

Explaining Basic Billing Concepts - How Does DrChrono Billing Work?

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- When patients come in for an appointment, they receive treatments and/or services and then are charged correspondingly.
 - Their charge(s) can be split into two categories: charges billed to insurance and charges billed to the patient.
- Charges billed to a patient will show up in the patient balance column. Payments can be recorded as cash, check, or credit and specified as Amex, Visa, Mastercard, or DrChrono Payments.
 - You can track a patient's balance through the 'Patient Payments' feature in the DrChrono EHR. It's recommended that you enter as much information as you have (i.e. check/money order number). Having this information will assist significantly if any issue surfaces and you need to research a payment.
 - You can customize the payment options by following the instructions in [this article](#).
- Periodically, you can send a patient their statement explaining the services and charges they have received in that given period. You can do this in the [Patient Statements](#) feature in the DrChrono EHR.
- Charges billed to insurance will be recorded in claims that can be tracked in the **Live Claims Feed (Billing > Live Claims Feed)** in the DrChrono EHR. Claims are held in the system until they are sent as a batch to our third-party clearinghouses, ePS, Change Healthcare, Trizetto, or Carisk Partners. Your claim is scrubbed twice--once by us and once by the clearinghouse. Once the claim has been scrubbed and passed, it is transmitted to the payer.
- In order for your claim to be processed, it is required that you fill out include patient demographics (name, address, DOB, gender) and insurance information (insurance name, payer ID, policy ID, billing codes with charges, NPI, tax ID, provider name and billing address).
- The payer will process the claim and return an electronic remittance advice (ERA) that details the payment, adjustment, and denial information. You can track your ERAs under the **Remittance Reports**. ** Note - ERAs will be returned only if you have signed up for them. Otherwise, they will either need to be retrieved from the payer portal or be received on paper.

If you have any questions, please reach out to your Account Manager or [support](#) and they will be glad to assist.

