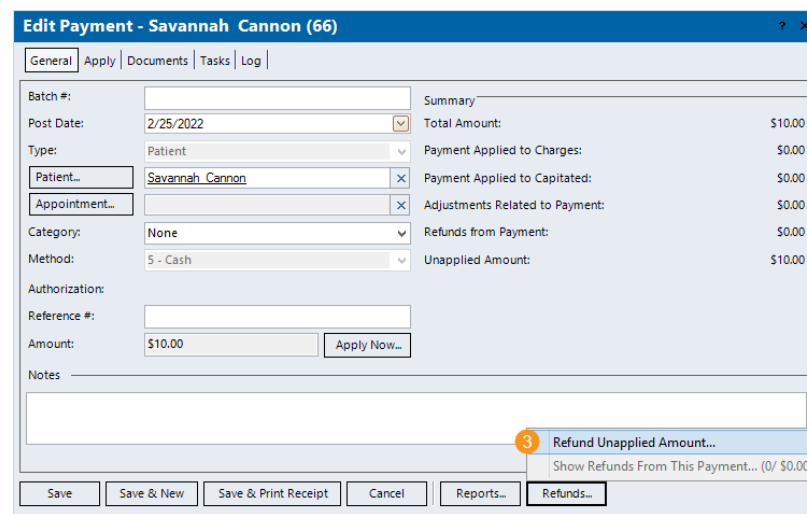
 Tip: For faster navigation, press F10 on your keyboard.

2. Find the payment then double click to open it. The *Edit Payment* window opens.

 Tip: To return more accurate search results, select the *All* tab, enter all or part of a keyword for the payment in the *Look For* search bar, and click to clear "Show unapplied only" as needed. Then, click **Find Now**.

3. Click **Refunds** on the bottom of the window and select *Refund Unapplied Amount*. The *New Refund* window opens.

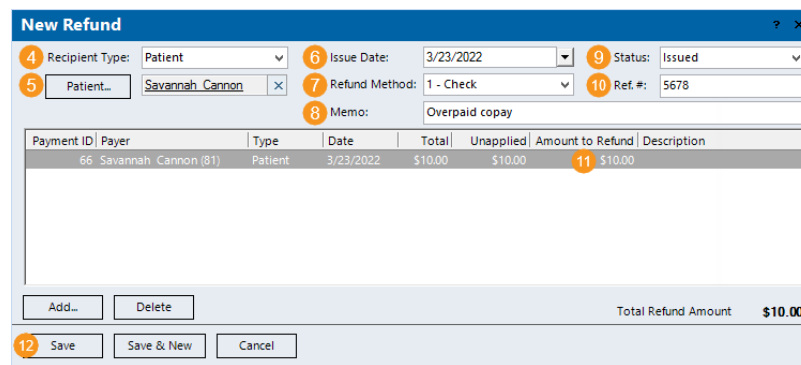
 Note: The payment is automatically added to the refund and some information auto-populates from the payment. Edit the information as necessary in the following steps.



(Continued next page...)

## New Single Payment Refund, cont.

4. **Recipient Type:** Auto-populates from the Payment record. If necessary, click the **drop-down arrow** to select a different type of recipient.
5. **Refund Recipient:** Auto-populates from the Payment record. If necessary, depending on the *Recipient Type*, click **Patient** or **Insurance** to search and select the refund recipient, or enter the *Other* refund recipient.
6. **Issue Date:** Enter the date the refund is being issued.
7. **Refund Method:** Click the **drop-down arrow** to select how the refund is being issued.
8. **Memo:** Enter any notes related to the refund.
9. **Status:** Click the **drop-down arrow** to select the status of the refund, *Draft* or *Issued*.
10. **Ref.#:** Enter a tracking number for the refund (e.g., check, confirmation, or authorization number).
11. **Amount to Refund:** Auto-populates with the total *Unapplied* amount of the Payment record. If necessary, double click the field under *Amount to Refund* column to enter a different amount.
12. When finished, click **Save**.



**New Refund**

4 Recipient Type: Patient 6 Issue Date: 3/23/2022 9 Status: Issued

5 Patient... Savannah Cannon X 7 Refund Method: 1 - Check 10 Ref.#: 5678

8 Memo: Overpaid copay

Payment ID	Payer	Type	Date	Total	Unapplied	Amount to Refund	Description
66	Savannah Cannon (81)	Patient	3/23/2022	\$10.00	\$10.00	11 \$10.00	

Add... Delete

12 Save Save & New Cancel

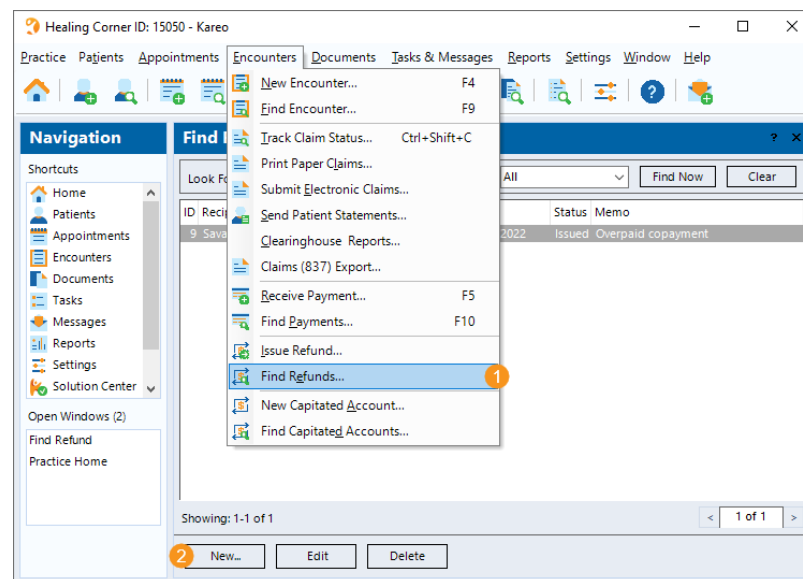
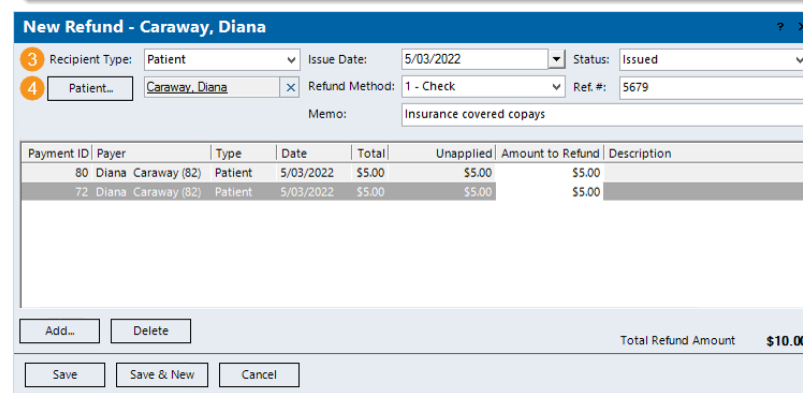
Total Refund Amount **\$10.00**



