

# RevolutionEHR

## Invoicing Guide

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Click [HERE](#) to access the Patient Journey for invoicing videos!

# ADD INSURANCE

## RevolutionEHR

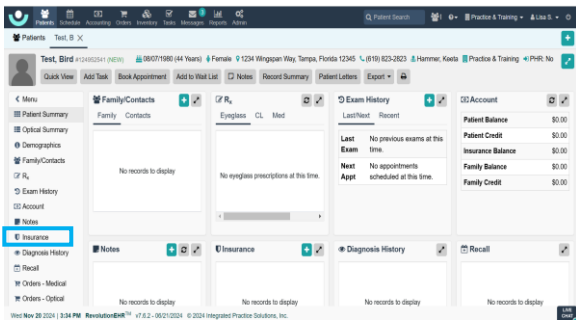


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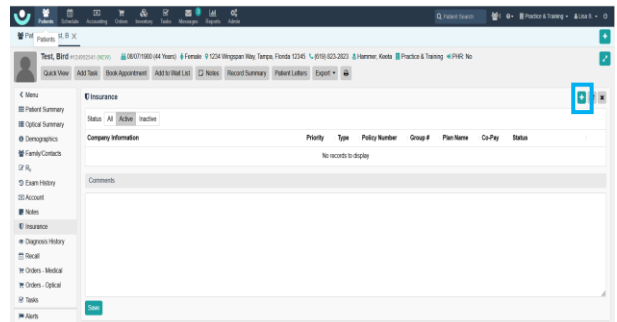
Follow these steps to add insurance into a patient profile in RevoultionEHR.

- There are multiple ways to access the insurance screen (from the schedule pod, searching the patient, or at check in/via the encounter. Find the way that works best for you!
- The directions below will walk you though how to enter insurance after the patient has been pulled up. Step 2 & 3 will not change despite how you access the insurance screen.

- 1 Once the patient is pulled up, Click **insurance** from the navigation bar on the left side of the screen.



- 2 Click the **+** icon on the right side to add an insurance plan.



- 3 **A,B,C:** Enter the minimal information required, anything with an \* and the **fee schedule** and click **Save** on the bottom to save the information you just entered. **D:** To enter a second insurance carrier, click **all patient insurances** to get back to the entry screen and click the **+** on the right side to enter a new plan.

- Enter both primary & secondary medical carriers.
  - Enter correct policy number and ID's for all medical carriers.
  - Scan in the front and back of the Insurance Card on the insurance tab
- Enter routine vision carrier & mark as primary vision carrier.
- In both cases, it will default to "self" as the primary insured, even if they are not the policy holder, leave as "self". Update the **Guarantors** in Demographics section.

**Tip:** You can enter additional details by scrolling down on the page and it will print on your routing/fee slip!

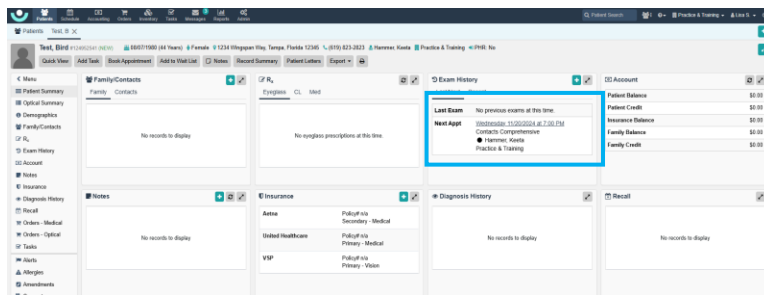
Follow these steps to check out/invoice a routine vision insurance carrier. RevolutionEHR will bill all medical carriers.

### Important notes:

- Always check TriZetto for patient copays and deductibles ahead of time.
- An insurance balance will be left on the account. There are no patient balances left in Revolution- you will take and record payment. Failing to record payment will result in a patient statement.
- We DO NOT create invoices for secondary medical carriers.
  - Enter secondary into demographics but do not create an invoice (it will automatically go to secondary once primary billed).
  - If the secondary medical insurance has a copay, this must be collected at the time of service. This would be applied to the primary medical insurance.

