

# F7 INVOICE INQUIRY

## VIEW DETAIL [URHE. A, Action Code-D]

The following illustrations below are quick- references for basic definitions of each field in Function 7- Invoice Detail. The numbered boxes have been displayed to indicate essential fields. These fields become vital to users for different reasons, such as understanding a patient's invoice or requesting any DBMS report. For further definitions on each field, hover over the numbered box, and then press <CTRL+Click> to activate The hyperlink.

**View Invoice Detail Grp 3** #1 URHE.A

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**Patient:** #2 **MRN:** #3 **Invoice:** #4 #5

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**Provider:** #6 #7 **Svc Date:** #8 **Dx 1:** #9 #10

**Prov 2:** #11 #12 **Adm Date:** #13 **Dx 2:** #14 #15

**Inj Date:** #16 **Time:** #17

**Bill Area:** #18 #19 **Inj Type:** #20 **FSC:** #21 #22

**Location:** #23 #24 **Dis Type:** #25 **Charges:** #26

**Hospital:** #27 #28 **Dis %:** #29 **Balance:** #30

Posted	Service	Description	Payments	Adjust	Charges	FSC	Batch
#31 → 1) 09/08/00	08/18/00	0099202 OUTPT NEW	VST-LVL 11	[25/GD] (1),	Dx 1,2		
#32	#33	#34 #35		#36	#37 140.00	#38 CHP	
		RVU: 16.50				#39	#40 79
				#41			#42
	PCD	Post Dt	Approved Pay/Adj	C/A	Ded/Coins	Add Pat	Rej
#44	#45	#46	#47	#48	#49	#50	#51
#53 → 20	09/27/00	0.00	0.00	0.00	0.00	140.00	K0308
20	12/13/00	0.00	0.00	0.00	0.00	140.00	K400
768	03/01/00	68.82	68.82	71.18	0.00	0.00	
#54 → 2)	09/15/00	208	MEDICAID TAPE PREPARED 1 ON TAPE RUN: 1007				
	#55	#56	#57				
3)	09/27/00	09/25/00	20	MEDICAID PAYMENT 0.00 0.00			
				#58	#59		
PAY LINES :1 YFH RUN DATE 9/16/00							
Rejection Codes: K0308							
	#62	#61					

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**VIEW DETAIL [URHE. A, Action Code-D]**

## Anesthesia Charge

Posted	Service	Description	Payments	Adjust	Charges	FSC	Batch
1) 01/05/09	12/08/08	0000142 ANES-PROCEDURES ON EYE;LENS SURGERY				[P2]	(42M, 9,3,6,0,,,), DX1
							#6 ↓    #4 ↓
		0 A PATIENT WITH MILD SYSTEMIC DISEASE-P2					1350.00 KUH

**VIEW DETAIL [URHE. A, Action Code-D]**

## Radiology Charge

Posted	Service	Description	Payments	Adjust	Charges	FSC	Batch
1) 08/27/08	01/02/08	0077427 RAD TX MGMT/5 TRTMTS-FRACTIONS= 1/2/08,1/3/08,1/4/08 (1), Dx 1					
							↓ #65
							868.00 KAM

