Product/Procedure Report: Summary Tab

Last modified on 04/11/2025 11:31 am EDT

The Product/Procedure Report will show you what CPT/HCPCS/Custom codes have been billed throughout your practice and detailed patient information if you need to dig deeper. Offices use this report to identify their office's most-used procedures and custom codes.

roduct/Procedure									
Summary Details									
ontrols									
Date 05/01/2024 - 04/11/2025			Date Type Date of Ser	vice 👻	Billing Code	Office All	Name	Provider Na All	me
05/01/2024 = 04/11/2025			Date of Sel	vice +				•	
Primary Insurer			Secondary	Insurer					
All			▼ All			-			
							Data Freshness		
Billing Code with Description	Total Units	Total	Charge per item	Total Ins. Payments	Ins. Payment per item	Total Patient Payment	Pt. paid per item	Total Adjustments	Adj. per item
Totals	310	\$27,576.25	\$88.96	\$8,291.27	\$26.75	\$15.00	\$0.05	\$5,276.73	\$17.02
00000:	1	\$94.45	\$94.45	\$45.56	\$45.56	\$0.00	\$0.00	\$31.60	\$31.60
36415: COLL VENOUS BLD	5	\$67.77	\$13.55	\$14.24	\$2.85	\$0.00	\$0.00	\$0.00	\$0.00
76881: US COMPL JOINT R-T W/IMG	2	\$516.35	\$258.18	\$278.33	\$139.17	\$0.00	\$0.00	\$198.70	\$99.35
80050: GENERAL HEALTH PANEL	1	\$92.50	\$92.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
80053: COMPREHEN METABOLIC PANEL	5	\$674.84	\$134.97	\$371.55	\$74.31	\$0.00	\$0.00	\$212.64	\$42.53
80076: HEPATIC FUNCTION PANEL	1	\$142.88	\$142.88	\$58.82	\$58.82	\$0.00	\$0.00	\$63.29	\$63.29
	1	\$30.21	\$30.21	\$15.13	\$15.13	\$0.00	\$0.00	\$15.08	\$15.08
81003: URINALYSIS AUTO W/O SCOPE			\$125.04	\$134.57	\$67.29	\$0.00	\$0.00	\$111.80	\$55.90
	2	\$250.07	\$125.04						
81003: URINALYSIS AUTO W/O SCOPE 85027: COMPLETE CBC AUTOMATED 86480: TB TEST CELL IMMUN MEASURE	2	\$250.07 \$125.91	\$125.91	\$74.88	\$74.88	\$0.00	\$0.00	\$51.03	\$51.03
85027: COMPLETE CBC AUTOMATED 86480: TB TEST CELL IMMUN MEASURE					\$74.88	\$0.00	\$0.00 \$0.00	\$51.03	\$51.03 \$0.00
85027: COMPLETE CBC AUTOMATED	1	\$125.91	\$125.91	\$74.88					

1. The Product/Procedure Report can be found by navigating to Billing > Product/Procedure.

2 ~ ~
Summary Details
Controls
Date Type : Date Billing Code Office Name Provider Name Insurance Name Date of Service • All • All • All •
Data Freshness

- 2. There are several options available to run the report. They include:
 - a. Date Type Date of Service or Procedure Posted Date

- b. Date Single Date or Date Range
- c. Billing Code Select a single, multiple, or all Billing Codes
- d. Office Name Select a single, multiple, or all offices associated with the account
- e. Provider Name Select a single, multiple, or all providers associated with the account
- f. Insurance Name Select a single, multiple, or all insurances associated with the account
- 3. The Data Freshness date/time stamp will appear on the right side of the report, just below the control dropdown menus.
- 4. The report will generate and include columns including Total Units Billed, Total Dollar Amount Billed, Charge per Item, Total Insurance Payments Received, Total Insurance Payments Received, Insurance Payment per Item, Total Patient Payments Received, Patient Payment per Item, Total Adjustments, and Adjustments per Item.

