

Unknown Reconciliation WL

Click on the Unknown Reconciliation WL under the administration tab

Administration Messaging	Scheduling
Patient Merge	Ctrl+P+M
Arr Personnel Merge	Ctrl+P+G
Management Reports	Ctrl+P+R
Attach Inbound Docum	ents
Billing Exception WL	
Billing Confirmation WL	
Patient Merge Request	ts WL
Personnel Merge Requ	lests WL
Pending Biopsy Result	WL
Pending PACS Correct	ion WL
Unknown Reconciliation	n WL

This WL displays studies that have an unknown referring physician or unknown insurance carrier and are identified by a checkmark.

Unknown Reconciliation WL (2) x											
U (use location filter) V T C C C C C C C C C C C C C C C C C C											
Status	Order Date	Referring	First Name	Last Name	Patient Name	MRN	Unknown Referring	Unknown Carrier	Added by Interface		
T	T	T T	T	T	T	۲ I		T	T		
Scheduled	11-03-2016 11:31 AM	N/A	Loren	Hartman	Hartman, Loren	201060		✓			
Exam Done	05-08-2017 11:15 AM	guy, cool, MD	Spencer	Test	Test, Spencer	328865	✓				

Right click on the study to reconcile

Patient Folder	
Reconcile	
Add to Folder	
Audit History	
Copy Cell	



For Referring Physician

Right click on the referring physician's name

eRAD RIS

Referring	Details			CC Phys	icians						
Refer Visit	Refer * y, cool, MD (unitrouvol - C										
Search to	make sure th	ne physician is not	in the RIS then s	elect ed	liting to resolv	/e					
C Unknown	Physician Recon	ciliation					– = ×				
Unknown R	eferring Details										
Last Nar	ne First Name	Middle Name	Summary	Ima	age Preference	Specialty Read	d Refer				
guy ▶	cool		Dr cool guy, MD Male Cell: 8044598432 Internal ID: 2365								
4						[Editing				
Search Crite	eria										
<u>F</u> irst name <u>L</u> ast name <u>N</u> PI	guy	<u>C</u> ity Phone Licens				<u>S</u> earch <u>R</u>	eset				
Last Na	me First Name	Middle Name	Summary	Im	age Preference	Specialty Rea	d Refer				

No person found matching your search

Add Office addresses



eRAD RIS

Unknown Reconciliation WL

Ce Edit Address						eport Delivery Pi	eference
Address		Select Address Type		Deliver to		eport Derivery Pr	elelence
Type * Address 1 Address 2 City	Work Address	Stem	Active	Print Address 1 Address 2 City State			Refer CC
State Zip code		Phone # Fax #		Zip code		Same as a	
Affiliations Referring Pract	ractice	Prohibit marketing fa	xes	Fax Fax # * 00444 Email Email PDF Passyord	40934	Reveal Pas	Refer CC Image: Comparison of the c
Marketing Repr Add a Mark Office Contact	resentatives keting Representat	ive		EMR	Ŧ		Refer CC
Mammo Remind	der Letters ninder for Routine ninder for Callback ninder for Short Term	Follow Up			Disable repo	rt delivery for th No Rep	Refer CC
						ОК	Cancel

Select Referring Physician and add NPI, PECOS and license information

General	Resource	Account	Notes	Attachments	Preferences	Referring Pr	eferences	5	
Resourc	е Туре						Referrin	g Flags	
🗸 Refe	rring physic	ian 🗌	Radiolog	jist 🗌	Surgeon		Direct referral program		
Edito	r		Technol	ogist	Pre-auth program				
UM F	Reviewer		Injection	Physician	Marketing repr	esentative	Go	ld card	
Addition	al Resource	es			Ŧ				
Resource	e Informatio	n	_						
<u>NPI</u>	123	3456789		Unknown NPI	Registered	in <u>PECOS</u>	Confir	med radiol	ogist
UPIN			DE	A					
License	#		Prir	mary state licer	ise	Sign L	.evel	Final	*
Specialti	ies								X
Medical	groups					Conta	ct type *		-



eRAD RIS

Unknown Reconciliation WL

Add any Notes

General	Resource	Account	Notes	Attachmen	its	Preferences	Referring Preferences	
Image pr	eference no	tes				Specialty read	1 notes	
Send a CD with every Patient						Dr. Jones to r	read all MSK Studies	*
Referring	g protocol no	otes				Utilization mar	nagement notes	
					*			*
Referring	Alert Mess	age		V Display	y Ale	ert 🔫 🗕	Displays a pop up t	hat must be
Father	and Son pra se verify nar	ctice out of	f the sam	e office	*		acknowledged	
Internal r	notes							
07-03-2	018 chriss -							
Add Refe	rring Prefe	erences						



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Unknown Reconciliation WL

General Resource Account Notes Attachments Preferences Referring Preferences	
Preferred radiologists	
Powell, Stick PowerScribe Add a preferred Radiologist	Add Radiolo
 CT (Computed Tomography) CT Cervical Spine Wo (72125) 	Add Modality
CT Cervical Spine W (72126)	Add Proced
CT Cervical Spine W/Wo (72127)	
CT Cervical Spine Wo & Thoracic Spine Wo (CT45) CT Cervical Wo, Thoracic Wo, & Lumbar Wo (CT47)	Remove
CT Cervical Spine Wo & Lumbar Spine Wo (CT48)	
Image request preference CD - Pickup	Add Format
CT (Computed Tomography) Add Image Request	
MR (Magnetic Resonance)	Add <u>M</u> odality
	Add Proced
	Domovo
	Remove
Compression preference Compressed (JPEG)	
Click Save	
Save Close	
The study will fall off the Unknown WL	

For Unknown Carrier

Right click on the study to reconcile





eRAD RIS

Unknown Reconciliation WL

Right Click on the insurance Policy

In	Insurance Policies										
	Note	Carrier Code	Carrier Name	Polic	:y #	Group Number	Group Name	Phone	Priority	Eligibility	_
•		?_07IFEQ_dja	(unknown) reddish brow	n 1		Reconcile Unknow	vn Carrier		Primary		4
					_	Copy Cell					4
						Carrier Details					
						Manage Policies					
1	Manage	Policies	VT Notes Verif	y		v	/erificati	_	Insur	ance verifie	ed

Click Reconcile Unknown Carrier

Search to make sure that the carrier is not in the RIS If found, highlight then select and save If it is not in the RIS, complete any info and click make known

@ Reconcile Unkr	nown Carrier					х
Unknown Carrier	Details					
Code *	123456		Make Known			
Type *	Blue Cross -					
Description *	BCBS of California					
Address line 1	1 West Street					
Address line 2						
City	Huntington	Phone #				
State	Indiana	Fax #				
Zip code	46750					
Eligible API pay	er 10507) Coventry Mi	souri	T			
Search Criteria						
Name		City				
Carrier code		State				
Phone		Zip			Search Reset]
			No data to d	iisplay	Select	Close
					Select	Close