## New Multiple Payment Refund

Follow the steps below to create a new refund and post the refund amounts for multiple payments.

1. On the top menu bar, click **Encounters > Find Refunds**. The *Find Refund* window opens.
2. To prevent duplication, verify the refund is not in the system. Then, click **New**. The *New Refund* window opens.
3. **Recipient Type:** Defaults to *Insurance*. Click the **drop-down arrow** to select *Patient* or *Other*.
4. **Refund Recipient:** Depending on the *Recipient Type*, click **Patient** or **Insurance** to search and select the refund recipient, or enter the *Other* refund recipient.

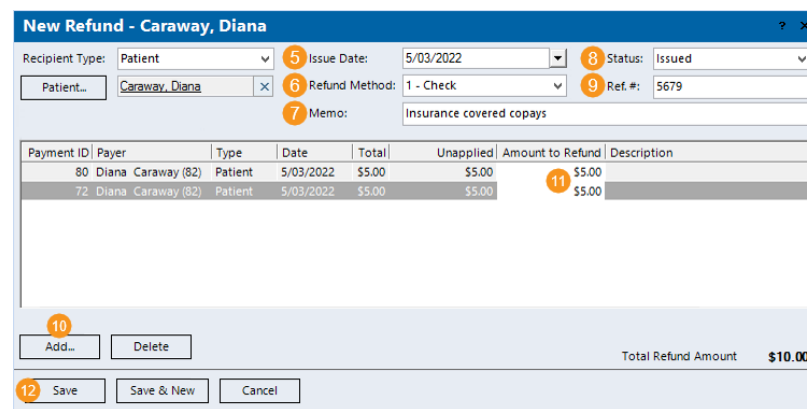
Payment ID	Payer	Type	Date	Total	Unapplied	Amount to Refund	Description
80	Diana Caraway (82)	Patient	5/03/2022	\$5.00	\$5.00	\$5.00	
72	Diana Caraway (82)	Patient	5/03/2022	\$5.00	\$5.00	\$5.00	

Total Refund Amount: **\$10.00**

(Continued next page...)

## New Multiple Payment Refund, cont.

5. **Issue Date:** Defaults to the current date. Enter the date the refund is being issued.
6. **Refund Method:** Click the **drop-down arrow** to select how the refund is being issued.
7. **Memo:** Enter any notes related to the refund.
8. **Status:** Click the **drop-down arrow** to select the status of the refund, *Draft* or *Issued*.
9. **Ref.#:** Enter a tracking number for the refund (e.g., check, confirmation, or authorization number).
10. Click **Add**. The *Select Payment* window opens. Search for and double click to select the payment to add to the refund. Repeat this step as necessary.
  - If a payment was added in error, click to select it. Then, click **Delete** and the payment is removed from the refund.
11. **Amount to Refund:** Once all payments are added, double click the field under the *Amount to Refund* column and enter the refund amount for each payment listed.
12. When finished, click **Save**.



**New Refund - Caraway, Diana**

Recipient Type: Patient **5** Issue Date: 5/03/2022 **8** Status: Issued **9**

Patient... Caraway, Diana **6** Refund Method: 1 - Check **7** Memo: Insurance covered copays

Payment ID	Payer	Type	Date	Total	Unapplied	Amount to Refund	Description
80	Diana Caraway (82)	Patient	5/03/2022	\$5.00	\$5.00	\$5.00 <b>11</b>	
72	Diana Caraway (82)	Patient	5/03/2022	\$5.00	\$5.00	\$5.00	

**10** Add... Delete

**12** Save Save & New Cancel

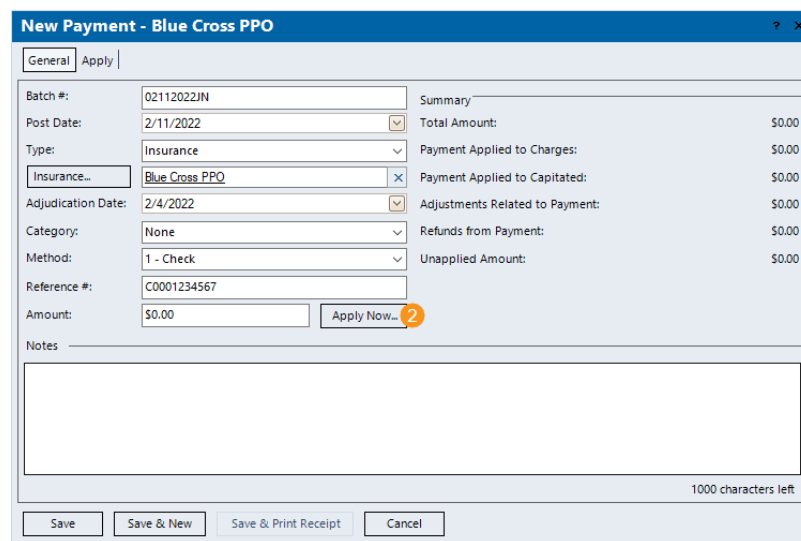
Total Refund Amount **\$10.00**

# Insurance Denials

When you receive paper denials from payers, you can manually post the denials to more effectively track and report claim denials. Tracking claim denials help determine internal patterns and trends, as well as those with specific payers, to quickly identify and remediate the common issues causing the denials. For information on how to find and view a denied claim, review the *Find and View Denied Claim* section of the [Post and View Denied Claims](#) help article.

