LeonardoMD Electronic Remittance Advice Training (ERA) 835 file

ERA Concept

The ERA file is the equivalent of an electronic explanation of benefits. When you submit a claim to the insurance company, they send back an ERA file to your clearinghouse that has all of the EOB information in it along with what was paid, etc. Since all of this information is stored in a standardized electronic file called an 835, our ERA module can parse that information and post it automatically for you to the *Superbill* that the claim came from originally. In order to find a *Suberbill* in our system matching the information contained in the 835 file, we make sure that the *Superbill* number, claim number, and patient name all agree with what is in the ERA file. If any one of these items is not the same, then that line item will show up in red and you will have to manually post that line item.

Uploading an ERA (835) file into LeonardoMD

Once your clearinghouse receives the ERA file, you should be able to download it to your computer. The file you that you need to download to your computer is called an 835 file, so you are looking for files that end in ".835". Some clearinghouses will give you the option to "zip" and download multiple 835 files in one ".zip" file. LeonardoMD does have the capability to unzip a zipped file that contains multiple 835 files.

If you are using Navicure for your clearinghouse, you have the option to connect to them directly for submission of claims and for delivery of ERA files. This means you will not have to download the .835 files from your clearinghouse and upload them into LeonardoMD, you will just need to look at the *Remittance Dashboard* every morning to see if new ERA files have been delivered.

NOTE: To activate a direct connection using Navicure, contact LeonardoMD and provide your Tax ID number as well as your Navicure Client ID.

Processing an ERA (835) file once uploaded or delivered to LeonardoMD

1. Login to LeonardoMD https://renaissance.leonardomd.com .
2. Go to Billing -> Remittance Dashboard.
3. Click the *Upload Files* button on the toolbar -> Select the file(s) to upload and upload.
   NOTE: The *Remittance Dashboard* will refresh once, then you need to manually click the *Refresh Dashboard* button on the toolbar to see if the files have finished uploading. The dashboard will show a progress of *In Queue* until you are finished uploading.
4. Once the files have completed uploading, the *In Queue* status disappears and the file information will appear with a number to the left of each line item that is a link to the *Remittance* itself.

5. To begin reviewing the remittance list, click on the numbered link to go to a *Remittance*. There you will find detailed information about the file that you uploaded. On the toolbar there is a *Print EOB* button you can use if you want a readable paper EOB. Usually, there is no need to print this since you can see everything you need on the remittance screen. On the bottom of the *Remittance* you will see a grid that displays:
   - Each claim number
   - The amount charged
   - The amount that will be paid
   - The amount that will be adjusted
   - The current insurance balance
   - The current patient balance on that *Superbill*

   To the left of each line item in the grid there is a link that takes you to the *Remittance Detail* for that line item. This is a detailed breakdown of that claim, including detailed adjustment and payment information for that claim.

6. Review the information in the grid and decide if the adjustments on each line item are correct and should be posted. If you do not agree with the adjustments you can set the *Post Status / Followup Status* accordingly. On the next screen you have the option to select from a drop down menu to set the *Post Status*. The *Post Status* tells LeonardoMD how to handle the information for that claim when automatically posting. You have three options:
   - Post – This will post all payments and adjustments that are shown in the grid for that claim.
   - Post Ignore Adjustments – This will post only the payments and will ignore the adjustments.
   - Hold – This will skip the claim when auto posting so you can manually post your own payments or do something else with the claim.

7. Once you are ready to post, click the *Post* button on the toolbar. This will take you to one more review screen where you can set the *Post Status / Followup Status* if you need to. The *Followup Status* needs to be set only if you set a claim's post status to "Hold" or you are going to need to go in later and follow up. If you do set the *Followup Status*, you can later go to Billing -> Remittance Details and run a list view using *Followup Status* as your filter field.

8. Once you are satisfied that the *Post Status* and *Followup Status* for each line is correct, click the "Post" button again. A popup window will appear and you can set the *Payment Date*, *Deposit Date*, and *Aging Date*. These fields will all default to the date you post them, so you may not need to change them. Click *Okay* to complete the post.

9. You will be redirected to the *Remittance Dashboard,* and you will see the status of your posting. Keep refreshing the dashboard until the *In Queue* status disappears, confirming that all of the payments have been posted. At this point you can go back into the *Remittance* file and check the grid again on the bottom. The insurance balance should now be updated, and you can get a good idea if the payments and adjustments posted as you expected. If something looks incorrect, you can use the *Superbill* link provided on each line to investigate further.