Understanding eClaims Reports

• Reviewing and understanding the reports that are provided before and after submitting claims electronically are important in order to ensure the correct information is being transmitted to the insurance carrier and that claims are paid in a timely manner.

• The EagleSoft program does a preliminary audit on the claims to be submitted electronically to make sure all necessary fields are populated which helps eliminate claims being rejected due to missing information. You will be prompted during the eClaims submission that allows you to print a report of these claims so you can make necessary corrections.

• Clearinghouse reports are available for download approximately 24 hours, or the next business day after submission.

• Reports can be retrieved by submitting another batch of electronic claims, or connecting to the clearinghouse from the Claims window without submitting a new batch of claims.
Understanding eClaims Reports

• EAGLESOFT ECLAIM ERROR VERIFICATION REPORT

  – At the time of eClaims processing, EagleSoft performs an audit of the claims marked for electronic submission to make sure necessary fields are populated which helps in reducing the amount of rejections you receive from the clearinghouse. If errors are detected during the eClaims submission, you will receive a message prompting you to:

    • Print the report to list the errors found
    • Continue processing accepted claims which will skip the incomplete claims
    • Cancel to return to the eClaims submission window

Electronic Claims

Some claims have incomplete information and cannot be submitted electronically until corrections are made.

Click Report to print a list of the errors found in the claims, click Continue to continue processing - skipping the incomplete claims, or click Cancel to return to the E-claims Submission window.

If you choose to print a Report, you must then choose to Continue or Cancel.
Understanding eClaims Reports

• Reports:
  – **R022 – E-Claims Claim Error Report**
    • Purpose: Gives daily provider statistics on the number of claims submitted, accepted and rejected. This report identifies each claim that was rejected and provides a detailed error description of the rejection
    • How to use:
      – Claims listed on this report will appear in the ‘Unsubmitted Electronic’ view in the Process Insurance Claims window
      – You will need to locate these claims and correct them according to the ‘Error description’ on this report
      – Use the Rejections button located within the Process Insurance Claims window to help determine the resolution to the error
      – Once the claim is corrected, you will need to resubmit the claim electronically to the clearinghouse
      – There is no charge for the claims on this report until it passes this rejection stage
    • Frequency:
      – This report will be available the following day after a claim submission
  • Questions:
    – Should be directed to the eBusiness Support team at the Patterson Technology Center (800.475.5036)
Understanding eClaims Reports

- **R023- E-Claims Provider Report**

  - **Purpose:** Gives a summary of the number of accepted claims per batch. This report also has a total section that displays; input, accepted and rejected totals for daily, monthly and yearly basis
  - **How to use:**
    - This report is used to monitor the daily, monthly and yearly activity
  - **Frequency:**
    - This report will be available the following day after a claim submission
  - **Questions:**
    - Should be directed to the eBusiness Support team at the Patterson Technology Center (800.475.5036)
R026- E-Claims Submission Report

- Purpose: Identifies the claims that were accepted by the clearinghouse and forwarded to the insurance companies to be processed. The report also provides the batch total for input, accepted and rejected claims.
- How to use:
  - Claims that appear on this report will move to the “Open” status of the Process Insurance Claims window.
  - Review the Process Insurance Claim window “Open” status to confirm the payments are being received in a timely manner.
  - Follow-up with insurance companies if payment is not received for these claims.
  - Office is charged for claims appearing on this report.
- Frequency:
  - This report will be available the following day after a claim submission.
- Questions:
  - Should be directed to the eBusiness Support team at the Patterson Technology Center (800.475.5036).
Understanding eClaims Reports

- **R059- E-Claims Unprocessed Claims Reports**
  - **Purpose:** This report is generated by the Insurance Company. It identifies the claims that were rejected by the Insurance Company. It also gives a detailed explanation of the rejection.
  - **How to use:**
    - Make appropriate corrections to the claim and resubmit it electronically once the appropriate corrections are made.
  - **Frequency:**
    - This report is generated by the Insurance Company when necessary.
  - **Questions:**
    - Questions on the R059 should first be directed to the Insurance Carrier listed on the report.
    - After contacting the insurance carrier, if additional assistance is needed, contact the eBusiness Support team at the Patterson Technology Center (800.475.5036).
      » You will need to provide the number and name of the person you spoke to with the insurance carrier.
Understanding eClaims Reports

- **R060- E-Claims Requests for Additional Information**
  - **Purpose:** This report is generated by the Insurance Company. It identifies the claims that are requiring additional information for processing.
  - **How to use:**
    - Provide the insurance company with the additional information they are requesting to they can process the claim.
  - **Frequency:**
    - This report is generated by the Insurance Company when necessary.
  - **Questions:**
    - Questions on the R060 should first be directed to the Insurance Carrier listed on the report.
      » Use the contact information found on the report in the Mailing Address and Receiver Phone columns.
    - After contacting the insurance carrier, if additional assistance is needed, contact the eBusiness Support team at the Patterson Technology Center (800.475.5036).
      » You will need to provide the number and name of the person you spoke to with the insurance carrier.
Understanding eClaims Reports

- R061- E-Claims Zero Payment Report

  • Purpose: This report is generated by the Insurance Company. It identifies the claims for which the insurance company has determined no payment will be made.

  • How to use:
    - Close the claims listed on this report within the Insurance Claim window since no payment will be made or provide additional information to the Insurance carrier in order for them to reconsider payment.

  • Frequency:
    - This report is generated by the Insurance Company when necessary.

  • Questions:
    - Questions on the R061 should first be directed to the Insurance Carrier listed on the report.
      » Use the contact information found on the report in the Payor column.
    - After contacting the insurance carrier, if additional assistance is needed, contact the eBusiness Support team at the Patterson Technology Center (800.475.5036).
      » You will need to provide the number and name of the person you spoke with the insurance carrier.
Understanding eClaims Reports

- **R062- E-Claims Status Exception Report**

  • **Purpose:** This report is generated by the Insurance Company. It identifies the claims that are in the process of being paid or have already been paid
  
  • **How to use:**
    - Review and make sure payments are being received in a timely manner
  
  • **Frequency:**
    - This report is generated by the Insurance Company when necessary
  
  • **Questions:**
    - Questions on the R062 should first be directed to the Insurance Carrier listed on the report
      » Use the contact information found on the report in the Carrier column
    - After contacting the insurance carrier, if additional assistance is needed, contact the eBusiness Support team at the Patterson Technology Center (800.475.5036)
      » You will need to provide the number and name of the person you spoke to with the insurance carrier
Understanding eClaims Reports

- Utilize FAQ to gather information on eClaims Rejections

  - Information regarding eClaims rejections is available in our searchable online knowledge base, known as Frequently Asked Questions (FAQ)
  - To access FAQ from your EagleSoft’s front desk screen, click on Online menu and select > FAQ
  - In the ‘keyword search’ area, type in the description of the error you are receiving and click on ‘search’
    - Information pertaining to eClaims errors will populate based on your search and will provide information to you on how to make necessary corrections
Understanding eClaims Reports

- Questions?

- The eBusiness Support team at the Patterson Technology Center can provide necessary assistance on:
  
  - The EagleSoft eClaims rejection Report
  - R022 clearinghouse report
  - R023 clearinghouse report
  - R026 clearinghouse report
    - 800.475.5036

- The Insurance Carrier can provide necessary assistance on:
  
  - R059 Insurance carrier report
  - R060 Insurance carrier report
  - R061 Insurance carrier report
  - R062 Insurance carrier report
    - If you need additional assistance, the eBusiness Support team can be contacted.
      » You will need to provide Insurance carrier phone number and name of the person you spoke with
      » 800.475.5036