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An Electronic Remittance Advice (ERA) is the electronic version of an insurance payer's explanation of benefits. It contains the claim adjudication information for posting to patient claims. Before adjudications can be posted, they must be processed into OP. The adjudications contained in each payment are displayed in the Adjudications tab of the Billing Center, and the payment itself is displayed in the ERA Payments tab of the Billing Center.

ERA (835) files can be automatically retrieved from supported clearinghouses. For offices that are contracted for e-billing but do not have a supported clearinghouse, you can still manually retrieve (fetch) and process ERA files.

Fetch and Process ERA Files

1. Navigate to the Adjudications tab of the Billing Center: **Billing tab > Billing Center button > Adjudications tab.**
2. Click the **Fetch Files** button to fetch/retrieve pending ERAs.

Note: This step only fetches/retrieves ERAs from an OP supported clearinghouse. If your office is contracted with a non-supported clearinghouse, and you are an On-Premise practice, please complete the following steps:

- a. Manually download the ERA file from your clearinghouse or payer website.
 - b. Save the file to your **claimnet** folder on your gdb_common server.
 - c. Once the files are saved, proceed to the next step.
3. Click the **Process** button. Adjudications are displayed on either the Matched or Unmatched tab of this screen, depending on whether or not OP was able to identify the matching claim to the adjudication as presented on the ERA file.

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Adjudications Tab of the Billing Center

The Adjudications tab of the Billing Center (**Billing tab > Billing Center button > Adjudications tab**) is only used if the practice has enrolled for Electronic Remittance Advice through their clearinghouse. The Adjudication tab shows

all claims that were finalized by the insurance payer and all pending claim adjudications that have been processed through (835) files. At the top of the screen are several options to select prior to processing new ERAs into OP.

- **Payment ID:** Use the drop-down or paste the check/ERA number here to only show the transactions for that Payment ID.
- *(Optional)* **Force Pay Date:** Used for instances of changing/matching your payment date in OP to the date of the deposits in your bank account. If left blank, the ERA will post using the ERA date and not the Pay Date.

Matched and Unmatched Tabs of Adjudications

- **Matched tab:** This grid shows adjudications with ERA transaction details linked by ERA transaction to OP claim numbers. Once an adjudication is approved for posting to a patient account, it is removed from this grid. When adjudications are initially processed into OP, they are categorized into one of the following match statuses (defined as an action to take):
 - **Unmatched:** OP cannot clearly identify the transaction being adjudicated, and must be matched to a pending claim before switching the status to Matched and approving.
 - **Matched:** Ready to be approved. The adjustments, payment, and patient responsibility will be posted to the patient's chart for the claim line.
 - **Review:** Flagged for further review based on the adjustment code reason. Further action is required; the user can change the match status to Discard (see Discard bullet below) so that there is no action taken.
 - **Appeal:** Flagged for appeal documentation to the specified payer. Once the appeal is generated, the user can change the match status to Discard (see Discard bullet below) so that there is no action taken.
 - **Denied:** Adjudication has been denied by insurance. Must be manually approved as Discard or Matched depending on the intention of the user. It is recommended to make a claim note for followup.
 - **Paid:** Deleted from the table with no action taken, as OP has determined that there is no insurance balance due on this claim.
 - **Repriced:** Flagged as pending repricing/reprocessing from the payer. Once an action has been taken, the user can switch match status to Discard (see Discard bullet below) so that there is no further action taken.
 - **Discard:** Deleted from the table with no action taken. Payment, adjustment, and/or patient responsibility is not posted to the patient chart for the claim. Essentially, the transaction is "thrown out". There is no record maintained.
- **Unmatched tab:** This grid shows adjudications with ERA transaction details that could not be matched by OP to a claim. These adjudications need to be manually matched against existing claims in order to be moved to the Matched tab for review and posting approval. On the bottom portion of this tab, OP lists possible matches based on patient name, service date, and CPT code. It is up to you to select the correct match. If, however,

there is no existing match in OP (possibly because the claim was billed in different software), the adjudication can be deleted from this grid.

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Post ERA Payments

Before posting ERA payments, you must first complete the [Fetch and Process](#) steps listed above. After adjudications have been processed into OP using the Fetch and Process workflow, the ERA payments are ready to be posted.

1. Navigate to the ERA Payments tab of the Billing Center: **Billing tab > Billing Center button > ERA Payments tab** or **Main Navigation Panel > Remits**.

2. Select a radio button to filter the tab by Posting Status:

- All
- Unposted (default selection)
- Out of balance
- Override Performed

Note: It is recommended to select the **Unposted** radio button to display the payments that have not yet been completely posted.

3. *(Optional)* Group the grid by the column header. It is most common to group the payments by Payer Name.

- a. Click the Payer Name column header.
- b. Drag and drop the column header to the top gray bar.

4. Click **+** next to a selected payer to expand the list of payments.

5. Click the **blue hyperlink** in the Unposted payments column. The Adjudications tab opens with the adjudications for that ERA populated.

Note: There may be certain lines that are highlighted in yellow in the unbalanced ERA. This highlight indicates that the ERA has a difference that is causing the Posted Payments and the Unposted Payments to not equal the Payment Amount. These lines should be reviewed prior to posting.

6. Click **+** to expand each adjudication.

7. Review the details of each adjudication, and edit the **Match status** if necessary.

8. Select the **Aprvd** (approved) checkbox for each adjudication.

Note: Individual transactions whose **Aprvd** checkbox is highlighted in yellow indicate that posting the transaction will cause the claim line to be out of balance. These transactions cannot be approved with a Match Status of Matched. By default, the Match Status is set to Discard. Transactions identified in yellow must be manually

posted to the claim. If you attempt to change the Match Status from Discard to Matched, the transaction will not be in balance and cannot be approved for posting.

9. Click the **Post Paymt** (post payment) button.
10. Click **Yes** to confirm you want to post all approved adjudications for all payments.

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Balance a Posted ERA

Once you have [posted an ERA](#) by following the steps above, you can balance the payments. It is important to make sure that postings balance to the ERA to ensure that there are no posting errors and that all adjudications received for the ERA have been reviewed and posted.

1. Navigate to the ERA Payments tab of the Billing Center: **Billing tab > Billing Center > ERA Payments tab.**
2. Locate the payer and ERA check #. Expand to locate the posted ERA.
3. Confirm the amounts in the **Posted Payments** column match the amount in the **Payment Amount** column.
4. If the Posted payments column amount does not match the Payment Amount column amount, click the ellipses button to view the transactions posted to the corresponding ERA, and make corrections as needed

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