

Review claims

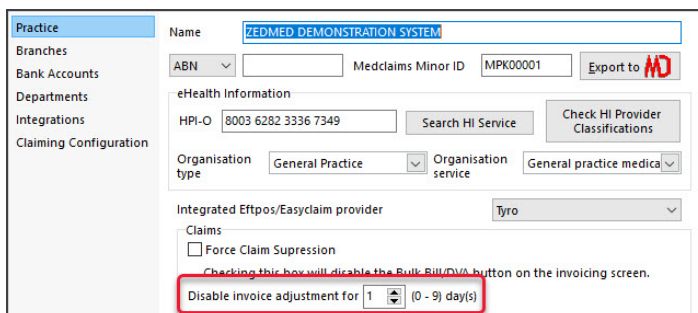
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The Claims tab makes it easy to review submitted claims, including those received and responded to by Medicare and those that have been rejected. The claims are automatically submitted by default but can be managed and submitted in batches using the **Suppressed Invoices workflow**.

New functionality in Zedmed v37

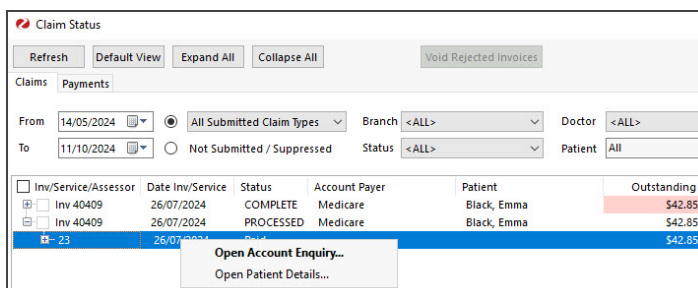
The following enhancements are available in Zedmed v37:

- When receipting, a warning will suggest waiting 24 hours if full payment information has not been received from Medicare.
- The Claims tab has a **Check Claim Status** button so staff can manually refresh the status of a claim or claim payment.
- To avoid changes to an invoice after transmitting a claim, adjustments cannot be made to that invoice from Account Enquiry for 1 day. The Practice can increase this duration or change it to 0 to disable it in Practice details. This applies to Bulk Bill, DVA and Eclipse claims. MA Online and Tyro Easy Claim will still have the Adjustment button available. (v37.4)



The screenshot shows the 'Practice' configuration page for 'ZEDMED DEMONSTRATION SYSTEM'. Under the 'Claims' section, there is a checkbox for 'Force Claim Suppression' and a dropdown menu for 'Disable invoice adjustment for' set to '1' (0 - 9) day(s). A red box highlights this dropdown menu.

- Double-clicking an invoice opens the patient's Account Enquiry with that invoice highlighted. Closing the invoice takes you back to the Claims tab. If the invoice is incorrect, select it in the Claims tab and click Voice Rejected Invoices to remove it.
- Right-clicking an invoice will give you the option to open the patient demographics for that claim (useful to access PV).



The screenshot shows the 'Claim Status' interface with a table of claims. A context menu is open over the selected row, showing options: 'Open Account Enquiry...' and 'Open Patient Details...'. The table has columns for 'Inv/Service/Assessor', 'Date Inv/Service', 'Status', 'Account Payer', 'Patient', and 'Outstanding'.

Inv/Service/Assessor	Date Inv/Service	Status	Account Payer	Patient	Outstanding
Inv 40409	26/07/2024	COMPLETE	Medicare	Black, Emma	\$42.85
Inv 40409	26/07/2024	PROCESSED	Medicare	Black, Emma	\$42.85
23	26/07/2024				\$42.85

Overview

The Claims tab makes it easy to review submitted claims, including those that have been received and responded to by Medicare and those that were not accepted by Medicare. Key to using this tab is understanding all of the headings and status types, which are explained in the sections below.

Common uses for the Claims tab:

- Investigate rejected items, overpayments and underpayments so you can complete a reconciliation.
- Review and void rejected claims for full invoices.
- Reinvoice invalid claims.

To open the Claims tab:

1. Go to Zedmed's **Management** tab.
2. Select **Claims**, and the **Claims Status** screen will open on the **Claims** tab.

