Process Specification of "Physician Billing System"

Process Specification (PS) of Context Level or Level Zero DFD:

System Name: "Physician Billing System"

External Entities:
1. Patient
2. Physician
3. Insurance Company

Inputs and outputs of External Entities:
1. **Physician:**
   a. **Inputs:**
      i. Diagnosis records
   b. **Outputs:**
      i. None
2. **Patient:**
   a. **Inputs:**
      i. Insurance records
      ii. Payment records
   b. **Outputs:**
      i. Patient invoice
3. **Insurance Company:**
   a. **Inputs:**
      i. Payment records
   b. **Outputs:**
      i. Insurance company invoice

Physician Billing System: Context Level or Zero Level DFD
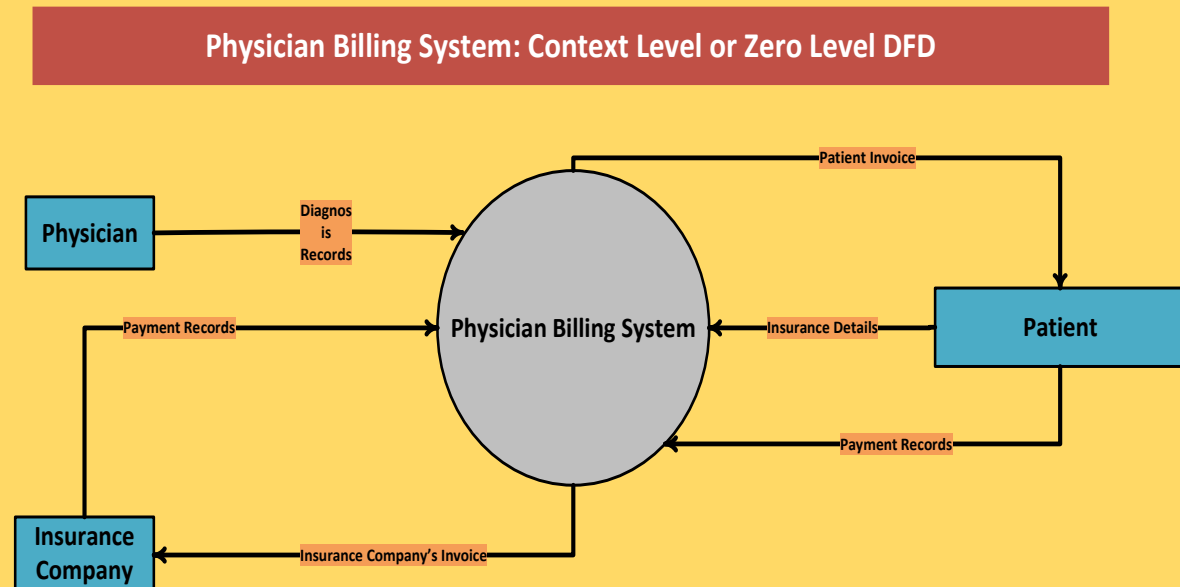
Process Specification (PS) of Level 1 DFD:

Process Name: "1. To insert diagnosis records"

Inputs:

    i.   Diagnosis records

Outputs:

    i.   Diagnosis records

Data store:

    i.   None
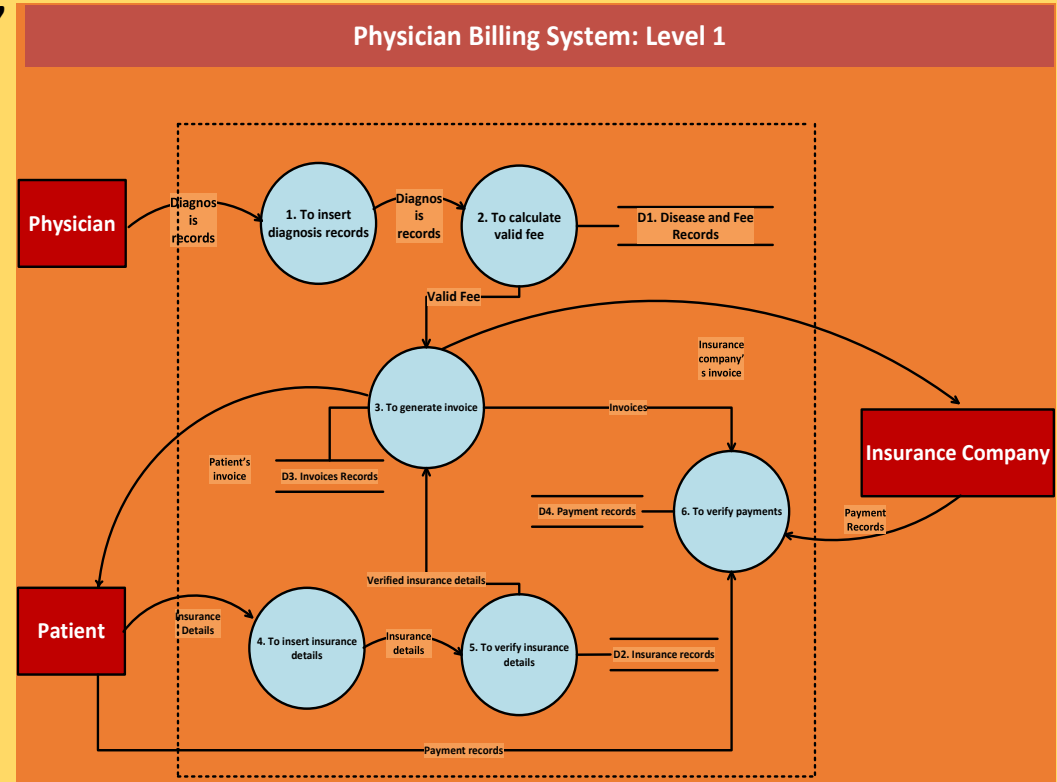
Process Name: "2. To calculate valid fee"

Inputs:

    i.   Diagnosis records

Outputs:

    i.   Valid fee

Data store:

    i.   "D1. Disease and fee records"

Physician Billing System: Level 1

Remaining processes' process specification is maintained like wise.

Mini Specification (MS) of "6. To verify payments":

"Mini Specification (MS)" is maintained of the lowest level process/s (leaf process/s).

1. Payment records are received from Patient or insurance company.

2. Invoices generated for patient and insurance company are received.

3. Payment records and invoices are compared.

4. If payment records and invoices are compared as 'true', payment records are updated in data store "D4: Payment records".

5. If payment records and invoices are compared as 'false', "payment unverified" message will be given to patient/insurance company.