WEEKLY ACTION REPORTS

Each week Sleep Impressions will send reports of open referrals and past visits that need your action. Below are suggestions steps based on the action needed.

REFERRALS ACTION NEEDED

Example: Unable to contact, Ready to Schedule, Missing Docs

- Go to Referrals list
- Search to filter for name or status
- Call or Cancel

Action Required ▼	Patient Last Name ▼	Appt Type ▼
Ready to Schedule	Brady	Consult/Records
Unable to contact	Austria	HST
Unable to contact	Marty	HST
Insruance Updated Needed	Roark	Consult/Records

VISIT ACTION NEEDED

Example: Unsigned, Signed Not Billed

- Have the provider go to the Consult tab to sign OR
- Go to Scheduler and Reschedule

Example: Signed Not Billed

- Go to Billing/Billing Sheet
- Check services and click Ready to Bill

Unsigned or Not sent to Billing ▼	Visit Date ▼	Appt Type ▼	Patient Firs ▼	Patient ID ▼
Signed not billed	11/19/24	Consult/Records	Christopher	rms-CM-22
Unsigned	12/4/24	Delivery	Christopher	rms-CM-22
Unsigned	1/6/25	Consult/Records	Linda	rms-LB-24

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SEMI-MONTHLY PAYMENTS REPORT

Sleep Impressions runs Semi-Monthly reports of payments collected in the two week period and sends your office a check for a percentage of the total amount collected. You will be sent the report via encrypted email.

The report will include insurance and patient payments and could include multiple patients, similar to the one below.

Patient(s)   **Service(s)**   **Date within 2 week check period**

	A	B	D	E	F	G	H	I	J	K	L	M	N	O	P
	Patient Name	Practice N	DOS	Claim#	CPT Code	Payer	Charge Fe	Ins Adjustm	Pat Writeo	Ins Payme	80% Ins P	Pat Payme	80% Pat P	Remainder	Payment/Adjustment
	R,N	Dentist2	11/4/24	RMSNR1D	E0486	Cigna	5500	3000			0		0	0	11/12/24 12:29
	R,N	Dentist2	11/4/24	RMSNR1D	E0486	Cigna	5500				0	268.94	215.152	0	11/12/24 14:02
	R,N	Dentist2	11/4/24	RMSNR1D	E0486	Cigna	5500			2231.06	1784.848		0	0	11/12/24 12:29
	R,N	Dentist2	9/30/24	RMSNR1B	99205	Cigna	150				0	150	120	0	11/12/24 14:01
	W,R	Dentist2	11/4/24	RMSRW15E	E0486	United Healthc	5500	4400			0		0	0	11/9/24 8:44
	W,R	Dentist2	11/4/24	RMSRW15E	E0486	United Healthc	5500				0	220	176	0	11/11/24 10:15
	W,R	Dentist2	11/4/24	RMSRW15E	E0486	United Healthc	5500			880	704		0	0	11/9/24 8:44
							Total	$ 7,400.00	$ -	$3,111.06	$2,488.85	$ 638.94	$ 511.15	$ -	

Total Sleep Impr Collection $ 3,750.00
Check Amount: 80% Provider Payment $ 3,000.00

* Report only shows collections during 2 week period. A complete list of payments per patient available in Ledger in RemManager

Total Ins and Patient PMTs   **Check AMT**

LEDGER

Claim #	ICN	Trace ID	Date From	Date To	Code	Description	M1	M2	M3	Amount	Units	Remainder	Diag 1	Diag 2	Diag 3	Diag 4	Provider	Payer	Date	Denial Code	Check No	Type	Action
RMSNR1D	4222424701838									5,500.00		0.00					Parsons						Pay
			2024-11-04	2024-11-04	E0486	Oral device/appliance custom fabrication	NU	KX		5500.00	1		G4733										Adj
					INSADJ	Insurance Adjustment				-3,000.00									2024-11-12				Delete
					ALLOW	$2,500.00 Allowable													2024-11-12				Delete
					DEDUCT	$21.05 Applied to Deductible													2024-11-12				Delete
					CO-INS	$247.89 Co-Insurance													2024-11-12				Delete
					INSPAYCHC	Insurance Check Payment				-2,231.06								Cigna	2024-11-13			Check	Delete
					PATPAYCRD	Patient Credit Payment				-268.94								Reilly, Nicholas	2024-11-12			Credit	Delete
RMSNR1B										150.00		0.00					Parsons						Pay
			2024-09-30	2024-09-30	99205	New Patient Office or Other Outpatient Services (>60 min)				150.00	1		G47.33										Adj
					COPAY	$150.00 Copay													2024-11-12				Delete
					PATPAYCRD	Patient Credit Payment				-150.00								Reilly, Nicholas	2024-11-12			Credit	Delete

