



# What's New in DAQbilling® v4.0.8

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The latest DAQbilling update v 4.0.8 includes enhancements and corrections for issues that occurred in the previous version(s) This document provides details about the enhancements and corrections.

## ENHANCEMENTS

- **Identifying File Migration / Interface Error Issues**

A tool has been added that alerts users when there is an issue with files transferred to DAQbilling from an outside system. Specifically, when there is a file migration issue and there are interface error messages that have not been reviewed, a new “Interface Messages” icon appears in the upper right corner of the DAQbilling application window.



When the user rests his or her mouse on the icon, a Tooltip message appears displaying the number of errors that need to be reviewed—for example, “There are 5 un-reviewed interface error messages.”

When the user clicks the icon, the Interface Review window appears displaying the error message(s).

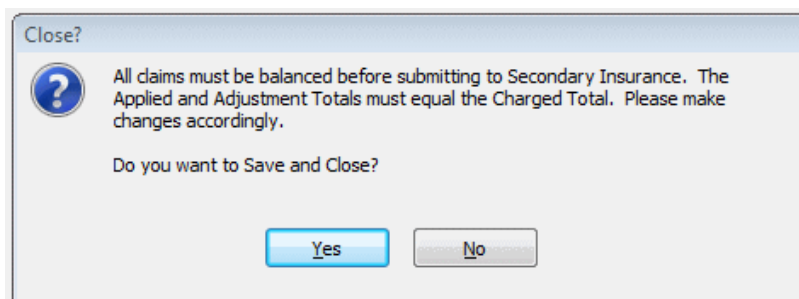
- **Customizing the Interface Review Window**

Users now can customize the items that appear in the Interface Review menu. When selected, a new checkbox, “Display Errors Only,” configures the window so that only error messages will appear.



- **Facilitating Balancing Claims Prior to Submitting to Secondary Insurance**

Since claims must be balanced prior to submitting to secondary insurance, a new warning message has been added when you click to save a payment and the payment is not balanced. Specifically, the system checks to see if the total of the “Applied” and “Adjusted” columns is equal to the Charged amount. The message reminds you to balance the claim before posting the payment. After you have applied the payments to the line items, transferred to secondary insurance, and clicked OK to complete the payment posting process, the new message appears.



- To continue without amending the payment, click **Yes**. Note that you must return to the claim and balance it, otherwise your claim will be rejected.
- To return to the payment immediately and balance the transaction, click **No** and review the payment information. Once you have verified it balances (making any necessary changes to do so), click **OK**.

The following information explains how to properly balance secondary payments.

## Secondary Payment Posting

When entering a payment that must be submitted to secondary insurance, the primary payment should be entered in the following manner so that the encounter is balanced properly before proceeding to secondary insurance.

- 1 On the **Insurance Payment** menu, open an encounter and enter the **Allowed** and **Applied** amounts.

Insurance Payment [6204]

Payment Type: **INS - INSURANCE CHECK** Dep No: **76** Deposit 5/4/2011 Payment Date: 7/13/2012

Payee/Check Number/Description: BCBS Ck # 123456 Check Amount: 143.45 Withholdings: 0.00 Additions: 0.00 Gross Payment: 143.45 Applied: 143.45 Unapplied: 0.00

Encounter ID: or Patient No: or Guarantor ID: **Fetch**

Cell number 555-555-1111 ☒ Prompt Before Delete

Use F4 to toggle between grids/F2 to return to the encounter ID field

Patient No	Patient Name	Location	Encounter	DOS	Start Bal	Payment From	Exp	Transfer
1000	KADIDDLEHOPP	ADVANCED CHRIOP	1220	7/13/2012	\$667.00	BLUE CROSS BLUE SHII		Transfer Needed

Proc (DOS)	Charged	Start Balance	Allowed	Applied	Adjusted	Ending Balar	Adj Code	Adj Group	Adj Reason
99215 (7/13/2012)	255.00	255.00	76.22	53.35	178.78	22.87		CO - Contr	45 - Charges exceed yr
95921 (7/13/2012)	149.00	149.00	46.90	32.83	102.10	14.07		CO - Contr	45 - Charges exceed yr
95922 (7/13/2012)	178.00	178.00	56.65	39.66	121.35	16.99		CO - Contr	45 - Charges exceed yr
93040 (7/13/2012)	28.00	28.00	10.11	7.08	17.89	3.03		CO - Contr	45 - Charges exceed yr
36415 (7/13/2012)	16.00	16.00	4.00	2.80	12.00	1.20		CO - Contr	45 - Charges exceed yr
84443 (7/13/2012)	41.00	41.00	11.04	7.73	29.96	3.31		CO - Contr	45 - Charges exceed yr
	\$667.00	\$667.00	\$204.92	\$143.45	\$462.08	\$61.47			

- 2 To make sure the encounter balances, next you must add the adjustment line. Click the **Add Adj** button located at the bottom of the screen.
- 3 In the **Adjusted** field, type the ending balance (in the example shown above, \$22.87). The **Adj Group Code** should be "PR" and the **Adj Reason** will be "1" for Deductible, "2" for Coinsurance Amount, or "3" for Co-pay.

