We managed to run a test and we captured different types of claims

**CAPTURING**

**Claim 397:908 DRUG CLAIM**

* The system is not picking the in-house tariffs 200000 and 199995 we assume they are not mapped in the test environment
* Some drug tariffs are picking some are not

**Claim 397:909 GP NO SHORTFALLS**

* Processed

**Claim 397:910 HOSPITAL CLAIM WITHOUT SHORTFALLS**

* Processed

**Claim** **397:911 GP WITH SHORTFALLS**

* Processed

**Claim 397:912 DRUG CLAIM**

* Failed validation could not pick in-house tariff

**APPROVING TO SETTLING (SINGLE CLAIM)**

**Claim 397:909**

* Approve
* Create payment queue (Refused to settle without banking details and contact details, we had to add them for it to go to the next level)
* Claims allocation
* Set status
* We could not extract a schedule of settle transaction for payment purposes

**APPROVING TO SETTLING (BATCH)**

**CLAIMS 397:910/911**

* Failed to go through the whole process because there were no banking and contact details

**REPORTS**

* All the reports are not working

**General overview**

* The diagnosis field on the capturing stage is not really efficient since some of the diagnoses are not in the system making it difficult to validate a claim. If possible this field can be deactivated and we use the notes field until or unless we can add our own diagnosis manually.
* Also on the settling stage if the claim is not going to go through without banking details we will manage to settle only a few providers until all details are in the system which might take some time
* In-house tariffs must be mapped so there are no delays in capturing