1

Click **the encounter** from the navigation bar on the right side of the screen.



2

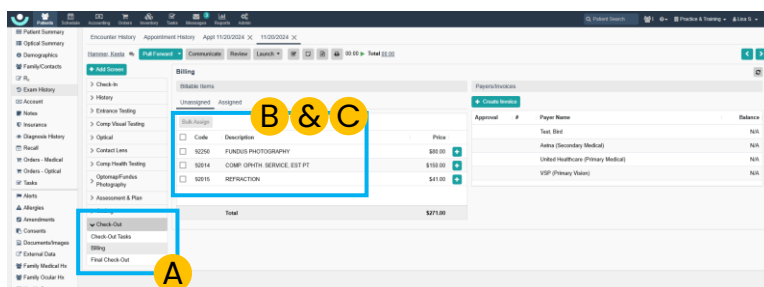
A. the navigation bar within the encounter, click the **check out** tab and go to **billing**.

- If your OD has entered **check out tasks** you must complete those before you go to billing.

B. **Checkmark** the services you'd like to assign to the medical carrier and click **bulk assign** and select your **medical carrier** from the list.

C. If there is are service not covered by the medical carrier you will **bulk assign those services to the patient** NOT the medical carrier (i.e., refraction, optomap, contact lens eval., etc.).

**Note:** This will result in the creation of two invoices, one for the patient and one for the medical carrier. You will address both.





3

Bulk Assigning will remove the services from the unassigned list and create a **pending** invoice for you to complete.

- Click the **invoice number** to open the invoice.
- Note- for patient responsibilities and/or copays, you will need to address the patient and medical invoices.

Payers/Invoices			
+ Create Invoice			
Approval	#	Payer Name	Balance
Pending	266566139	Test, Bird	\$39.00
		Aetna (Secondary Medical)	N/A
Authorized	266530984	VSP (Primary Vision)	\$0.00
Pending	266566125	United Healthcare (Primary Medical)	\$80.00

4

Click **add fee schedule**.

Invoice Details

Insurance Invoice #266566125 ACTIVE [Add Fee Schedule](#) [Transfer Items](#) [Previous Claim](#)

Bill To: United Healthcare (Primary Medical) Service Date: 11/20/2024 Fee Schedule: None Fee Date: None

+ Add

Post Date	Code	Modifiers	Diagnosis	Description	Qty	Unit Price	Discounts	Tax	Est. Price	Adjustments	Paid	Balance
11/20/2024	85210			FOREIGN BODY REMO...	1	\$80.00	\$0.00	\$0.00	\$80.00	\$0.00	\$0.00	\$80.00
												SUB TOTAL
												\$80.00

Once the fee schedule is applied it will create an insurance balance which is left on the account.

Invoice Details

Insurance Invoice #266566125 ACTIVE [Add Fee Schedule](#) [Transfer Items](#) [Previous Claim](#)

Bill To: United Healthcare (Primary Medical) Service Date: 11/20/2024 Fee Schedule: United Healthcare Fee Date: 11/21/2024

+ Add

Post Date	Code	Modifiers	Diagnosis	Description	Qty	Unit Price	Discounts	Tax	Est. Price	Adjustments	Paid	Balance
11/20/2024	85210			FOREIGN BODY REMOVAL, CONJ. EMBED.	1	\$80.00	\$0.00	\$0.00	\$80.00	-\$22.68	\$0.00	\$57.32
												SUB TOTAL
												\$80.00
												Discounts
												\$0.00
												Tax
												\$0.00
												TOTAL
												\$80.00
												Adjustments
												-\$22.68
												Payments Received
												\$0.00
												BALANCE DUE
												\$57.32

5

If the patient has a copay, click **transfer items**.

- If there is no copay, you can print/close your medical invoice.