Proc (DOS)	Charged	Start Balance	Allowed	Applied	Adjusted	Ending Balar	Adj Code	Adj Group	Adj Reason
99215 (7/13/2012)	255.00	255.00	76.22	53.35	178.78	22.87		CO - Contr	45 - Charges exceed yr
					22.87		PR - Patient	2 - Coinsurance Amoun	
95921 (7/13/2012)	149.00	149.00	46.90	32.83	102.10	14.07		CO - Contr	45 - Charges exceed yr
95922 (7/13/2012)	178.00	178.00	56.65	39.66	121.35	16.99		CO - Contr	45 - Charges exceed yr
93040 (7/13/2012)	28.00	28.00	10.11	7.08	17.89	3.03		CO - Contr	45 - Charges exceed yr
36415 (7/13/2012)	16.00	16.00	4.00	2.80	12.00	1.20		CO - Contr	45 - Charges exceed yr
84443 (7/13/2012)	41.00	41.00	11.04	7.73	29.96	3.31		CO - Contr	45 - Charges exceed yr
	\$667.00	\$667.00	\$204.92	\$143.45	\$484.95	\$61.47			

Lookup Remove Add Adj Notes Review History 1 2 3 P Save and Print OK Cancel


- 4 Continue applying the remainder of the payment.

- 5 To verify that the encounter balances correctly, add the **Adjusted** total and the **Applied** total—which should equal your **Charged** total (in the example: 523.55 + 143.45 = 667.00).

Proc (DOS)	Charged	Start Balance	Allowed	Applied	Adjusted	Ending Balan	Adj Code	Adj Group	Adj Reason
▶ 99215 (7/13/2012)	255.00	255.00	76.22	53.35	178.78	22.87		CO - Contr	45 - Charges exceed yr
					22.87			PR - Patient	2 - Coinsurance Amoun
95921 (7/13/2012)	149.00	149.00	46.90	32.83	102.10	14.07		CO - Contr	45 - Charges exceed yr
					14.07			PR - Patient	179 - Payment adjuster
95922 (7/13/2012)	178.00	178.00	56.65	39.66	121.35	16.99		CO - Contr	45 - Charges exceed yr
					16.99			PR - Patient	2 - Coinsurance Amoun
93040 (7/13/2012)	28.00	28.00	10.11	7.08	17.89	3.03		CO - Contr	45 - Charges exceed yr
					3.03			PR - Patient	2 - Coinsurance Amoun
36415 (7/13/2012)	16.00	16.00	4.00	2.80	12.00	1.20		CO - Contr	45 - Charges exceed yr
					1.20			PR - Patient	2 - Coinsurance Amoun
84443 (7/13/2012)	41.00	41.00	11.04	7.73	29.96	3.31		CO - Contr	45 - Charges exceed yr
					3.31			PR - Patient	2 - Coinsurance Amoun
	<b>\$667.00</b>	<b>\$667.00</b>	<b>\$204.92</b>	<b>\$143.45</b>	<b>\$523.55</b>	<b>\$61.47</b>			

- 6 Transfer the encounter to secondary insurance and click **OK** to complete the payment.
- 7 If the payment is not balanced, in the **Close?** dialog box click **No** and adjust the amounts so that it balances correctly.

Close?

 All claims must be balanced before submitting to Secondary Insurance. The Applied and Adjustment Totals must equal the Charged Total. Please make changes accordingly.

Do you want to Save and Close?

## CORRECTIONS

- **Handling Duplicate Social Security Numbers for Patient and Guarantor**

When creating or editing a patient record and the social security number entered is the same as a social security number already existing in the system for an unrelated Guarantor, a confirmation message appears, "The SSN of this Patient already exists in the guarantor database. Do you want to update the guarantor database now." To save the social security number for the selected patient, the user clicks the "Yes." However, in the previous version when the user clicked "Yes," an error occurred, "Patient Entry Error: Parameter Not Found: pCOUNTRYCODE." This has been corrected so that the error no longer occurs and the patient record can be saved as expected.