To view all charges, payments, and adjustments for a patients, go the Billing tab and select Ledger

Grey rows: Claim charges

Green: Payments from insurance or patient

Red: Adjustments

Blue or Purple: Notes from insurance company

Open Balance is in the "Remainder" column

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CUSTOM REPORTS

To run reports of patients visits, or payments anytime, go to the BAM tab and select Custom Reports. All reports can to exported to an Excel csv file.

Enter Date Range

Custom Report Selection

Clinic Partner: SleepImp ⌄   Location: -Select- ⌄   Start Date: 2025-01-17   End Date (inclusive): 2025-01-17   **Report Type:**
Online table and CSV report ⌄

Uncategorized:

Referrals: [Referrals Opened Report] [Referrals By Location] [Referrers Summary Report] [Referrers Details]

Business Metrics: [New Patients] [Scheduled Patient Log] [Billing Log] [Patient Visit Log] [Appointments by Clinic]

Ledgers: [Open Ledgers] [All Ledgers] [Billable Rates Report] [Contract Rates Report] [Claims for Collections Report]

Payments/Charges: [Credit Card Auth Report] [All Payments] [Consult Sign Report]

COMMONLY RUN REPORTS

Referrals Opened Report
Referrals opened for any visit type in date range

Patient Visit Log
Visits with date of service in date range, shows status

All Ledgers
Claims list with all payments and adjustments

All Payments
Payments and Adjusts in date range for all patients, like Payments report sent with check from Sleep Impressions

www.apzme.com
www.sleepgs.com
www.millenniumsleeplab.com
www.sleepimpressions.com

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CLIENT RCM CONTRACT UPDATE AND RATE SHEETS

OVERVIEW

This document provides an update on Revenue Cycle Management (RCM) services, including the onboarding process, contracting details, and rate updates. It serves as a guide to understanding the contracting process, timelines, and key contacts.

RCM Services Overview

- **Onboarding Process:** Credentialing, payer contracts, and Medicare enrollment.
- **Revenue Cycle Management Services:**
  - Credentialing
  - Payer contracts
  - Medicare enrollment
  - Claims billing
  - Collections

Contracting Process

- **Monthly Notifications:** Practices will receive monthly updates on the status of commercial contracts.

- **Post-Onboarding Timelines:** Once onboarding is complete, the following timelines apply for payer contracts:
    - **CIGNA:** Effective within 30 days.
    - **UHC:** Effective within 30 days.
    - **AETNA:** Effective within 30 days.
    - **Humana:** Effective within 30 days.
    - **BCBS (Blue Cross Blue Shield):** State-specific requirements apply. Practices will be notified of acceptance or denial within 60 days. In states with closed networks, practices will be notified, and attempts will be made to bill out-of-network.
    - **FEP (Federal Employee Plans):** Require additional approval and may not be in-network.

Contract Updates

- Practices will receive updates via email regarding network status and effective dates.
- **Example:**
    - NEWS FLASH: You are now in-network with [Payer Name].
    - Effective Date: [Date]
    - Rate: [Rate]

Monthly Scorecard

- **Claim Processing Timelines:**
    - Clean claims (no manual intervention): Processed and paid within 30 days from submission.
    - Claims with submission errors: Resolution times may vary, but are typically processed within 30 days of the last billed date or up to 60 days.
- **Denial Resolutions:** Denials are actively worked on, and resolution times will vary based on payer requirements.
- **Payment Timeline:**
    - Payments received from payers are reimbursed bi-monthly to practices.

This document outlines key aspects of RCM services to streamline practice operations and optimize payer relationships. For any additional inquiries, please reach out to the contacts listed above.