## Manually Post Claim Denial

1. Create a new insurance payment and enter the information as necessary under the *General* tab with the following. For more details, review the [Enter Payment from Insurance](#) section.
  - *Method:* Click the **drop-down arrow** and select *1 - Check* as the method since this is a zero dollar amount payment.
  - *Amount:* Leave as \$0.00.
2. When finished, click **Apply Now**. The *Apply* tab opens.

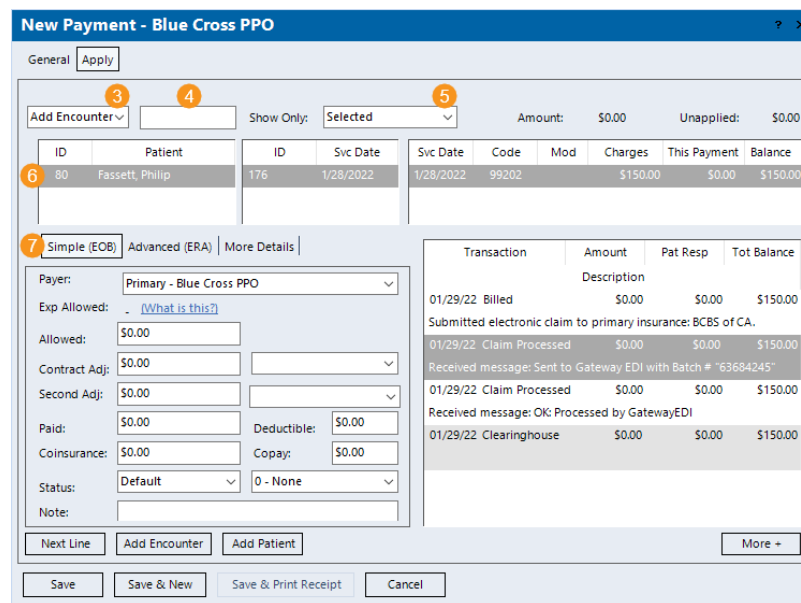


New Payment - Blue Cross PPO	
<div>General   Apply</div>	
Batch #:	02112022JIN
Post Date:	2/11/2022
Type:	Insurance
Insurance:	Blue Cross PPO
Adjudication Date:	2/4/2022
Category:	None
Method:	1 - Check
Reference #:	C0001234567
Amount:	\$0.00
<div>Apply Now <span>2</span></div>	
<div>Notes</div> <div></div> <div>1000 characters left</div>	
<div>Save   Save &amp; New   Save &amp; Print Receipt   Cancel</div>	

(Continued next page...)

## Manually Post Claim Denial, cont.

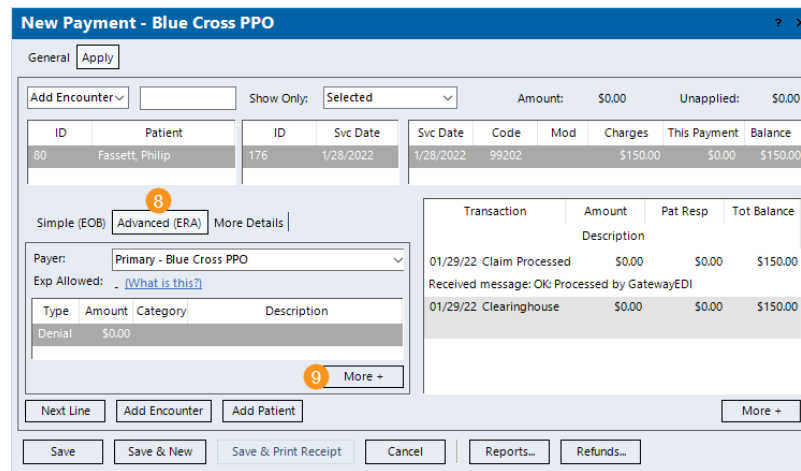
3. **Add Encounter:** Selected by default. To add service lines by patient, click the **drop-down arrow** and select *Add Patient*.  
*Note:* When an encounter is added, all service lines associated with the encounter are listed. When a patient is added, all open service lines associated with the patient are listed.
4. Enter the encounter ID or patient's name. Then, press Enter on the keyboard. The service lines are listed.  
*Note:* The encounter ID may be indicated as the *Patient Account Number* or *Claim Reference ID* on the payer report as follows Encounter ID + Z + Kareo ID (e.g., 176Z15050).  
*Tip:* Enter the encounter ID + Z (e.g., 176Z) to quickly add the appropriate record and avoid having to search and select it.
  - If the *Select Encounter* or *Find Patient* window opens, search and select the appropriate record.
5. **Show Only:** Defaults to *Selected*. If necessary, click the **drop-down arrow** to select to list *All*, *Open*, *Settled*, or *Negative Balances* service lines.
6. Click to select the patient, encounter, and/or service line for the denial.
7. Under the *Simple (EOB)* tab, leave all amount fields as \$0.00 and ensure the *Status* is set to *Default*.



(Continued next page...)

## Manually Post Claim Denial, cont.

8. Select the *Advanced (ERA)* tab. The *Advanced (ERA)* information displays.
9. Click **More +**. Additional options display.