Claims Status (top) menu options:

- **Refresh** - updates the listed invoices after selecting a filter, for example, a date range or doctor.
- **Default View** - resets the view to all New (not received) invoices.
- **Expand / Collapse All** - expands or collapses all listed invoices.
- **Void Rejected Claims** - voids the selected invoice. You can then create a new invoice with the required changes.
- **Transmit Claims** - is used to transmit any held (suppressed) Medicare, DVA, bulk bill and fund invoices.

Claim Status Detail report

To help staff communicate key information, Zedmed v35.3.3 adds **Print Report** and **Show Report** buttons to the **Claims** tab so you can view or print the information displayed on the screen. To adjust what is included, use the options in the **Filtering** section below, select **Refresh** then open the report.

Inv/Service/Assessor	Date	Status	Patient	Outstanding	Paid	Doctor	Claim ID	Medicare Ref.
Inv 11270 23 Medicare	5/04/2022	COMPLETE Reconciled ASSESSED	Bates, Bridgid	\$0.00 \$0.00	\$39.10 \$39.10	Augustus Eason	198127	SAP000005042022102115
Inv 11271 23	5/04/2022	COMPLETE Reconciled	Simkins, Talia	\$0.00 \$0.00	\$39.10 \$39.10	Igor Fuller	198134	A0011@
Inv 11273 23	5/04/2022	COMPLETE Reconciled	Markell, Dylan	\$0.00 \$0.00	\$39.10 \$39.10	Igor Fuller	198165	A0040@
Inv 11276 23	5/04/2022	WITH MEDICARE Unpaid	Simkins, Talia	\$36.30 \$36.30	\$0.00 \$0.00	Igor Fuller	198167	A0041@
Inv 11278 10991 23	5/04/2022	COMPLETE Unpaid Reconciled	Heaney, Titus	\$0.00 \$0.00 \$0.00	\$39.10 \$0.00 \$39.10	Igor Fuller	198192	A0062@
Inv 11295 23	12/07/2022	COMPLETE Overpaid	Simkins, Talia	\$36.30 \$36.30	\$39.75 \$39.75	Igor Fuller	202739	A0001@
Inv 11297 23	14/07/2022	MEDICARE_PENDEED Unpaid	Post, Jamee	\$71.30 \$71.30	\$0.00 \$0.00	Igor Fuller	202795	SAP0000014072022150755

Processing rejected claims

Medicare can reject a claim for a full invoice or an item in an invoice. In both scenarios, the process is to review the reason shown on the Claims tab, take any required actions such as raising a new invoice, then void the rejected

invoice or item.

In Zedmed v35.3.0 and later, Outstanding and Paid values that don't match will be highlighted in pink. Double-clicking the payment opens it in the Claims tab where you can see the Overpaid, Underpaid or Rejected status and any reasons provided by Medicare. The invoices will be sorted with rejected items at the top, then underpaid and overpaid. If you click a patient their record will open for easy access to Acc Enquiry (to open the invoice) and Billing (to reinvoice).

Rejected claims for items

If an item in an invoice is rejected when performing a reconciliation on the **Payments** tab, you will receive the following message: 'Claim for service ID was rejected'. You can also tell if a payment includes a rejected item as the amount Paid will be less than the amount Outstanding (although this could be due to an underpayment of an item and not a rejection).

You can void the rejected item or investigate the rejected item and then void it. Both of these tasks are explained below.

To investigate a rejected item identified in the **Payments** tab:

1. From the **Payments** tab, double-click on the payment ID.

This will open the payment and the invoices it is for, in the **Claims** tab.

You can also search for the specific invoice number in the Claims tab by using the Invoice No. field provided and selecting **Refresh**.

The invoice with the rejected item will have the **Status** COMPLETE as Medicare considers the claim complete.

2. Expand the invoice and review the item. The reason for the rejection will be displayed next to the **Status**.
3. You can double-click an invoice or the patient to open the **Patient Details** screen for easy access to **Acct Enquiry** and **Billing**.

To void a rejected item:

1. Go to the **Payments** tab and select the payment with the rejected invoice items.
2. Select **Reconcile Payments**.
3. Select **Void Rejected Services** on the Payment Reconcile Options dialog.
4. Select **OK**.

Void Rejected Services is not selected by default as rejected items may indicate that an update is required for an item/service.

