

Reconciling Payments from BPA and Payments in WITS

Reviewing Payment information

1. Outside of WITS, review the memo line of the check or the electronic deposit. The memo line lists the Payment numbers paid with this deposit. If you are unable to view the memo line for an electronic deposit, contact your financial institution.

NOTE: Only the first four payment numbers will display on the memo line.

2. Getting here in WITS: Login, select the **Facility**, select **Agency**, **Billing**, and **Payment List** on the navigation pane.

3. Enter **Search Criteria** if necessary and click **Go**.

Idaho-WITS Training
User: Trainee05, Treatment
Loc: Provider Training Agency, Treatment Location 1
Client:
Printable View
October 2013
Logout

Payment Search

Payor Plan First Name Last Name
Pmt # Posted Date Reference
Payment Amount Unapplied Amount
Contractor Idaho Department of Correctio Clear Go

Enter Search Criteria such as Contractor if necessary.

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

Pmt #	Payor Name	Posted	Payment Amount	Unapplied Amount	Intended For	Created By	Actions

Total Payment: \$0.00

- Click **Profile** for the payment you want to review.

NOTE: Per the BPA October 2013 FAQ, 5% will be deducted from provider payments for the provider incentive. This will account for the difference between the payment amount in WITS and the payment amount on the check or electronic deposit.

- Click **Show Payment Application**.

Payment Search

Payor Plan: First Name: Last Name:
Pmt #: Posted Date: Reference:
Payment Amount: Unapplied Amount:
Contractor: Idaho Department of Corrections

4

Payment List (Export) [Add Contract Payment](#) [Add Client Payment](#) [Add Plan Payment](#)

Pmt#	Payor Name	Posted	Payment Amount	Unapplied Amount	Intended For	Created By	Actions
261	Idaho Department of Corrections - 4	10/25/2013	\$24.84	\$0.00		Buskey, Michelle	Profile
260	Idaho Department of Corrections - 4	10/25/2013	\$187.52	\$0.00		Buskey, Michelle	Profile
259	Idaho Department of Corrections - 4	10/25/2013	\$60.70	\$0.00		Buskey, Michelle	Profile
257	Idaho Department of Corrections - 4	10/16/2013	\$14.61	\$0.00		Buskey, Michelle	Profile
256	Idaho Department of Corrections - 4	10/16/2013	\$60.26	\$0.00		Buskey, Michelle	Profile
253	Idaho Department of Corrections - 4	10/16/2013	\$392.83	\$0.00		Buskey, Michelle	Profile
252	Idaho Department of Corrections - 4	10/9/2013	\$25.90	\$0.00		Teeter, Jamie, LPC	Profile
251	Idaho Department of Corrections - 4	10/5/2013	\$11.16	\$0.00		Conrad, Jennifer, BS	Profile
250	Idaho Department of Corrections - 4	10/5/2013	\$1,383.52	\$0.00		Conrad, Jennifer, BS	Profile
248	Idaho Department of Corrections - 4	9/23/2013	\$0.00	\$0.00		Buskey, Michelle	Profile
241	Idaho Department of Corrections - 4	9/16/2013	\$118.25	\$0.00		Process, Scheduled	Profile
240	Idaho Department of Corrections - 4	9/16/2013	\$49.60	\$0.00		Process, Scheduled	Profile
239	Idaho Department of Corrections - 4	9/16/2013	\$13.50	\$0.00		Process, Scheduled	Profile
238	Idaho Department of Corrections - 4	9/11/2013	\$1,064.85	\$0.00		Process, Scheduled	Profile
234	Idaho Department of Corrections - 4	9/10/2013	\$62.40	\$0.00		Process, Scheduled	Profile

Total Payment: \$13,411.16

Payment Profile

Payment #: 253 Posted Date: 10/16/2013
Contract Name: IDOC-Provider Training Agency Receipt Date: 10/16/2013
Client Name: Created Date: 10/16/2013 3:55 PM
Transaction Type: Payment Created By: Buskey, Michelle
Reference: 64 Payment Amount: \$392.83
Comment: Unapplied Amount: \$0.00
Check/EFT Date:
Intended For:

5

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

- The EOB Transaction List displays for the selected payment. **Review any Adjusted Encounters, document the adjustment amount,** and click **Finish.**

NOTE: If there are a large amount of adjusted encounter notes, you may want to use the Export function.

- Click **Finish.**

EOB Transaction Search

EOB Transaction Type
 First Name
 Payment #

Enc #
 Last Name
 Payor Name

6

EOB Transaction List (Export)