**New Payment - Blue Cross PPO**

General Apply

Add Encounter: [ ] Show Only: Selected Amount: \$0.00 Unapplied: \$0.00

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
80	Fassett, Philip	176	1/28/2022	1/28/2022	99202		\$150.00	\$0.00	\$150.00

Simple (EOB) **Advanced (ERA)** More Details

Payer: Primary - Blue Cross PPO  
Exp Allowed: [What is this?](#)

Type	Amount	Category	Description
Denial	\$0.00		

More +

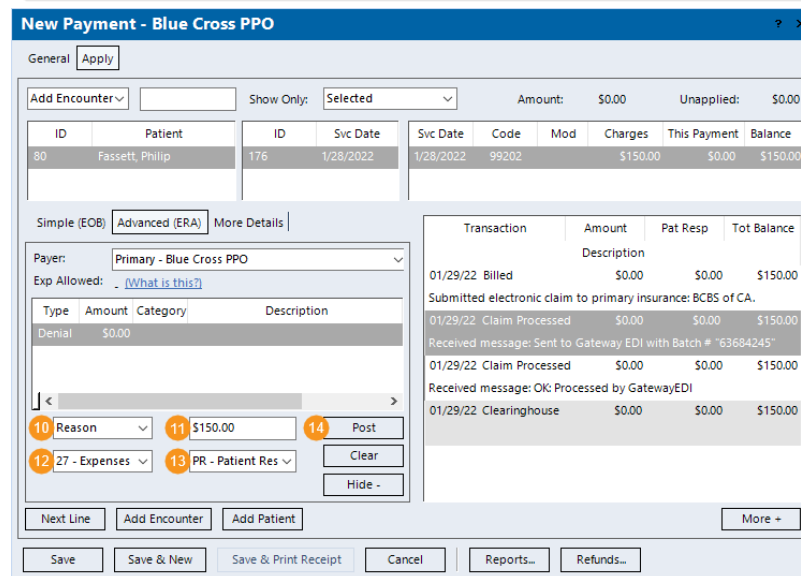
Transaction Amount Pat Resp Tot Balance

Transaction	Amount	Pat Resp	Tot Balance
01/29/22 Claim Processed	\$0.00	\$0.00	\$150.00
Received message: OK: Processed by GatewayEDI			
01/29/22 Clearinghouse	\$0.00	\$0.00	\$150.00

Next Line Add Encounter Add Patient More +

Save Save & New Save & Print Receipt Cancel Reports... Refunds...

10. Click the **drop-down arrow** and select *Reason*. Once selected, additional fields become available.
11. Enter the denied amount.
12. Click the **drop-down arrow** and select the reported denial reason code.
13. Click the **drop-down arrow** and select the reported claim adjustment group code.
14. Click **Post**. The *Reason* for the denial is added. This will display when viewing the *Denial* transaction line information on the corresponding Claim record.



**New Payment - Blue Cross PPO**

General Apply

Add Encounter: [ ] Show Only: Selected Amount: \$0.00 Unapplied: \$0.00

ID	Patient	ID	Svc Date	Svc Date	Code	Mod	Charges	This Payment	Balance
80	Fassett, Philip	176	1/28/2022	1/28/2022	99202		\$150.00	\$0.00	\$150.00

Simple (EOB) **Advanced (ERA)** More Details

Payer: Primary - Blue Cross PPO  
Exp Allowed: [What is this?](#)

Type	Amount	Category	Description
Denial	\$0.00		

Reason 11 \$150.00 14 Post

27 - Expenses 13 PR - Patient Res Clear Hide -

Transaction Amount Pat Resp Tot Balance

Transaction	Amount	Pat Resp	Tot Balance
01/29/22 Billed	\$0.00	\$0.00	\$150.00
Submitted electronic claim to primary insurance: BCBS of CA.			
01/29/22 Claim Processed	\$0.00	\$0.00	\$150.00
Received message: Sent to Gateway EDI with Batch # "63684245"			
01/29/22 Claim Processed	\$0.00	\$0.00	\$150.00
Received message: OK: Processed by GatewayEDI			
01/29/22 Clearinghouse	\$0.00	\$0.00	\$150.00

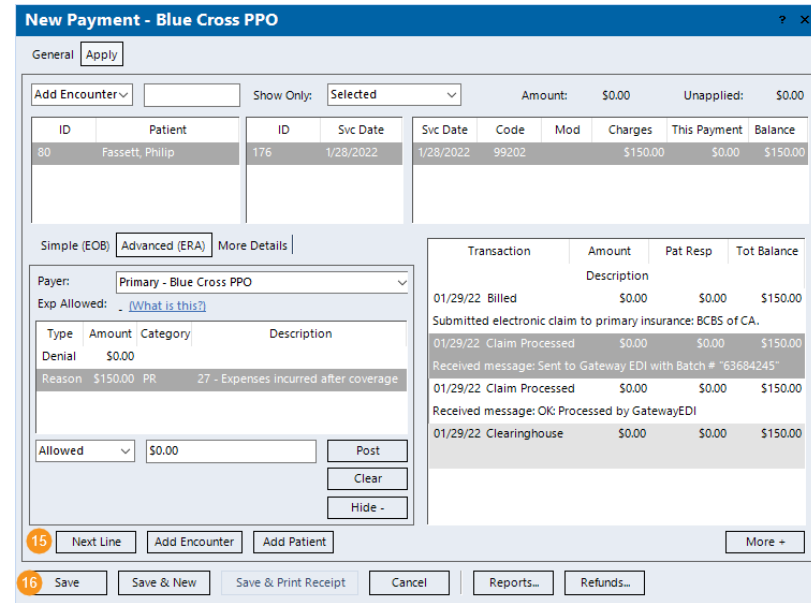
Next Line Add Encounter Add Patient More +

Save Save & New Save & Print Receipt Cancel Reports... Refunds...

(Continued next page...)

## Manually Post Claim Denial, cont.

15. To continue, click **Next Line** if the denial applies to the next service line listed, or click to select the appropriate service line. Then, repeat steps 7-15 as necessary.
  - To return to the top options and add another encounter or patient, click **Add Encounter** or **Add Patient**. Then, repeat steps 4-15 as necessary.
16. When finished with the denial, click **Save**. If a confirmation pop-up appears, click **Yes** to post the payment with a \$0.00 amount.