Claim Status

Refresh Default View Expand All Collapse All **Reconcile Payments** Manually Receipt Manually Associate Receipts

Claims Payments

From 9/03/2022 Payer <ALL> Show New Payment ID Invoice No.
 To 1/08/2022 Treating Doctor <ALL> Show Received Claim ID

Payment ID	Payment Date	Status	Payer / Branch	Run Number / Doctor	Paid	Outstanding	BSB	Acc. No. / Patient	Account Name	Remittance ID	Trans. ID
20624	17/03/2022	New	Department of Veterans ...	501	\$409.60	\$409.60	062290	*****6789	DR FULLER		DVA-2
20625	17/03/2022	New	Department of Veterans ...	501	\$80.30	\$80.30	062290	*****6789	DR EASON		DVA-2
20711	23/03/2022	New	Medicare Australia	801	\$115.40	\$115.40	062290	*****6789	DR EASON		BB--2C
20742	24/03/2022	New	Medicare Australia	802	\$39.10	\$39.10	062290	*****6789	DR FULLER		BB--2C
20743	24/03/2022	New	Medicare Australia	802	\$77.20	\$77.20	062290	*****6789	DR EASON		BB--2C
20752	25/03/2022	New	Department of Veterans ...	509	\$45.00	\$40.95	062290	*****6789	DR FULLER		DVA-2
20745	25/03/2022	New	Medicare Australia	803	\$80.95	\$80.95	062290	*****6789	DR EASON		BB--2C
20769	28/03/2022	New	Department of Veterans ...	512	\$180.00	\$163.80	062290	*****6789	DR FULLER		DVA-2
Inv. 11249			MED	Igor Fuller	\$45.00	\$40.95			Chapman, William		
Inv. 11250					\$45.00	\$40.95			Irvine, Jasper		
Inv. 11253					\$45.00	\$40.95			Darice, Romeo		
Inv. 11254					\$45.00	\$40.95			Gayle, Angiolina		
20753	28/03/2022				\$39.10	\$36.30	062290	*****6789	DR EASON		BB--2C
20771	29/03/2022				\$117.30	\$108.90	062290	*****6789	DR FULLER		BB--2C
20826	30/03/2022							*****6789	DR FULLER		DVA-2
20827	30/03/2022							*****6789	DR BOYKIN		DVA-2
21152	31/03/2022				\$701.20	\$701.20	062290	*****6789	DR BOYKIN		DVA-2
21205	1/04/2022				\$619.00	\$619.00	062290	*****6789	DR FULLER		DVA-2
21214	4/04/2022				\$36.30	\$36.30	123456	12345678	Fozzie Bear		BB--2C
21216	4/04/2022				\$36.30	\$36.30	123456	12345678	Fozzie Bear		BB--2C
21217	4/04/2022				\$36.30	\$36.30	123456	12345678	Fozzie Bear		BB--2C
21224	4/04/2022				\$45.00	\$45.00	062290	*****6789	DR FULLER		DVA-2
21220	4/04/2022				\$36.30	\$36.30	123456	12345678	Fozzie Bear		BB--2C
21268	5/04/2022				\$273.70	\$273.70	062290	*****6789	DR FULLER		BB--2C
21458	10/04/2022				\$35.18	\$35.18	002913	*****6789	Dummy Healt...	TSTADV 123	AAA9:
21935	10/04/2022		New Mock Health Fund Pty Ltd	TSTADV 123	\$35.18	\$35.18	002913	*****6789	Dummy Healt...	TSTADV 123	AAA9:

Payment Reconciliation Options

Allow Overpayment
 Services that have been overpaid will be automatically increased to match the amount paid for the claim.

Adjust Underpayment
 Services that have been underpaid will be automatically discounted to match the amount paid for the claim.

Ignore Underpayment
 Services that have been underpaid will be remain unchanged, there will still be an outstanding amount.

Void Rejected Services
 Services that have had their claim rejected will be automatically voided.
 This does not void entire invoices, only services.

OK Cancel

Zedmed v35.3 and later

Print Report Show Report Close

Rejected claims for full invoices

If a full invoice is rejected, it will not appear in the **Payments** tab as there will be no payment. It will appear in the **Claims** tab, so you need to come to the Claims tab on a regular basis to review and void rejected invoices. The reason for the rejection can be seen by expanding the invoice.