Invoice Details

Insurance Invoice #266566125 ACTIVE [Add Fee Schedule](#) [Transfer Items](#) [Previous Claim](#)

Bill To: United Healthcare (Primary Medical) Service Date: 11/20/2024 Fee Schedule: United Healthcare Fee Date: 11/21/2024

+ Add

Post Date	Code	Modifiers	Diagnosis	Description	Qty	Unit Price	Discounts	Tax	Est. Price	Adjustments	Paid	Balance
11/20/2024	85210			FOREIGN BODY REMOVAL, CONJ. EMBED.	1	\$80.00	\$0.00	\$0.00	\$80.00	-\$22.68	\$0.00	\$57.32
												SUB TOTAL
												\$80.00
												Discounts
												\$0.00
												Tax
												\$0.00
												TOTAL
												\$80.00
												Adjustments
												-\$22.68
												Payments Received
												\$0.00
												BALANCE DUE
												\$57.32



- 6 A. On the pulldown bar in the middle, select **coinsurance/copay-amount applied to patient copayment**.
- B. Enter the copay/deductible amount in the transfer box.
- C. Click **save**.

### Notes:

- Once clicking save, the copay amount will be transferred to the patient invoice and your balance left should decrease.
- Do not** authorize your medical invoice, leave in pending status.

- 7 Complete your patient invoice.

- 8 Transfer services into Ciao!

### Note :

- You may need to use both the patient and medical invoice to identify ALL services entered into ciao!
- You can print your invoice or write down the plan pay/adjustments/copays on fee schedule.

Transfer Items

Invoice #266566125 for Test, Bird\*

Transfer Type \*

TransferWrite-off

Coinsurance/Copay - Amount applied to patient copaym...

✕

☒ Include All Items in Transfer

Transfer To \*

PatientInsurance

☐ New Invoice☒ Existing Invoice

266566139 (11/21/2024)

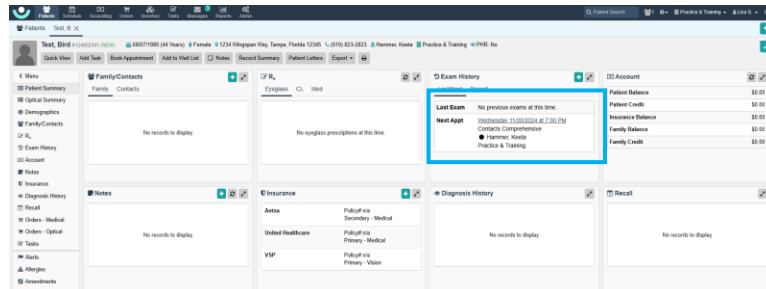
▼

Code	Description	Qty	Unit Price	Sub-Total	Discounts	Tax	Ext. Price	Transfer	Adjustments	Paid	Balance
65210	FOREIGN BODY REMOVAL, CONJ, EMBED.	1	\$80.00	\$80.00	\$0.00	\$0.00	\$80.00	\$ 25.00	-\$47.68	\$0.00	\$32.32

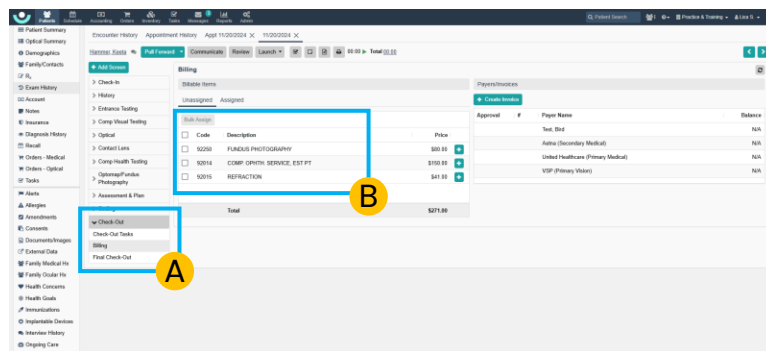


Follow these steps to check out/invoice a routine vision insurance carrier. RevolutionEHR will not bill routine vision carriers.

