

Writing off a Claim Item & Entering a Partial Payment in WITS

1. **Getting here:** Login, select the **Facility**, select **Agency**, **Billing**, and **Payment List** on the Navigation Pane (left menu).
2. Click on **Add Plan Payment** to record a payment.

NOTE: Search the Payment List to verify a payment has not already been entered. If a payment exists, go to the Profile in the Actions column before proceeding.

3. Choose **Plan Name**.
4. Enter **Payment Amount**.

NOTE: The Payment Amount should include the partial amount that will be accepted as payment in full, if any.

5. Click **Save**.

Home Page | Payment Search

Agency Contacts

Agency

Agency List

GPRA Discharge Due

GPRA Followup Due

Facility List

Staff List

Tx Team Groups

System Usage

Drug Screening

Billing

Invoicing

Claim Item List

Claim Batch List

Encounter List

EOB Transaction List

Payment List

Payment Profile

Payment Search

Payer Plan [] First Name [] Last Name []

Post # [] Posted Date [] Reference []

Payment Amount [] Unapplied Amount []

Contractor []

Clear Go

Payment List (Export) Add Contract Payment Add Client Payment Add Plan Payment

Actions	Post #	Payer Name	Posted	Payment Amount	Unapplied Amount	Intended For	Created By

Total Payment: \$0.00

Payment Profile

Payment # [] Posted Date 10/24/2014

Plan Name Blue Shield of ID (Regence), P... Receipt Date 10/24/2014

Client Name [] Created Date []

Transaction Type Payment Created By []

Reference [] Payment Amount 40.00

Comment [] Unapplied Amount []

Intended For [] Check/EFT Date []

Administrative Actions

Show Payment Application Apply Payment

Cancel Save Finish

Apply Payment

1. Click **Apply Payment**.
2. Locate client record to apply the payment against. **Check the box to the right of the Actions column to select the claim.**
3. Click **Paid in Full** in the Actions column to apply the payment.
4. Click **Confirm**.

Payment Profile

Payment # 324 Posted Date 10/24/2014
 Plan Name Blue Shield of ID (Regence), PO Box Receipt Date 10/24/2014
 Client Name Created Date 10/24/2014 5:44 PM
 Transaction Type **Payment** Created By Williams, Denise
 Reference Payment Amount \$40.00
 Comment Unapplied Amount \$40.00
 Intended For Check/EFT Date

Administrative Actions
[Show Payment Application](#) **Apply Payment**

Cancel Save Finish

Payment Application Claim Search

Payment # 332 Unapplied Amount \$5.00 Order of Benefits

First Name Last Name Claim #
 Member # Plan Name Self Pay 10%
 Claim Balance >0 Claim Charge

Clear Go Finish

Payment Application Claim List

Actions	Claim #	Client Name	Member #	Charge	Claim Balance	DOS	Order of Benefits
<input type="checkbox"/>	2017	Lad, Chad		\$240.00	\$240.00	2014/07/14-2014/07/14	Primary
<input type="checkbox"/>	2109	Lad, Chad		\$80.00	\$80.00	2014/10/14-2014/10/14	Primary
<input type="checkbox"/>	2110	Lad, Chad		\$80.00	\$80.00	2014/10/13-2014/10/13	Primary
<input type="checkbox"/>	2120	Lad, Chad		\$80.00	\$80.00	2014/10/13-2014/10/13	Secondary
<input type="checkbox"/>	2121	Lad, Chad		\$80.00	\$80.00	2014/10/15-2014/10/15	Primary
<input checked="" type="checkbox"/>	2148	Lad, Chad		\$80.00	\$80.00	2014/10/22-2014/10/22	Primary

Paid in Full

Paid In Full Confirmation

Payment # 332 Posted Date 10/29/2014
 Plan Name Self Pay 10% Receipt Date 10/29/2014
 Client Name Reference
 Amount \$5.00 Unapplied Amount \$5.00

Selected Claims

Claim #	Client Name	Member #	Charge	Claim Balance	DOS	Order of Benefits
2148	Lad, Chad		\$80.00	\$80.00	2014/10/22-2014/10/22	Primary

Total to be paid: \$80.00
 Current Unapplied Amount: \$5.00
 New Unapplied Amount: -\$75.00

Partial Payment accepted as Payment in Full. Remainder shown as write-off

Cancel Confirm