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Summary Details									
Controls									
Date Type : Date of Service -	Date		Billing Co	de -	Office Name	Provic All	ler Name	Insurance All	Name
Date of Service						*		*	
							Data Freshness		
Billing Code with Description	Total Units	Total	Charge per item	Total Ins. Payments	Ins. Payment per item	Total Patient Payment	Pt. paid per item	Total Adjustments	Adj. per item
Totals	2,966	\$274,286.04	\$92.48	\$147,284.58	\$49.66	\$0.00	\$0.00	\$108,678.57	\$36.64
00000:	17	\$1,701.29	\$100.08	\$919.29	\$54.08	\$0.00	\$0.00	\$577.69	\$33.98
36415: COLL VENOUS BLD	25	\$502.19	\$20.09	\$258.66	\$10.35	\$0.00	\$0.00	\$188.93	\$7.56
76881: US COMPL JOINT R-T W/IMG	34	\$8,614.63	\$253.37	\$4,605.09	\$135.44	\$0.00	\$0.00	\$3,162.68	\$93.02
80053: COMPREHEN METABOLIC PANEL	85	\$11,303.72	\$132.98	\$5,975.84	\$70.30	\$0.00	\$0.00	\$4,549.81	\$53.53
80076: HEPATIC FUNCTION PANEL	25	\$3,261.33	\$130.45	\$1,691.70	\$67.67	\$0.00	\$0.00	\$1,296.52	\$51.86
81003: URINALYSIS AUTO W/O SCOPE	36	\$1,058.00	\$29.39	\$557.45	\$15.48	\$0.00	\$0.00	\$414.52	\$11.51
85027: COMPLETE CBC AUTOMATED	46	\$6,129.79	\$133.26	\$3,300.14	\$71.74	\$0.00	\$0.00	\$2,423.81	\$52.69
86480: TB TEST CELL IMMUN MEASURE	25	\$3,292.15	\$131.69	\$1,768.47	\$70.74	\$0.00	\$0.00	\$1,224.29	\$48.97
96365: THER/PROPH/DIAG IV INF INIT	39	\$6,046.13	\$155.03	\$3,218.04	\$82.51	\$0.00	\$0.00	\$2,383.46	\$61.11
96413: CHEMO IV INFUSION 1 HR	46	\$11,242.93	\$244.41	\$6,112.26	\$132.88	\$0.00	\$0.00	\$4,608.12	\$100.18
96415: CHEMO IV INFUSION ADDL HR	50	\$3,636.70	\$72.73	\$1,965.81	\$39.32	\$0.00	\$0.00	\$1,457.29	\$29.15
99213: OFFICE O/P EST LOW 20 MIN	112	\$9,970.09	\$89.02	\$5,331.00	\$47.60	\$0.00	\$0.00	\$3,992.35	\$35.65
99214: OFFICE O/P EST MOD 30 MIN	57	\$7,739.66	\$135.78	\$4,133.47	\$72.52	\$0.00	\$0.00	\$3,102.57	\$54.43
99245: OFF/OP CONSLTJ NEW/EST HI 55	17	\$7,353.80	\$432.58	\$3,951.27	\$232.43	\$0.00	\$0.00	\$2,849.00	\$167.59

5. Beginning with the second column from the left, Total Units, there are options to Sort by ascending or descending, freeze the column, or freeze up to this column. Pressing on the column header will make the options visible.



6. When the cursor hovers on the top right corner of the report, options to maximize the screen (diagonal arrows), sort the visual report (vertical arrows), and export the report (vertical dots) are displayed.

Unpin totals
Export to CSV
Export to Excel

7. To quickly see detailed information for a particular code, press on the row containing the code. The option **Go to Details** will appear. Pressing the option will display detailed information for that specific code.

Billing Code with Description
Totals
00000:
36415: COLL VENOUS BLD
Go to Details F 76881: US COMPL JOINT R-T W/IMG