The screenshot shows the 'New Payment - Blue Cross PPO' window. The 'General' tab is active, and the 'Apply' button is highlighted. The 'Add Encounter' dropdown is set to 'Selected'. The 'Amount' is \$0.00 and 'Unapplied' is \$0.00. The 'Show Only' dropdown is set to 'Selected'. The 'Amount' is \$0.00 and 'Unapplied' is \$0.00. The 'ID' is 80, 'Patient' is Fassett, Philip, 'ID' is 176, 'Svc Date' is 1/28/2022, 'Svc Date' is 1/28/2022, 'Code' is 99202, 'Mod' is 150.00, 'Charges' is \$150.00, 'This Payment' is \$0.00, and 'Balance' is \$150.00.

The 'Simple (EOB)' tab is selected. The 'Payer' is 'Primary - Blue Cross PPO'. The 'Exp Allowed' is 'What is this?'. The 'Type' is 'Denial', 'Amount' is \$0.00, 'Category' is 'Reason', 'Amount' is \$150.00, 'Category' is 'PR', and 'Description' is '27 - Expenses incurred after coverage'. The 'Allowed' dropdown is set to 'Allowed', 'Amount' is \$0.00, and the 'Post' button is highlighted. The 'Clear' and 'Hide -' buttons are also visible.

The 'Transaction' table shows the following data:

Transaction	Amount	Pat Resp	Tot Balance
01/29/22 Billed	\$0.00	\$0.00	\$150.00
Submitted electronic claim to primary insurance: BCBS of CA.			
01/29/22 Claim Processed	\$0.00	\$0.00	\$150.00
Received message: Sent to Gateway EDI with Batch # "63684245"			
01/29/22 Claim Processed	\$0.00	\$0.00	\$150.00
Received message: OK: Processed by GatewayEDI			
01/29/22 Clearinghouse	\$0.00	\$0.00	\$150.00

The '15 Next Line' button is highlighted. The '16 Save' button is highlighted. The 'Save & New', 'Save & Print Receipt', 'Cancel', 'Reports...', and 'Refunds...' buttons are also visible.

# Adjustments

You can easily adjust a balance that no longer needs to be billed and collected by the practice (e.g., small balance). There are two common workflows:

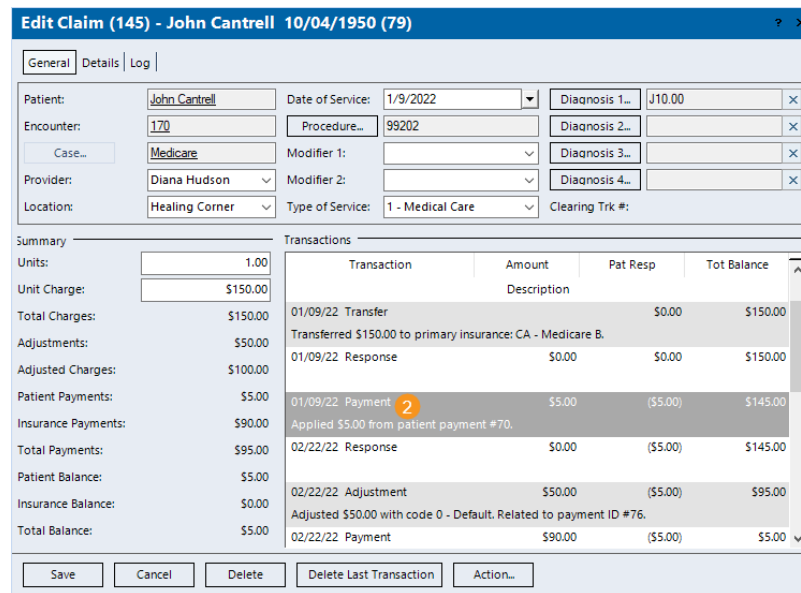
- Post an adjustment related to a specific Payment record and use that payment's posting date.
- Post the adjustment on the Claim record to use the current posting date, and if applicable, relate the adjustment to a specific Payment record.

## Post Adjustment on Payment Record

Follow the steps below to locate and open the specific Payment record related to the adjustment then post the adjustment amount(s).

1. Click **Encounters > Track Claim Status**. The *Find Claim* window opens.
  - If the Payment record details (e.g., payment ID, check number, payer) are available, click **Encounters > Find Payments**. Find the payment and double click to open it. The *Edit Payment* window opens then proceed to step 3.
2. Under the *Transactions* section, double click the *Payment* transaction line for the Payment record the adjustment is related to. The *Edit Payment* window opens.
 

**Note:** The *Payment* transaction line description includes the applied payment amount, Payment ID number, and the source (e.g., patient, insurance).



**Edit Claim (145) - John Cantrell 10/04/1950 (79)**

General | Details | Log

Patient: John Cantrell Date of Service: 1/9/2022 Diagnosis 1: J10.00

Encounter: 170 Procedure: 99202 Diagnosis 2:

Case: Medicare Modifier 1: Diagnosis 3:

Provider: Diana Hudson Modifier 2: Diagnosis 4:

Location: Healing Corner Type of Service: 1 - Medical Care Clearing Trk #:

**Summary**

Units:	1.00
Unit Charge:	\$150.00
Total Charges:	\$150.00
Adjustments:	\$50.00
Adjusted Charges:	\$100.00
Patient Payments:	\$5.00
Insurance Payments:	\$90.00
Total Payments:	\$95.00
Patient Balance:	\$5.00
Insurance Balance:	\$0.00
Total Balance:	\$5.00

