Duxware Reference Guide

Duxware Reference Guide

Simplifying What Matters Most

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1. Introduction

The purpose of this Duxware Reference Guide is to provide front desk and support staff with a clear understanding of how to navigate Duxware within the ALS Integrated Services workflow.

Important: All scheduling, new patient creation, demographic updates, insurance entry, and claim creation are handled through OptimisPT. Duxware is primarily used for payment visibility, insurance verification, patient ledgers, report access, and limited administrative tasks.

This guide aligns with ALS Integrated Services' standards for professionalism, compliance, and security.

2. Access & Login

- Navigate to the Duxware login page using your assigned URL.
- Enter your username and password.
- Use the Forgot Password option if needed.
- Contact the ALS Billing Team if login access fails after multiple attempts.
- Always log out of Duxware when leaving your workstation.
- Security reminder: Protect patient information at all times and never share login credentials.

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3. Dashboard Overview

- Menu Bar: Access sections such as Patients, Claims, Payments, and Reports.
- Icons: Hover for tooltips describing each section's function.
- Quick Tips: Use the Search bar to quickly find patients or claims.
- Only functions relevant to your assigned permissions will be visible.

Notes Tab (Billing Communication)

- At the **bottom of the Dashboard**, there is a **Notes** tab used to communicate updates between the **front office and the ALS Billing Team**.
 - Always check the Notes tab first before sending an email with a question—the
 answer may already be documented there.
 - You can see billing progress for a patient (e.g., claim status, requests for information).
 - If a patient has called the **billing department**, the **call is recorded here** along with the **question and the resolution**.
 - You may also see a **follow-up date** indicating when billing will check back on the item.
 - If there are **no notes**, the billing team has **no current issues** on the account.
- **Best Practice:** Read the latest notes before contacting Billing or the patient—this prevents duplicate outreach and ensures consistent messaging.

4. Patient Management (Limited Use)

Note: Patient creation, demographic updates, insurance, and document uploads are completed in OptimisPT. Duxware's patient section is for reference and specific updates when required.

- If the patient is a minor, the Responsible Party field must not be listed as Self.
- Update the Responsible Party section to include the parent or guardian's name.
- Save changes and verify accuracy before exiting the record.
- Tip: Review this information during initial intake or when flagged by the billing team.

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5. Initial Verification & Demographics Check

Before each patient's initial visit or evaluation, staff must verify that the information in Duxware matches the patient's insurance card and records. Accuracy at this stage prevents claim denials and billing delays.

Verification Steps:

- 1. Check Patient Name: The spelling must exactly match the insurance card. The name should not be entered in all capital letters. Use proper capitalization (e.g., John Smith, not JOHN SMITH).
- 2. Verify Address: Confirm that the address is current and punctuated correctly. Avoid abbreviations (e.g., Street instead of St., Avenue instead of Ave.).
- 3. Review Insurance Details: Confirm that the insurance plan, policy number, and group number match the insurance card. Ensure there are no dashes and use only CAPITAL LETTERS for policy and group numbers. Make sure the insurance expiration date has not passed. If expired or inactive, update the filing order to D Depreciated under the insurance details section.
- 4. Cross-Check With OptimisPT: Ensure demographic and insurance data in Duxware align with OptimisPT entries to maintain consistency across systems.

Reminder: Every initial visit should include this review process to confirm accuracy before billing or authorizations are submitted.

6. Insurance & Authorizations (Required Entry)

All insurance and authorization details are maintained in OptimisPT for reference. However, authorization information must also be manually entered into Duxware. This step does not automatically flow from OptimisPT and is required before billing is submitted.

Authorization Entry Process:

- 1. Open the patient's record in Duxware.
- 2. Navigate to the Insurance/Authorization tab, or from the Dashboard, open the Authorization section and click Add.
- 3. Enter the authorization number, start and end dates, and visit limits.
- 4. Double-check that the information matches what is listed in OptimisPT.
- 5. Save all entries and confirm that the authorization appears correctly linked to the patient's insurance.
- 6. Critical: This step must be completed prior to billing submission. Claims will be denied if authorization information is missing from Duxware.
- 7. If there are any discrepancies or uncertainties, contact the ALS Billing Team immediately for assistance.

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7. Insurance Policy Verification

It is essential to verify that all insurance policy information in Duxware is accurate. Incorrect policy details or filing order can lead to claim denials and delays in payment.

Steps to Verify and Correct Insurance Details:

- 1. Open the patient's record in Duxware.
- 2. Navigate to the Insurance section.
- 3. Review the policy for accuracy: Ensure the filing order (Primary, Secondary, Tertiary) is correct. If a Secondary policy is incorrectly listed as Primary, click on the plan and update the filing order to Secondary or Tertiary as appropriate.
- 4. Confirm that the policy number and group number are entered and match the insurance card. Make sure there are no dashes and use only CAPITAL LETTERS.
- 5. Verify that copay and deductible amounts are listed correctly.
- 6. If the insurance is no longer valid or active, click on it and change the Filing Order to D Depreciated to ensure it does not transmit for billing.
- 7. Save all updates and verify accuracy before closing the record.
- 8. Reminder: Always confirm that the correct filing order, active coverage, and policy details are in place prior to billing to prevent payer rejections.