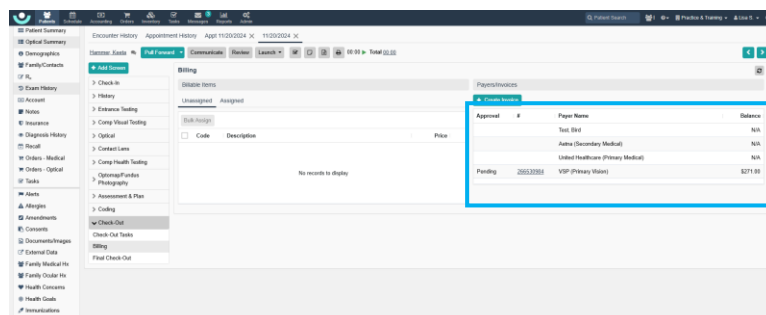
- 1 Click the **encounter** from the navigation bar on the right side of the screen.



- 2
  - A. From the navigation bar within the encounter, click the **check out** tab and go to **billing**.
    - If your OD has entered **check out tasks** you must complete those before you go to billing.
  - B. **Checkmark** the services you'd like to assign to the routine vision carrier and click **bulk assign** and select your **routine carrier** from the list.



- 3 This will remove the services from the unassigned list and create a **pending** invoice for you to complete.
  - Click the **invoice number** to open the invoice.





- 4 A,B: Click **add fee schedule** to zero out your invoice and click **authorize**.
- There are zero patient balances left in the E.H.R.
  - There are zero ROUTINE balances left in the E.H.R. (this is different than medical carriers)

Invoice Details

Insurance Invoice #266530984

Practice & Training Keeta Hammer 11/29/2024 (9 days)

Pending Authorized **Add Fee Schedule** Transfer Items

Bill To VSP (Primary Vision) Service Date 11/29/2024 Fee Schedule None Fee Date None

Post Date	Code	Modifiers	Diagnoses	Description	Qty	Unit Price	Discounts	Tax	Ext. Price	Adjustments	Paid	Balance
11/29/2024	92014			COMP OPTH. SERVICE, EST PT	1	\$150.00	\$0.00	\$0.00	\$150.00	\$0.00	\$0.00	\$150.00
11/29/2024	92015			REFRACTION	1	\$41.00	\$0.00	\$0.00	\$41.00	\$0.00	\$0.00	\$41.00
11/29/2024	92250			FUNDUS PHOTOGRAPHY	1	\$80.00	\$0.00	\$0.00	\$80.00	\$0.00	\$0.00	\$80.00

SUB TOTAL	\$271.00
Discounts	\$0.00
Tax	\$0.00
TOTAL	\$271.00
Adjustments	\$0.00
Payments Received	\$0.00
<b>BALANCE DUE</b>	<b>\$271.00</b>

- 5 Once authorized, confirm the balance due is zero and click the **pencil** to record the invoice as paid.

Invoice Details

Insurance Invoice #266530984 **ACTIVE** Test, Bill Practice & Training Keeta Hammer 11/29/2024 (9 days)

Pending Authorized **Receive Payment** Discharge

Bill To VSP (Primary Vision) Service Date 11/29/2024 Fee Schedule VSP Fee Date 11/29/2024

Post Date	Code	Modifiers	Diagnoses	Description	Qty	Unit Price	Discounts	Tax	Ext. Price	Adjustments	Paid	Balance
11/29/2024	92014			COMP OPTH. SERVICE, EST PT	1	\$150.00	\$0.00	\$0.00	\$150.00	-\$150.00	\$0.00	\$0.00
11/29/2024	92015			REFRACTION	1	\$41.00	\$0.00	\$0.00	\$41.00	-\$41.00	\$0.00	\$0.00
11/29/2024	92250			FUNDUS PHOTOGRAPHY	1	\$80.00	\$0.00	\$0.00	\$80.00	-\$80.00	\$0.00	\$0.00

SUB TOTAL	\$271.00
Discounts	\$0.00
Tax	\$0.00
TOTAL	\$271.00
Adjustments	-\$271.00
Payments Received	\$0.00
<b>BALANCE DUE</b>	<b>\$0.00</b>

- 6 Enter the services into Ciao! Optical! And collect any applicable copays/fees.