**Transactions**

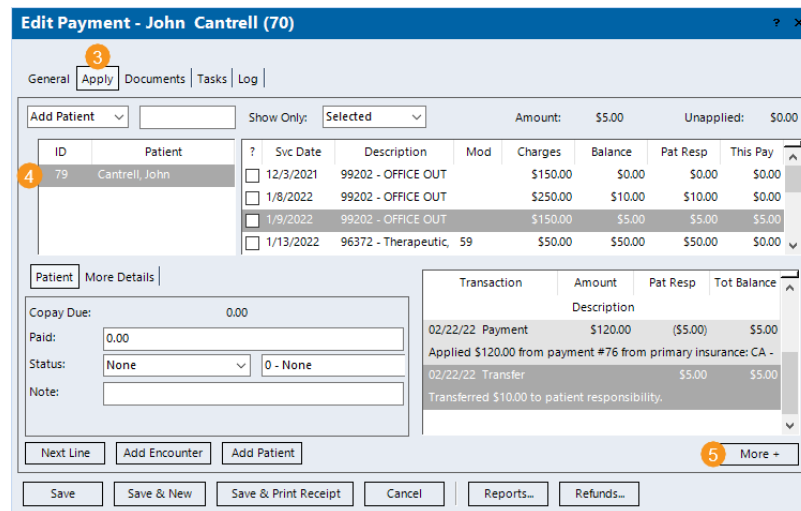
Transaction	Amount	Pat Resp	Tot Balance
01/09/22 Transfer		\$0.00	\$150.00
Transferred \$150.00 to primary insurance: CA - Medicare B.			
01/09/22 Response	\$0.00	\$0.00	\$150.00
01/09/22 Payment <b>2</b>	\$5.00	(\$5.00)	\$145.00
Applied \$5.00 from patient payment #70.			
02/22/22 Response	\$0.00	(\$5.00)	\$145.00
02/22/22 Adjustment	\$50.00	(\$5.00)	\$95.00
Adjusted \$50.00 with code 0 - Default. Related to payment ID #76.			
02/22/22 Payment	\$90.00	(\$5.00)	\$5.00

Save Cancel Delete Delete Last Transaction Action...

(Continued next page...)

## Post Adjustment on Payment Record, cont.

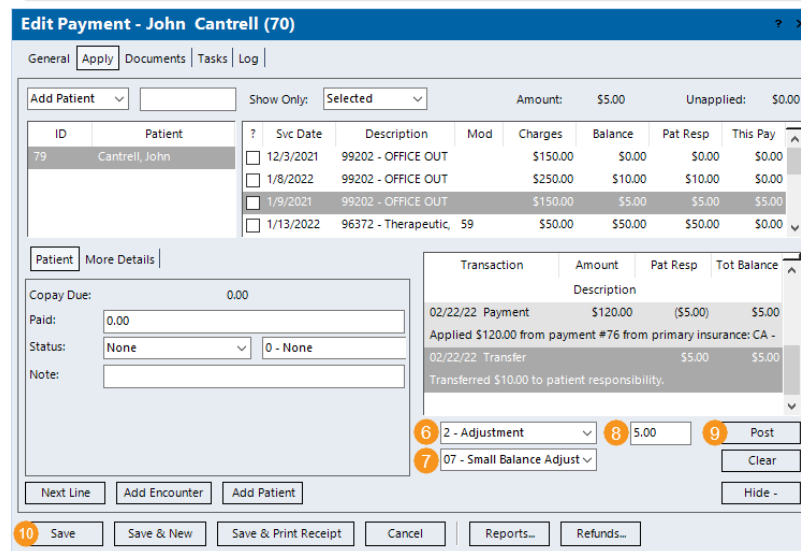
3. Select the **Apply** tab. The additional payment details display.
4. Click to select the patient, encounter, and/or service line with the balance that needs to be adjusted.
5. Click **More +** in the lower right of the window. Additional options display.



ID	Patient	?	Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Pay
79	Cantrell, John		12/3/2021	99202 - OFFICE OUT		\$150.00	\$0.00	\$0.00	\$0.00
			1/8/2022	99202 - OFFICE OUT		\$250.00	\$10.00	\$10.00	\$0.00
			1/9/2022	99202 - OFFICE OUT		\$150.00	\$5.00	\$5.00	\$5.00
			1/13/2022	96372 - Therapeutic, 59		\$50.00	\$50.00	\$50.00	\$0.00

Transaction	Amount	Pat Resp	Tot Balance
02/22/22 Payment	\$120.00	(\$5.00)	\$5.00
Applied \$120.00 from payment #76 from primary insurance: CA -			
02/22/22 Transfer		\$5.00	\$5.00
Transferred \$10.00 to patient responsibility.			

6. Click the **drop-down arrow** and select 2 - *Adjustment*. Once selected, additional fields become available.
7. Click the **drop-down arrow** and select the appropriate adjustment code.
8. Enter the amount that needs to be adjusted.
9. Click **Post**. The *Adjustment* transaction line is posted.
  - If the adjustment creates a zero balance, click the **drop-down arrow** and select *Settle* to settle the claim. Then, click **Post**. The *Settled* transaction line is posted.
10. Click **Save**.



ID	Patient	?	Svc Date	Description	Mod	Charges	Balance	Pat Resp	This Pay
79	Cantrell, John		12/3/2021	99202 - OFFICE OUT		\$150.00	\$0.00	\$0.00	\$0.00
			1/8/2022	99202 - OFFICE OUT		\$250.00	\$10.00	\$10.00	\$0.00
			1/9/2021	99202 - OFFICE OUT		\$150.00	\$5.00	\$5.00	\$5.00
			1/13/2022	96372 - Therapeutic, 59		\$50.00	\$50.00	\$50.00	\$0.00