Number	Definition	Table/Column
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1	The Form and Screen names used to identify what part of the system is currently being viewed.	None
2	The Name of the individual receiving UPI services.	REG_B_PAT.PAT_NM
3	UPI/UH Medical Record Number.	REG_B_PAT.MRN
4	The distinct Number assigned to a particular set of procedures performed on a patient.	BAR_B_INV.INV_NUM
5	The Short Invoice Number assigned to each, individual invoice number for a given patient. The Short Invoice Number begins at 1 and increases incrementally with each new invoice created for a given patient.	BAR_B_INV.INV
6	The Physician providing the service.	BAR_B_INV.PROV__1
7	The Provider's Numeric Code from Dictionary 3	BAR_B_INV.PROV__2
8	The Invoice Date Of Service. This date is usually the first date of service of any procedure on the invoice. On invoices with multiple procedures (even if they are performed over multiple days), the Invoice Date Of Service will be the date of the first procedure, unless manually overwritten in data entry. In queries, data sets not including information from the charge line (CPT, Units, etc.) should query off Invoice Dos to prevent duplication of data elements in the results.	BAR_B_INV.SER_DT
9	The first numeric, or alphanumeric Diagnosis Code listed in an invoice.	BAR_B_INV.DX_ONE__5
10	The written description of the first numeric, or alphanumeric Diagnosis Code listed in an invoice.	BAR_B_INV.DX_ONE__1
11	In situations requiring a supervising MD, the 'Provider' field is the supervising MD and the 'Prov 2' field is for the rendering provider.	BAR_B_INV.U_SECOND_PHY
12	The Second Provider's numeric code from Dictionary 3.	BAR_B_INV.U_SECOND_PHY__2
13	The Admission Date of an inpatient stay.	BAR_B_INV.ADM_DT
14	The second alphanumeric Diagnosis Code listed in an invoice.	BAR_B_INV.DX_TWO__5
15	The written description of the second alphanumeric Diagnosis Code listed in an invoice.	BAR_B_INV.DX_TWO__1
16	The Date Of Injury for a patient's sustained injury.	BAR_B_INV.DT_OF_INJ
17	The Time Performed for a particular procedure.	BAR_B_INV.U_TIME_PERFORMED
18	The Billing Area adds further specialty distinction within a Division.	BAR_B_INV.BILLING_AREA
19	The numeric value assigned to each, specific Billing Area.	BAR_B_INV.BILLING_AREA__3
20	A description of the Type Of Injury incurred. Options consist of Auto, Worker's Comp, Other, and post op care	BAR_B_INV.TYPE_OF_INJ
21	The mnemonic assigned from D19 to the FSC for the invoice. Commonly referred to as Invoice FSC, this is the current FSC for the invoice. It is the FSC for which the invoice currently resides.	BAR_B_INV.FSC__5
22	The numeric assigned from D19 to the FSC for the invoice. Commonly referred to as Invoice FSC, this is the current FSC for the invoice. It is the FSC for which the invoice currently resides.	BAR_B_INV.FSC__2
23	The mnemonic of the physical Location where services were provided.	BAR_B_INV.LOC__2
24	The numeric of the physical Location where services were provided.	BAR_B_INV.LOC__3
25	From D104, Discount Types, this field indicates what FSC's to apply discounts to as well as the % of discount to apply.	BAR_B_INV.DISC_TYPE
26	The total, combined charges for all procedures within an invoice. Commonly referred to as 'Total Charges'.	BAR_B_INV.TOT_CHG
27	The mnemonic of the building (Hospital) in which services are rendered.	BAR_B_INV.HOS__2

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<b>28</b>	The numeric of the building (Hospital) in which services are rendered.	BAR_B_INV.HOS__3
<b>29</b>	The Percent Discount to be taken based on the default percent found in D104 for a particular discount type.	BAR_B_INV.DISC_PERCENTAGE
<b>30</b>	The remaining balance on an invoice. Commonly referred to as 'Invoice Balance'. Invoice Balance is not based on specific CPT codes, but rather the combination of all charges and payments. In queries requesting items from the transaction line (such as CPT code), Invoice balance will repeat for each transaction line listed in the report.	BAR_B_INV.INV_BAL
<b>31</b>	The Transaction Number of a specific posting within an invoice. There is a distinct Transaction Number for every posting within an invoice whether it is a charge line, payment line, FSC change, informational paycode etc.	BAR_B_TXN.TXN_NUM
<b>32</b>	The Posting Date of a transaction. On charge transaction lines, the Posting Date is also referred to as the Invoice Creation Date. The Invoice Creation Date is the date the invoice was created in BAR.	BAR_B_TXN.POST_DT or BAR_B_TXN.POST_PD_EXT or BAR_B_INV.INV_CRE_DT or BAR_B_INV.INV_CRE_PD_EXT
<b>33</b>	The Transaction Date of Service. On charge transaction lines, procedures may be performed over a span of dates. As a result, this is the date of a specific procedure within an invoice, as opposed to the invoice date of service that lists only the date of that invoice as a whole. Transaction Date of Service is always used in queries requesting CPT level data. This ensures that the correct Dos for a given procedure is returned in data sets.	BAR_B_TXN.SER_DT
<b>34</b>	The Procedure Code billed. An invoice may have up to 30 CPT codes listed on successive lines.	BAR_B_TXN.PROC__2
<b>35</b>	The written description of the aforementioned Procedure Code.	BAR_B_TXN.PROC__1
<b>36</b>	The modifier for a specified charge line. Modifiers are additional alpha, numeric, or alpha-numeric identifiers added to CPT codes when appropriate. A charge line may, or may not, have a modifier	BAR_B_TXN.MOD or BAR_B_TXN.MOD_1 or BAR_B_TXN.MOD_2 or BAR_B_TXN.MOD_3
<b>37</b>	The Units associated with a particular CPT code for a specific invoice. Non-time based Units will always be a numeric to indicate the number of times a procedure was performed. Time based CPT codes will show Duration, Total, Time, Base, and Additional units.	BAR_B_TXN.UNITS BAR_B_TXN.UNITS_DURATION BAR_B_TXN.UNITS_TOTAL BAR_B_TXN.UNITS_TIME BAR_B_TXN.UNITS_BASE BAR_B_TXN.UNITS_ADDITIONAL
<b>38</b>	The Diagnosis from the header list that corresponds to the particular CPT line. The Dx is not listed, but instead a pointer number is shown. 1 indicates the first Dx listed in the header, 2 indicates the second Dx listed in the header, etc.	BAR_B_TXN.DX_NUM
<b>39</b>	The Charge Amount for the individual, corresponding CPT within an invoice. The sum of all individual Charge Amounts will equal the total charge of the invoice.	BAR_B_TXN.CHG_AMT
<b>40</b>	The mnemonic assigned from D19 to the FSC for the invoice. Commonly referred to as Invoice FSC, this is the current FSC for the invoice. It is the FSC for which the invoice currently resides.	BAR_B_INV.FSC__5
<b>41</b>	The value for the Ingenix RVU for physicians. This is generally less used than Medicare RBRVS values.	BAR_B_TXN.RVU
<b>42</b>	The Batch Number for the particular transaction. This can be a charge, payment, or transaction Batch Number and indicates the batch	BAR_B_TXN.BATCH_NUM