# PATIENT INVOICE

## RevolutionEHR



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Follow these steps to check out/invoice a patient.

### Important notes:

- There are no patient balances left in RevolutionEHR- you will take and record ALL patient payment.
- Failing to record payment will result in a patient statement.
- A medical balance will be left on the account (never for routine carriers).

1

Click **the encounter** from the navigation bar on the right side of the screen.

2

A. the navigation bar within the encounter, click the **check out** tab and go to **billing**.

- If your OD has entered **check out tasks** you must complete those before you go to billing.

B. **Checkmark** the services you'd like to assign to the patient.

3

A. Authorize invoice    B. Receive payment    C. Apply Payments or Print

4

Record services into Ciao! Optical and take payment.



**Daily:** Before you leave for the day, please confirm all services have been invoiced.

- Please run your Unassigned Items Report daily and take action if needed.
- If you have patients listed on the report, it means the OD has completed the exam but you have not bulk assigned and created an invoice.

The screenshot displays the RevolutionEHR Reports interface. The top navigation bar includes icons for Patients, Schedule, Accounting, Orders, Inventory, Tasks, Messages, Reports, and Admin. The Reports section is active, and the left sidebar lists various report categories: Patients, Schedule, Accounting (highlighted with a yellow circle 'B'), Sales, Receipts, Refunds, Unassigned Items (highlighted with a yellow circle 'C'), Aging Report, Deposits, Deposit Slip, Ledger Posting Report, Invoice Search, Invoice Item Search, Custom Reports, Optical Orders, Tasks, Inventory, and Administration. The main content area is titled 'Unassigned Items' (highlighted with a yellow circle 'A') and features a search bar with filters for Location (All Locations), Provider (All Providers), and Encounter Date (mm/dd/yyyy). A 'Search' button and a 'Clear' button are present. Below the search bar, a table with columns ID, Date, Patient, Location, Provider, Code, Description, and Price is shown. The table currently displays 'No records to display' and '0 of 0 pages (0 item)'. A pagination control shows '10' items per page.

# MATERIALS IN THE E.H.R



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In certain cases, materials will be entered in the E.H.R. for billing purposes. This may occur for medical plans that cover materials and routine carriers that do not have a portal. This is not a common occurrence.

- It is important to note that the materials must also be entered into Ciao! Optical since Ciao! is the point-of-sale system.
- Medically necessary contact lens submission: you maybe able to enter contact lenses into the E.H.R to generate a CMS 1500 form.

Please partner with your Medical Biller to learn more about this process when/if your site will need to put materials into the E.H.R.

# MATERIALS IN THE E.H.R



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- Once the invoice has been created for the medical carrier, click the **three dots** and select **add adhoc**.

Invoice Details

Insurance Invoice #271797190 ACTIVE Test Aloha Trinity True Eye Experts Melissa Mercer, OD 01/14/2025 (0 days)

Pending Authorized Diagnoses Add Fee Schedule Transfer Items **...** Preview Claim

Bill To: United Healthcare (Primary Medical)

Service Date: 12/11/2024 Fee: None Schedule: Fee Date: None

Details Additional Claim Info Claim History Payment History Statement History Documents & Images Notes

+ Add

Post Date	Code	Modifiers	Diagnoses	Description	Qty	Unit Price	Discounts	Tax	Ext
12/11/2024	67938-E1			FOREIGN BODY RE...	1	\$300.00	\$0.00	\$0.00	\$
12/11/2024	92230			FLUORESCIN ANG...	1	\$0.00	\$0.00	\$0.00	\$

- Enter materials and click **save** once completed.