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8. Payments (Credit Card Use Only)

Duxware's payment module is used only if your location is connected to a Duxware Merchant Account and is strictly for credit card payments. All other payments are handled within OptimisPT.

If Duxware Merchant Account Is Active:

- Used for credit card transactions only.
- The therapist should always be Collections Daily.
- When entering a copay credit, the payment applies to the specific Date of Service (DOS) only. Example: If a patient pays for more than one visit, each exact DOS must be listed in the notes section (e.g., "Payment for 10/5, 10/7, 10/9, 10/12"). Do not enter vague descriptions like "for next four DOS."
- When entering a Patient Account payment, it means the payment will be applied by the billing department starting with the oldest DOS and moving forward. In this case, no DOS should be listed in the notes; listing specific DOS would indicate a copay, not a patient account payment.

If Duxware Merchant Account Is Not Used:

- Do not enter or record payments in Duxware.
- All payments are entered into OptimisPT only, and the billing team will enter those payments into Duxware.
- When entering a Patient Account payment, it means the payment will be applied by the billing department starting with the oldest DOS and moving forward. In this case, no DOS should be listed in the notes; listing specific DOS would indicate a copay, not a patient account payment.
- When entering a copay credit, the payment applies to the specific Date of Service (DOS) only. Example: If a patient pays for more than one visit, each exact DOS must be listed in the notes section (e.g., "Payment for 10/5, 10/7, 10/9, 10/12"). Do not enter vague descriptions like "for next four DOS."

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9. Reports & Administrative Views

This section is primarily used by the billing department, which will run monthly reports for review and reconciliation.

For office-level use, if you wish to review weekly patient balances:

- 1. Go to the Reports tab.
- 2. Select Collections.
- 3. Choose Statement History.
- 4. Review or print as needed to view weekly balances and payment activity.
- 5. Note: All official reporting and billing reconciliation are handled by the ALS Billing Department on a monthly basis.

10. Patient Ledger & Statements

The Ledger section in Duxware allows staff to view detailed patient balance information and messages from insurance companies. This is essential when preparing or explaining patient statements.

Using the Ledger:

- 1. Open the patient's record in Duxware.
- 2. Navigate to the Ledger or Patient Statements section.
- 3. Review each line item for dates of service, payment activity, and outstanding balances.
- 4. Hover your mouse over the stars (★) in the MSG column to view the insurance message. These messages often explain why a balance remains, such as deductible not met, noncovered service, or authorization issues.
- 5. Use this information to clearly explain to the patient why they owe a balance and what the insurance company indicated.
- 6. If the reason is unclear or appears incorrect, document your observation and notify the billing department for review.
- 7. Tip: Always confirm that insurance adjustments and payments are visible in the ledger before contacting a patient about a balance. Never guess—refer to the message details in the MSG column.

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11. Support & Troubleshooting

If you experience issues within Duxware, follow these steps:

- 1. Confirm the issue is not related to OptimisPT data.
- 2. Take a screenshot or note the error message.
- 3. Contact the billing support team for help.

Support Contact Information:

ALS Integrated Services - Billing Team

Email: Support@ALSIntegratedSvc.com | Phone: 513-334-8199

Include: Patient full name (first and last) or account number, date of birth (DOB), summary of the issue, and any relevant screenshots.

12. Compliance & Security

- Always access the minimum necessary patient information.
- Do not discuss PHI in public areas.
- Avoid screenshots containing PHI unless securely shared with the billing team.
- Log out after each use.

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13. Appendices

Quick Reference Sheet

- Responsible Party Update: For minors, ensure Self is not listed; update with parent/guardian info.
- Initial Verification: Always confirm name, address, policy details, and expiration dates before billing.
- Authorization Entry: Must be added manually into Duxware prior to billing submission to prevent denials.
- Insurance Policy Verification: Confirm filing order (Primary, Secondary, Tertiary) is correct before billing.
- Patient Ledger: Hover over stars in MSG column to see insurance message explanations for balances.
- Credit Card Payments: Used only for Duxware Merchant Accounts. Therapists are Collections Daily; list specific DOS for copays, leave blank for patient account payments.
- Reports: Billing runs monthly; offices may run weekly reports using Reports > Collections > Statement History.
- Support Contact: Billing Team ALS Integrated Services, 513-334-8199, Support@ALSIntegratedSvc.com.

Glossary of Terms

- Responsible Party: The individual financially responsible for a minor's account.
- Initial Verification: The process of checking patient and insurance accuracy prior to the first visit.
- Authorization: Approval required from payer prior to services being billed; must be entered in Duxware to avoid denials.
- Insurance Filing Order: The order in which insurance policies are billed (Primary, Secondary, Tertiary). Incorrect order can result in claim denials.
- Ledger: The section of Duxware showing patient financial activity, balances, and insurance messages.
- Merchant Account: Duxware payment processing setup for credit card transactions only.
- Patient Account Payment: Payment applied by billing to oldest DOS; no specific DOS listed.
- Copay Credit: Payment applied directly to specific DOS, with all DOS clearly noted in the payment comments.
- OptimisPT: The primary EMR/billing system for scheduling, patient creation, and insurance management.

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• PHI: Protected Health Information.

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