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	in which the posting was made.	
43	The Charge Transaction Line. This includes the Invoice Creation Date, Transaction Date of Service, CPT code and description, Units, Modifiers, and all other fields bracketed within item 43. All Charge transaction lines are related to a Paycode 99. Line Item information may be brought into query results alongside Charge Transaction Line information, such as CPT code.	None
44	The Line Item Paycode used to post a payment or rejection. Paycodes can be posted to the line if the D2 line item posting option field equals 1 or 3. All line item postings will also be found in a transaction posting further down in the invoice. The line item posting will break the payment or rejection down per CPT code.	BAR_B_TXN_LI_PAY.PAY_COD E
45	The Line Item Posting Date indicates the date on which a particular payment or rejection was posted for that particular line. All line item postings will also be found in a transaction posting further down in the invoice. The line item posting will break the payment or rejection down per CPT code.	BAR_B_TXN_LI_PAY.POST_DT
46	The Approved Amount is the dollar figure the insurance company has 'approved' for the given CPT code in the given invoice. The amount is originally defaulted from the pricing module, but is frequently overridden and posted manually from the insurance EOB. It should <u>not</u> be assumed to be the contracted amount of the CPT.	BAR_B_TXN_LI_PAY.APP_AMT
47	The Payment Amount for the CPT on the particular line. Payments can be posted to the line if the D2 line item posting option field equals 1 or 3. The line item payment is a portion of the transaction payment when there are multiple CPTs, or equals the transaction payment when there is only 1 CPT in the invoice.	BAR_B_TXN_LI_PAY.PAY_AMT
48	The Contractual Allowance determined by the insurance that is written off for a CPT on a particular line. The line item allowance is a portion of the transaction allowance when there are multiple CPTs, or equals the transaction allowance when there is only 1 CPT in the invoice.	BAR_B_TXN_LI_PAY.ADJ_AMT
49	The amount the insurance says the patient owes toward their Deductible, Coinsurance, or Copayment for a particular CPT code. This value is found solely at the line item level.	BAR_B_TXN_LI_PAY.DED_AMT BAR_B_TXN_LI_PAY.COINS.AM T BAR_B_TXN_LI_PAY.COPAY
50	The Patient Due Amount left to the patient for a particular CPT code. This field is populated when the insurance EOB does not specify a deductible, copay, or coinsurance and there is a remaining balance due on the CPT line	BAR_B_TXN_LI_PAY.PAT_ RESPONSIBILITY
51	The Line Item Rejection Code for a particular CPT. Rejection codes are found in D6 in BAR. All Line Item Rejections will also be found in a transaction posting with the same posting date further down in the invoice.	BAR_B_TXN_LI_PAY.REJ_1 BAR_B_TXN_LI_PAY.REJ_2 etc. BAR_B_TXN_LI_PAY.U_REJ_ HIGHPRIO