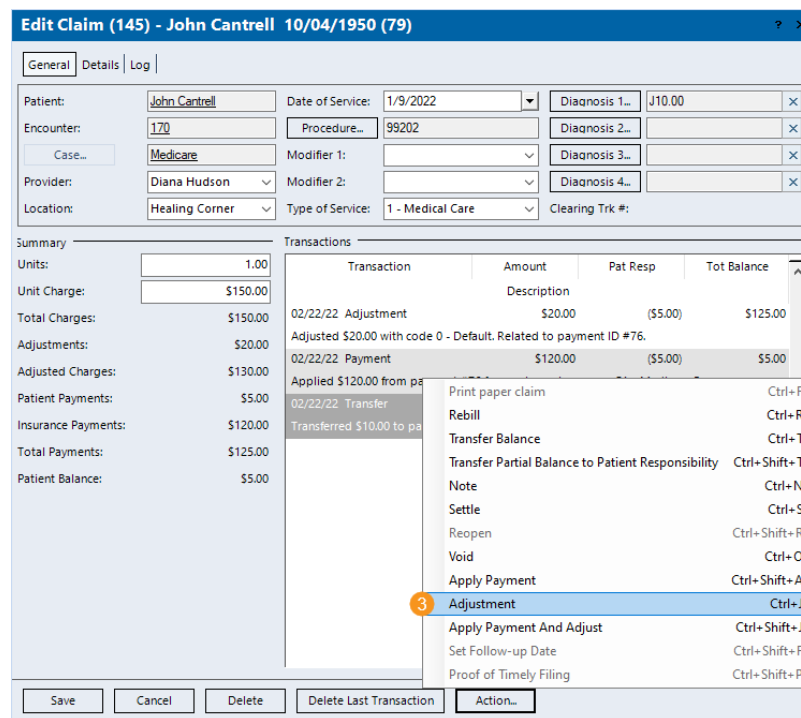
Transaction	Amount	Pat Resp	Tot Balance
02/22/22 Payment	\$120.00	(\$5.00)	\$5.00
Applied \$120.00 from payment #76 from primary insurance: CA -			
02/22/22 Transfer		\$5.00	\$5.00
Transferred \$10.00 to patient responsibility.			



## Post Adjustment on Claim Record

Follow the steps below to post the adjustment on the Claim record to use the current posting date, and if applicable, relate the adjustment to a specific Payment record.

1. Click **Encounters > Track Claim Status**. The *Find Claim* window opens.
2. Find the claim with the balance that needs to be adjusted then double click to open it. The *Edit Claim* window opens.
3. Click **Action** and select *Adjustment* from the menu. Additional options display.



**Edit Claim (145) - John Cantrell 10/04/1950 (79)**

General Details Log

Patient: John Cantrell Date of Service: 1/9/2022 Diagnosis 1: J10.00  
 Encounter: 170 Procedure: 99202 Diagnosis 2:  
 Case: Medicare Modifier 1: Diagnosis 3:  
 Provider: Diana Hudson Modifier 2: Diagnosis 4:  
 Location: Healing Corner Type of Service: 1 - Medical Care Clearing Trk #:

Summary

Units: 1.00  
 Unit Charge: \$150.00  
 Total Charges: \$150.00  
 Adjustments: \$20.00  
 Adjusted Charges: \$130.00  
 Patient Payments: \$5.00  
 Insurance Payments: \$120.00  
 Total Payments: \$125.00  
 Patient Balance: \$5.00

Transactions

Transaction	Amount	Pat Resp	Tot Balance
02/22/22 Adjustment	\$20.00	(\$5.00)	\$125.00
Adjusted \$20.00 with code 0 - Default. Related to payment ID #76.			
02/22/22 Payment	\$120.00	(\$5.00)	\$5.00
Applied \$120.00 from pa			
02/22/22 Transfer			
Transferred \$10.00 to pa			

Print paper claim Ctrl+F  
 Rebill Ctrl+R  
 Transfer Balance Ctrl+T  
 Transfer Partial Balance to Patient Responsibility Ctrl+Shift+T  
 Note Ctrl+N  
 Settle Ctrl+S  
 Reopen Ctrl+Shift+R  
 Void Ctrl+O  
 Apply Payment Ctrl+Shift+A  
**Adjustment Ctrl+J**  
 Apply Payment And Adjust Ctrl+Shift+J  
 Set Follow-up Date Ctrl+Shift+F  
 Proof of Timely Filing Ctrl+Shift+P

Save Cancel Delete Delete Last Transaction Action...

(Continued next page...)

## Post Adjustment on Claim Record, cont.

4. **Type:** Defaults to 2 - *Adjustment*.
5. **Posting Date:** Defaults to the current date. If necessary, enter a different posting date.
6. **Adjustment:** Enter the amount that needs to be adjusted.
7. **Adjustment Code:** Click the **drop-down arrow** and select the appropriate adjustment code.
8. **Reason Code:** Click the **drop-down arrow** and select the appropriate reason code for the balance.

**Edit Claim (145) - John Cantrell 10/04/1950 (79)**

General Details Log

Patient: John Cantrell Date of Service: 1/9/2022 Diagnosis 1: J10.00  
 Encounter: 170 Procedure: 99202 Diagnosis 2:  
 Case: Medicare Modifier 1: Diagnosis 3:  
 Provider: Diana Hudson Modifier 2: Diagnosis 4:  
 Location: Healing Corner Type of Service: 1 - Medical Care Clearing Trk #:

**Summary**

Units: 1.00  
 Unit Charge: \$150.00  
 Total Charges: \$150.00  
 Adjustments: \$20.00  
 Adjusted Charges: \$130.00  
 Patient Payments: \$5.00  
 Insurance Payments: \$120.00  
 Total Payments: \$125.00  
 Patient Balance: \$5.00

**Transactions**

Transaction	Amount	Pat Resp	Tot Balance
02/22/22 Adjustment	\$20.00	(\$5.00)	\$125.00
Adjusted \$20.00 with code 0 - Default. Related to payment ID #76.			
02/22/22 Payment	\$120.00	(\$5.00)	\$5.00
Applied \$120.00 from payment #76 from primary insurance: CA - Medicare B.			
02/22/22 Transfer		\$5.00	\$5.00
Transferred \$10.00 to patient responsibility.			

