

eCF - Claims Issues

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eCube® Financials – Claims Issues

Purpose: Follow this procedure when a user reports issue with eCube® Financials – Claims Issues. These tickets are generally created in the Service Request System by the Billing Groups.

Required Information to be documented in each incident:

Contact NameContact NumberClinic / Facility NumberPatient NamePatient MRNPatient ClinicSRN# (if available)Billable Party/PayerHealth Plan NameCommercial Payer or Medicare Risk PayerBilling Period (ex. 9/1/13 – 9/30/13)Billing Period NumberReceivable Group NumberClaim Amount (if available)Detailed Description of the issue.Screen shot of the Error

Troubleshooting Process:

1. Confirm with user that the issue matches the issue reported.
2. Please document required information and troubleshooting details in the Incident.
3. Please attach any referenced knowledge articles to the incident.
4. Document in detail the issue the user is experiencing with the claim.
5. Is this an electronic or paper claim?
6. Did you Demand Claim Rebill or Demand Insurance Claim for Billing Period?

Did you receive "follow up session already exists" error? If so, have you demanded only one claim, one Billing Period at a time? (Please get screen shot of errors, if possible).If you do not receive this error, then what happens when you demand a claim?

7. Follow the escalation process.

Classification Requirements

Category

Software & Applications

Subcategory

Clinical Applications

Service

eCF - eCube Financials

Escalation Process

Please review/update Classification and provide customer with the Incident number for their reference prior to escalating.

Assign the Incident to the Following Group

Refer to SME agent or Team Lead for review

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