To process rejected claims for full invoices:

1. Go to the **Claims** tab.
2. Select **Rejected** from the **Status** field.
3. Select **Refresh**.

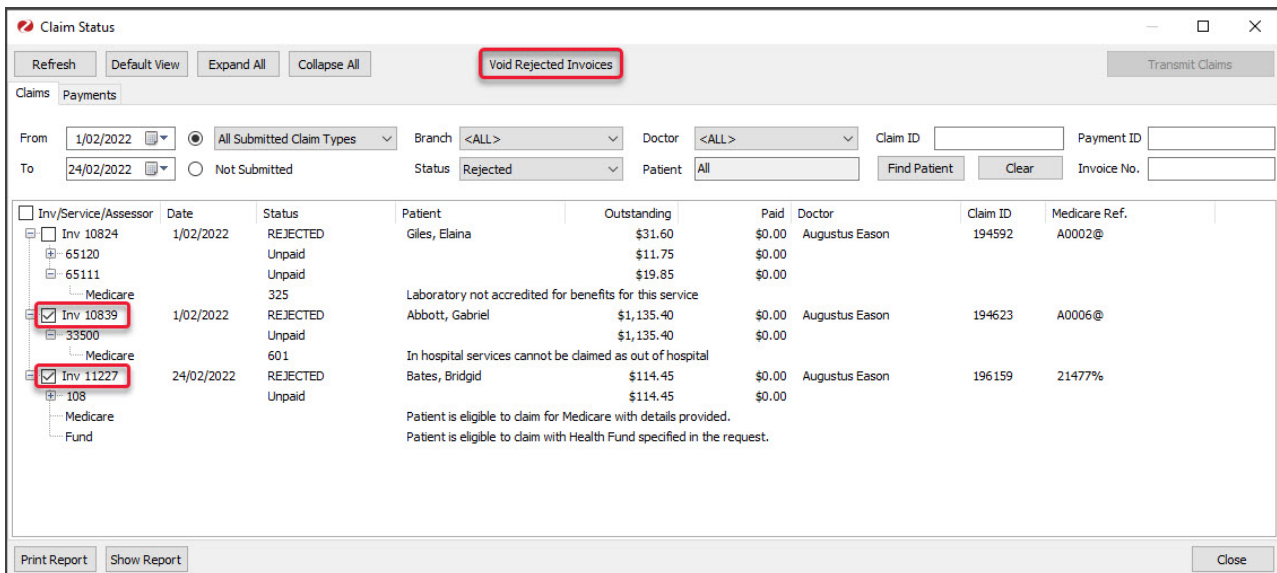
All rejected invoices will appear.

4. Expand each invoice to see the reason for the rejection next to the status.
5. Take any required actions such as creating a new invoice.

For fast access to **Acct Enquiry** and **Billing**, double-click the invoice to open the Patient's details. Once you have reviewed the reason for the rejection and taken the required actions, you can void the invoice.

6. Select the invoice to be voided.
7. Select the **Void Rejected Claims** button.
8. Confirm the action.
9. Repeat these steps for each **Rejected** status. For example, **Rejected Fund**.

The invoice will disappear from the Claims tab but it will still appear in **Acct Enquiry** with the status **Void**.



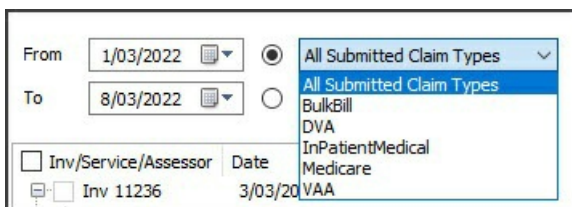
Filtering and locating invoices

Claims Invoices for the past week are shown by default, and you can filter what is displayed to view specific payers or invoices. Select **Refresh** after changing the display options.

To find a specific invoice or invoices, enter a Patient ID, Payment ID, Claim ID or Invoice No into the fields provided and select Refresh. If you are using filters to limit what is shown, they will not filter out invoices that match the search criteria.