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<b>52</b>	Line Item Postings. This includes all data elements bracketed by #52. All Line Item Postings can also be found further down in the invoice in a Non-Charge Line Transaction. Line Item Postings have the advantage of lining up with the corresponding Charge Line Transaction for which they were intended. For example, in queries, this allows one to look at the payment made on specific CPT codes rather than just viewing a total payment on an invoice.	None
<b>53</b>	The Line Item Level Paycode used to post a payment, approved amount, allowance, etc. All Line Item Posting lines will contain a paycode. This paycode will correspond to a Transaction Level Paycode for the same posting date found on a Non-Charge Transaction Line further down in the invoice, but is specific to that particular Charge Line.	BAR_B_TXN_LI_PAY.PAY_CODE
<b>54</b>	The Transaction Number of a specific posting within an invoice. There is a distinct Transaction Number for every posting within an invoice whether it is a charge line, payment line, FSC change, informational paycode etc. Transaction Number can be useful in DBMS queries to eliminate same CPTs from rolling up into one data line.	BAR_B_TXN.TXN_NUM
<b>55</b>	The Transaction Posting Date is the date that a transaction paycode is posted within an invoice.	BAR_B_TXN.POST_DT
<b>56</b>	The Transaction Level Paycode used to post a payment, FSC change, informational data etc. All transaction lines will contain a paycode. If the line item posting option for a particular paycode found in D2 is a 1 or 3, the paycode will also post at the line item level within the charge line at the beginning of the invoice.	BAR_B_TXN.PAY_CODE__2
<b>57</b>	The written description of the Transaction Level Paycode.	BAR_B_TXN.PAY_CODE__1
<b>58</b>	The Transaction Payment Amount received from insurance or the patient. It contains all payments received, regardless of whether they are posted to the line item or not. If the paycode used to post the payment has a line item posting option equal to 1 or 3 in D2, the payment will also be posted at the line item level within the charge line at the beginning of the invoice.	BAR_B_TXN.PAY_AMT
<b>59</b>	The Transaction Contractual Allowance/Adjustment Amount written off on an invoice. It contains all contractual allowances, credits, and debits posted to the transaction line regardless of whether they are posted to the line item or not. If the paycode used to post the money has a line item posting option equal to 1 or 3 in D2, the dollars will also be posted at the line item level within the charge line at the beginning of the invoice.	BAR_B_TXN.ADJ_AMT BAR_B_TXN.CR_AMT BAR_B_TXN.DEBIT_AMT
<b>60</b>	The Non-Charge Transaction Line. This includes all data elements found after the cessation of Charge Transaction Lines. All Non-Charge Transaction Lines contain a Non-Charge paycode. Payment, follow-up, fsc change paycode will be found at this level.	None
<b>61</b>	The Comment Line is a free text field where individuals can type in comments pertinent to the posted paycode. By their nature, free text fields are generally not good for querying.	BAR_B_TXN.COMMENT

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<b>62</b>	The Transaction Rejection Code for a particular CPT. Rejection codes are found in D6 in BAR. Transaction rejections can be 'pointed' to specific CPTs at the line item level. Therefore, a particular Transaction Rejection Code may, or may not, also appear on a specific CPT line.	BAR_B_TXN.REJ_1 BAR_B_TXN.REJ_2 etc.
<b>63</b>	The Physical Status Modifier. Used in Anesthesiology to rank a patient's physical status to distinguish between various levels of complexity.	BAR_B_TXN.MOD or BAR_B_TXN.MOD_1 or BAR_B_TXN.MOD_2 or BAR_B_TXN.MOD_3
<b>64</b>	The Units associated with a particular Anesthesiology time based CPT code for a specific invoice. Time based CPT codes will show Duration, Total, Time, Base, and Additional units.	BAR_B_TXN.UNITS_DURATION BAR_B_TXN.UNITS_TOTAL BAR_B_TXN.UNITS_TIME BAR_B_TXN.UNITS_BASE BAR_B_TXN.UNITS_ADDITIONAL
<b>65</b>	The Fractional Dates for Radiation Oncology. Indicates the dates on which radiation was delivered. The actual dates can be appended to the CPT Description in the invoice through the *A procedure.	BAR_B_TXN.SER_DT BAR_B_TXN.THRU_SER_DT