- Enter the Vcodes, description, and price for all frames & lens features, and contact lenses
- You may add as many line items on one invoice as needed
- [Click HERE](#) to be redirected to the **Price Key & Codes** document in Toolkit
- We are working towards entering all base lens costs into RevolutionEHR (this guide will be updated when this occurs)

Add Adhoc Item

Post Date: 01/14/2025

Code: V2020

Description: Armani 1234 Blue 52

Quantity: 1

Unit Price: \$ 100.00

Sub-Total: \$100.00

Tax Rate: Select Tax Rate

Total: \$100.00

Cancel Save

**Tip:** in some cases, you will put quantity 2 for lenses (1 for the right eye and one for the left)

- Apply Fee Schedule.** The fee schedule is loaded into your E.H.R, this is the last step. If not, you will need to manually correct.

- In this example the fee schedule was applied to the exam procedure but not the materials

Invoice Details

Fee Date: 01/14/2025

Details Additional Claim Info Claim History Payment History Statement History Documents & Images Notes

Modifiers	Diagnoses	Description	Qty	Unit Price	Discounts	Tax	Ext. Price	Adjustments	Paid	Balance
1E1		FOREIGN BODY RE...	1	\$300.00	\$0.00	\$0.00	\$300.00	-\$176.57	\$0.00	\$123.43
3		FLUORESCIN ANG...	1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3		Armani 1234 Blue 52	1	\$100.00	\$0.00	\$0.00	\$100.00	\$0.00	\$0.00	\$100.00
3		Single Vision Lens	1	\$100.00	\$0.00	\$0.00	\$100.00	\$0.00	\$0.00	\$100.00

Show All

SUB TOTAL	\$500.00
Discounts	\$0.00
Tax	\$0.00
TOTAL	\$500.00
Adjustments	-\$176.57
Payments Received	\$0.00
BALANCE DUE	\$323.43

Close

# MATERIALS IN THE E.H.R



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## 3 Continued:

- Using the paper fee schedules in your office, manually calculate the “**adjustment**” amount (contractual write off)
- Click **transfer items**

Invoice Details

Insurance Invoice #271797190 ACTIVE Test, Aloha Eye Experts Melissa Mercer, OD 01/14/2025 (0 days)

Pending Authorized Diagnoses Remove Fee Schedule **Transfer Items** Preview Claim

Bill To: United Healthcare (Primary Medical) Service Date: 12/11/2024 Fee Schedule: United Healthcare Fee Date: 01/14/2025

Modifiers	Diagnoses	Description	Qty	Unit Price	Discounts	Tax	Ext. Price	Adjustments	Paid	Balance
3-E1		FOREIGN BODY RE...	1	\$300.00	\$0.00	\$0.00	\$300.00	-\$176.57	\$0.00	\$123.43

## 4 Indicate **write-off** and select your reason from the **pulldown bar**.

- Enter the **transfer amount** (aka, adjustment)
- Click save once completed

Insurance balance = Plan Pays in Ciao!

Transfer Items

Invoice #271797190 for Test, Aloha\*

Transfer Type: **Write-off** Third party discount - Fee reduced/Participating Provider ☒ Include All Items in Transfer

Code	Description	Qty	Unit Price	Sub-total	Discounts	Tax	Ext. Price	Transfer	Adjustments	Paid	Balance
67938-E1	FOREIGN BODY REMOVAL, EYELID, EMBED., Upper left eyelid	1	\$300.00	\$300.00	\$0.00	\$0.00	\$300.00	\$ 0.00	-\$176.57	\$0.00	\$123.43
92230	FLUORESCEIN ANGIOGRAPHY	1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 0.00	\$0.00	\$0.00	\$0.00
V2020	Armani 1234 Blue 52	1	\$100.00	\$100.00	\$0.00	\$0.00	\$100.00	\$ 40.00	-\$40.00	\$0.00	\$60.00
V2100	Single Vision Lens	1	\$100.00	\$100.00	\$0.00	\$0.00	\$100.00	\$ 60.00	-\$60.00	\$0.00	\$40.00
								\$100.00	-\$276.57		\$223.43

CURRENT BALANCE: \$323.43  
Amount Transferred: \$100.00  
AFTER PAYMENTS & TRANSFERS: \$223.43

Contractual write off = Discount column in Ciao!

Save

- ## 5
- Print or write down plan pay & discount amounts to transfer to Ciao! Optical
  - Leave in pending status for your biller