Enc #	Client Name	Svc Date	Transaction Type	Adjustment Reason	App Amt	App Date	Pmt #	Payor Name	Actions
2833	Pear, O	10/6/2013	Payment		\$13.50	10/16/2013	253	Idaho Department of Corrections - 4	
2845	Mango, A	10/1/2013	Payment		\$24.84	10/16/2013	253	Idaho Department of Corrections - 4	
2851	Pear, O	10/1/2013	Payment		\$13.50	10/16/2013	253	Idaho Department of Corrections - 4	
2852	Pear, O	10/2/2013	Payment		\$13.50	10/16/2013	253	Idaho Department of Corrections - 4	
2853	Pear, O	10/8/2013	Patient Responsibility	Co-payment Amount	\$1.86	10/16/2013	253	Idaho Department of Corrections - 4	
2853	Pear, O	10/8/2013	Payment		\$10.54	10/16/2013	253	Idaho Department of Corrections - 4	
2858	Grape, K	10/1/2013	Payment		\$6.21	10/16/2013	253	Idaho Department of Corrections - 4	
2859	Grape, K	10/1/2013	Payment		\$12.40	10/16/2013	253	Idaho Department of Corrections - 4	
2860	Grape, K	10/4/2013	Payment		\$6.21	10/16/2013	253	Idaho Department of Corrections - 4	
2861	Grape, K	10/4/2013	Payment		\$11.10	10/16/2013	253	Idaho Department of Corrections - 4	
2862	Grape, K	10/1/2013	Payment		\$13.50	10/16/2013	253	Idaho Department of Corrections - 4	
2863	Grape, K	10/7/2013	Payment		\$5.55	10/16/2013	253	Idaho Department of Corrections - 4	
2864	Grape, K	10/6/2013	Payment		\$13.50	10/16/2013	253	Idaho Department of Corrections - 4	
2866	Pear, Q	10/8/2013	Payment		\$6.21	10/16/2013	253	Idaho Department of Corrections - 4	
2882	Aardvark, Denise	10/10/2013	Payment		\$0.00	10/16/2013	253	Idaho Department of Corrections - 4	
2883	Zebra, Dean	9/12/2013	Payment		\$198.40	10/16/2013	253	Idaho Department of Corrections - 4	
2884	Grape, K	10/9/2013	Payment		\$12.40	10/16/2013	253	Idaho Department of Corrections - 4	
2885	Grape, K	10/9/2013	Payment		\$12.42	10/16/2013	253	Idaho Department of Corrections - 4	
2886	Grape, K	10/9/2013	Payment		\$13.50	10/16/2013	253	Idaho Department of Corrections - 4	
2887	Grape, K	10/9/2013	Payment		\$5.55	10/16/2013	253	Idaho Department of Corrections - 4	

Note that Encounter 2853 has a co-payment of \$1.86

Payment Profile

Payment #
 Contract Name
 Client Name
 Transaction Type
 Reference
 Comment

Posted Date
 Receipt Date
 Created Date
 Created By
 Payment Amount
 Unapplied Amount
 Check/EFT Date

Intended For

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

7

Reviewing Batch information

8. Select Claim Batch List on the navigation pane.

9. Enter the first Batch Number listed on the check memo line.

10. Set the Status to Empty and click Go.

Idaho-WITS Training
User: Trainee05, Treatment
Loc: Provider Training Agency, Treatment Location 1
Client:
Printable View
MedlinePlus
October 2013
Logout

- Home Page
- Agency ▾
- Agency List ▶
- Tx Team Groups ▶
- Billing ▾
- Invoicing
- Claim Item List
- Claim Batch List**
- Encounter List
- EOB Transaction List
- Payment List ▶
- Billing Transaction List
- Client Balance
- Cost Center
- Payor Plan List ▶
- Authorization List

Provider Claim Batch List

Plan Name
Billing Form
Batch #
FFS Type

Created Date
Transmit Date
Status

Clear Go

Claim Batch List (Export) [Download 837](#)

Batch #	Status	Batch For	FFS Type	Billing Form	Order	Charges	Service Mo/Yr	Created	Transmit	Actions

Claim Item List (Export)

Claim #	Item #	Client Name	CPT	Status	Auth #	Cost Center	Charge	Actions

11. Note the total charges for the first batch.
Enter the next Batch Number listed on the check memo line.

12. Set the Status to Empty and click Go.
Note the total charges for the second batch.

Provider Claim Batch List

Plan Name: Created Date:
 Billing Form: Transmit Date:
 Batch #: Status:
 FFS Type:

Clear Go

Claim Batch List (Export) Download 837

Batch #	Status	Batch For	FFS Type	Billing Form	Order	Charges	Service Mo/Yr	Created	Transmit	Actions
169	Accepted	IDOC-Provider Training Agency	FFS	WITS Batch	P	\$280.61		10/11/2013	10/11/2013	Claim Items Profile

Note the total charges for the Batch.

Provider Claim Batch List

Plan Name: Created Date:
 Billing Form: Transmit Date:
 Batch #: Status:
 FFS Type:

Clear Go

Claim Batch List (Export) Download 837

Batch #	Status	Batch For	FFS Type	Billing Form	Order	Charges	Service Mo/Yr	Created	Transmit	Actions

11

12

Provider Claim Batch List

Plan Name: Created Date:
 Billing Form: Transmit Date:
 Batch #: Status:
 FFS Type:

Clear Go

Claim Batch List (Export) Download 837

Batch #	Status	Batch For	FFS Type	Billing Form	Order	Charges	Service Mo/Yr	Created	Transmit	Actions
162	Accepted	IDOC-Provider Training Agency	FFS	WITS Batch	P	\$114.08		10/10/2013	10/10/2013	Claim Items Profile

Note the total charges for the second Batch.

Reconciling the Batches with the Payment

13. Outside of WITS, calculate the total of all batches.

Batch 169	280.61	Calculate the total for all batches. 
Batch 162	114.08	
Total for both batches	394.69	

14. Outside of WITS, subtract any adjustment amounts from the total batch amount. The final payment amount matches the Payment amount on the Payment List screen.

Total for both batches	394.69	Subtract any Co-Payment or Adjustment amounts from the total batch amount. 
Co-Payment Adjustment	-1.86	
Final Payment Amount	392.83	

NOTE: Per the BPA October 2013 FAQ, 5% will be deducted from provider payments for the provider incentive. This will account for the different between the payment amount in WITS and the payment amount on the check or electronic deposit.