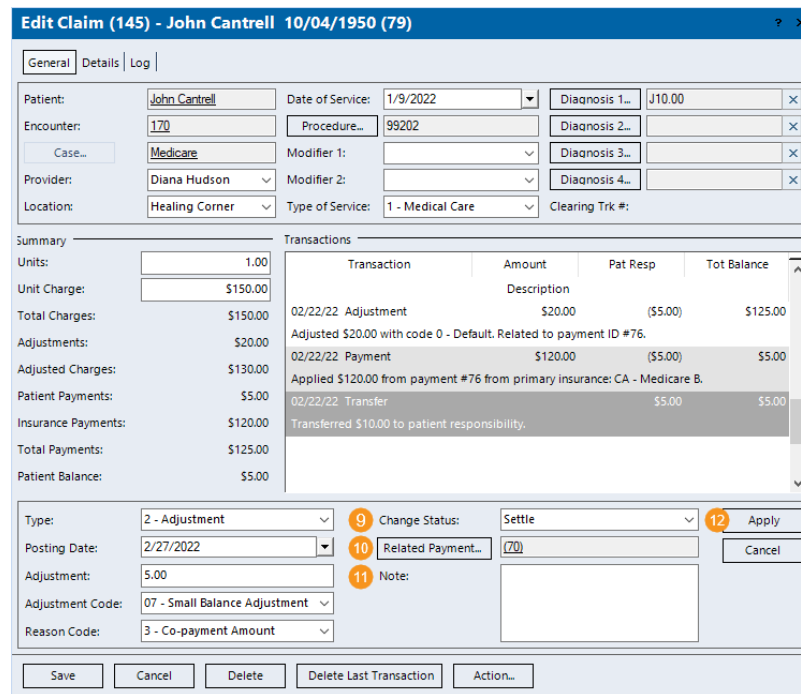
4 Type: 2 - Adjustment Change Status: Settle Apply  
 5 Posting Date: 2/27/2022 Related Payment: (70) Cancel  
 6 Adjustment: 5.00 Note:  
 7 Adjustment Code: 07 - Small Balance Adjustment  
 8 Reason Code: 3 - Co-payment Amount

Save Cancel Delete Delete Last Transaction Action...

(Continued next page...)

## Post Adjustment on Claim Record, cont.

9. **Change Status:** Click the **drop-down arrow** and select the appropriate status update.
  - If there's a balance after the adjustment, select to *Bill patient* or *Bill payer*.
  - If the adjustment creates a zero balance, select *Settle* to settle the claim.
  - To keep the current status after the adjustment, select *None*.
10. **Related Payment:** If applicable, click **Related Payment** to search and select a Payment record the adjustment is related to.
11. **Note:** Enter any internal notes related to the adjustment that will display when viewing transaction line details on the Claim record.
12. Verify the information entered is correct. Then, click **Apply**. The *Adjustment* transaction line is posted and automatically saved. If the option to change the status was selected, an additional transaction line is posted.



**Edit Claim (145) - John Cantrell 10/04/1950 (79)**

General | Details | Log

Patient: John Cantrell Date of Service: 1/9/2022 Diagnosis 1: J10.00  
 Encounter: 170 Procedure: 99202 Diagnosis 2:  
 Case: Medicare Modifier 1: Diagnosis 3:  
 Provider: Diana Hudson Modifier 2: Diagnosis 4:  
 Location: Healing Corner Type of Service: 1 - Medical Care Clearing Trk #:

**Summary**

Units:	1.00
Unit Charge:	\$150.00
Total Charges:	\$150.00
Adjustments:	\$20.00
Adjusted Charges:	\$130.00
Patient Payments:	\$5.00
Insurance Payments:	\$120.00
Total Payments:	\$125.00
Patient Balance:	\$5.00

**Transactions**

Transaction	Amount	Pat Resp	Tot Balance
02/22/22 Adjustment	\$20.00	(\$5.00)	\$125.00
Adjusted \$20.00 with code 0 - Default. Related to payment ID #76.			
02/22/22 Payment	\$120.00	(\$5.00)	\$5.00
Applied \$120.00 from payment #76 from primary insurance: CA - Medicare B.			
02/22/22 Transfer		\$5.00	\$5.00
Transferred \$10.00 to patient responsibility.			

Type: 2 - Adjustment Change Status: Settle 9  
 Posting Date: 2/27/2022 10 Related Payment: (70)  
 Adjustment: 5.00 11 Note:  
 Adjustment Code: 07 - Small Balance Adjustment  
 Reason Code: 3 - Co-payment Amount

Apply Cancel

Save Cancel Delete Delete Last Transaction Action...

# Learn More

## Help Center

Explore [helpme.kareo.com](https://helpme.kareo.com) to view additional help resources, monthly product release notes, help articles, guides, training videos, [contact Customer Care](#), and more.

## Kareo University

Log into [app.kareo.com](https://app.kareo.com) to access Kareo University and register for live trainings, view pre-designed courses and eLearnings. Review the [Kareo University](#) help article for more details.

## Guides

Review the Billing section of the [User Guides](#) page for additional resources to help set up your billing company for success.



Kareo is the leading cloud-based complete medical technology platform purpose-built to meet the unique needs of independent practices in more than 45 specialties.

Today Kareo helps over 75,000 providers in all 50 states run more efficient and profitable practices, while delivering outstanding patient care. The Kareo technology platform is the first to help independent practices find more patients, manage their care with a fully certified and easy-to-use EHR, and get paid quickly all in one complete and integrated package.

Kareo has received extensive industry recognition, including the Deloitte Technology Fast 500, Inc. 5000, and Black Book's #1 Integrated EHR, Practice Management and Medical Billing vendor, as well as ranking at the top of the Leader Quadrant in the FrontRunners Software Analysis of EHR. Kareo's growth further demonstrates the expansion and vitality of the independent practice market in the U.S. With offices across the country, Kareo's mission is to help independent practices succeed in an ever-changing healthcare market. More information can be found at [www.kareo.com](http://www.kareo.com) or by calling 888-775-2736.