Claims tab display options (Refresh to update selections):

- **From & To** - are used to display invoices within a selected date range based on the invoices' creation date.
- **Claim Types** - allows you to view invoices sent to the following payers:
 - **All Submitted Claim Types** - shows invoices for all payers
 - **Bulk Bill** - Medicare invoices (Terminology change).
 - **DVA** - Department of Veterans Affairs invoices.
 - **InPatientMedical** - ECLIPSE invoices(Terminology change).
 - **Medicare** - Private patient invoices - (patient is the payer. Uses MA Online or Tyro Easy Claim (Terminology change).
 - **VAA** - DVA Allied Health invoices.



- **Not submitted** - is used to show Medicare and DVA bulk bill and fund invoices that have been held (suppressed).
- **Branch** - is used to view invoices from the selected branch.
- **Status** - is used to show only invoices with the selected status, for example, Cancelled, Complete or Invalid invoices.
- **Doctor** - is used to show the invoices for a selected doctor.

Understanding the information shown

The following columns provide information for each claim:

- **Inv/Service/Assessor** - the invoice number, service and the assessor of the claim.
- **Date** - when the invoice was completed and submitted.
- **Status** - tells you if the claim has been completed and reconciled, if an invoice was rejected, if an underpayment or overpayment was received and where the invoice is in Medicare's claiming process. See details below.
- **Patient** - shows who the invoice is for and any Medicare notes, for example, why an invoice was rejected.
- **Outstanding** - shows the outstanding amount on the invoice.
- **Paid** - shows how much was received from the payer.
- **Doctors** - the doctor the invoice was raised for.

The Inv/Service/Assessor Status

The status shown in capitals is from Medicare and the status in lower case is from Zedmed. The status options provided by Medicare can change and may use similar wording for the same status. The Status will often include an explanation, for example, why an invoice was rejected.

Medicare Status options:

- **COMPLETE** - Medicare has confirmed the claim was completed. This usually indicates the claim was successful. If an invoice had a rejected item it will also appear here. To learn more, see [rejected invoice processing](#).
- **WITH MEDICARE** - The claim was submitted and is waiting to be accepted by Medicare.
- **INVALID** - The claim was not accepted into the Medicare system. This may be due to incorrect formatting or a missing mandatory field. If you try retransmitting the claim, a reason will be displayed. You can open the invalid invoice make any required changes and reinvoice.
- **MEDICARE ASSESSING** - The claim was submitted and is being assessed.
- **MEDICARE PENDABLE** - This is a real-time interactive claim (MA Online) that may be flagged for review by a person.
- **MEDICARE PENDED**- This is a real-time interactive claim (MA Online) that has been flagged for review by a person.
- **REJECTED** (incl by Medicare or fund) - The full invoice was rejected. To learn more, see [rejected invoice processing](#).
- **CANCELLED**- the practice canceled the claim after submitting it. Only cancel or void a submitted claim in rare circumstances (for example, if the claim is for the wrong patient) because you will need to manually reconcile it. Instead, wait for Medicare to reject the claim then void the invoice.
- **LOST** - this refers to situations where Medicare has not responded to a claim for 2 weeks. If the claim has been paid it can be manually receipted. If the claim has not been paid, retransmit it from Acc Enquiry.
- **Status numbers**: sometimes Medicare will show a number and text next to it instead of a capitalised status. This number is the code for the response and the text equivalent is next to it. The number does not represent a financial amount; what is important is the text.

Zedmed status options:

- **Reconciled** - the payment was receipted. The invoice and claiming process has been completed.
- **Paid** - a payment has been received for the full invoice.
- **Not paid** - the invoice was not paid. This could happen if the invoice was submitted with \$0 outstanding.
- **Underpaid** - the amount paid is less than the amount outstanding on the invoice.

- **Overpaid** - the amount paid is more than the amount outstanding on the invoice.
- **Part payment** - (ECLIPSE) when Medicare only pays part of the invoice because a health fund paid part.

Claim Status

Refresh Default View Expand All Collapse All Void Rejected Invoices Transmit Claims

Claims Payments

From: 31/01/2022 All Submitted Claim Types Branch: <ALL> Doctor: <ALL> Claim ID: Payment ID:

To: 2/02/2022 Not Submitted Status: <ALL> Patient: All Find Patient Clear Invoice No.:

Inv/Service/Assessor	Date	Status	Patient	Outstanding	Paid	Doctor	Claim ID	Medicare Ref.
<input type="checkbox"/> Inv 10816	31/01/2022	MEDICARE_PENDED	Adamson, Liam	\$71.30	\$0.00	Igor Fuller	194560	SAP0000031012022160142
<input type="checkbox"/> Inv 10815	31/01/2022	COMPLETE	Adamson, Liam	\$0.00	\$39.10	Igor Fuller	194544	A0007@
<input type="checkbox"/> Inv 10817	31/01/2022	PROCESSED	Ashley, Wyatt	\$63.30	\$36.97	Augustus Eason	194562	17701%
<input type="checkbox"/> Inv 10818	31/01/2022	COMPLETE	Gregory, Isabelle	\$0.00	\$75.75	Igor Fuller	194569	A0024@
<input type="checkbox"/> Inv 10819	31/01/2022	COMPLETE	Gayle, Angiolina	\$0.00	\$45.00	Igor Fuller	194563	D0001@
<input type="checkbox"/> Inv 10820	31/01/2022	PROCESSED	Carpenter, David	\$63.30	\$36.97	Augustus Eason	194568	17705%
<input type="checkbox"/> Inv 10821	31/01/2022	COMPLETE	Chapman, William	\$0.00	\$45.00	Igor Fuller	194570	D0002@
<input type="checkbox"/> Inv 10822	31/01/2022	WITH MEDICARE	Alston, Mia	\$27.90	\$0.00	Augustus Eason	194571	#0009@
<input type="checkbox"/> Inv 10824	1/02/2022	REJECTED	Giles, Elaina	\$31.60	\$0.00	Augustus Eason	194592	A0002@
<input type="checkbox"/> Inv 10825	1/02/2022	COMPLETE	Chapman, William	\$75.20	\$79.75	Gaye Jackson	194593	D0001@
<input type="checkbox"/> Inv 10831	1/02/2022	COMPLETE	Gregory, Isabelle	\$36.30	\$39.10	Igor Fuller	194599	A0001@
<input type="checkbox"/> Inv 10833	1/02/2022	COMPLETE	Bates, Belinda	\$76.45	\$82.30	Igor Fuller	194604	A0002@
<input type="checkbox"/> Inv 10834	1/02/2022	MEDICARE_VERIFIED	Bates, Bridgid	\$78.00	\$0.00	Augustus Eason	197941	197941
<input type="checkbox"/> Inv 10835	1/02/2022	WITH MEDICARE	Bates, Ferdinand	\$32.25	\$0.00	Augustus Eason	194605	#0004@
<input type="checkbox"/> Inv 10836	1/02/2022	COMPLETE	Bates, Gary	\$72.75	\$76.80	Augustus Eason	194606	A0005@
<input type="checkbox"/> Inv 10837	1/02/2022	WITH MEDICARE	Abbott, Gabriel	\$227.10	\$0.00	Gaye Jackson	194621	A0003@
<input type="checkbox"/> Inv 10838	1/02/2022	WITH MEDICARE	Abbott, Gabriel	\$227.10	\$0.00	Gaye Jackson	194622	A0004@
<input type="checkbox"/> Inv 10839	1/02/2022	REJECTED	Abbott, Gabriel	\$1,135.40	\$0.00	Augustus Eason	194623	A0006@
<input type="checkbox"/> Inv 10843	2/02/2022	WITH MEDICARE	Chapman, William	\$40.95	\$0.00	Igor Fuller	194682	D0009@
<input type="checkbox"/> Inv 10844	2/02/2022	COMPLETE	Simkins, Talla	\$36.30	\$39.10	Igor Fuller	194684	A0003@
<input type="checkbox"/> Inv 10845	2/02/2022	COMPLETE	Post, Jamee	\$70.30	\$75.75	Igor Fuller	194685	A0004@
<input type="checkbox"/> Inv 10846	2/02/2022	COMPLETE	Markell, Dylan	\$71.30	\$39.10	Augustus Eason	194686	SAP0000002022022145115
<input type="checkbox"/> Inv 10847	2/02/2022	INVALID	Irvine, Jasper	\$40.95	\$0.00	Igor Fuller	194687	

Print Report Show Report Close