1220/1420 – Claim Changes Summary Report

The Claim Changes Summary Report contains all claims in the working group in which changes have been made to monitored fields. For each changed claim, the final change to all monitored fields is included. This reflects the current contents of the field.

NOTE: The Claim Changes reports can be slow. To make the report generation as efficient as possible, fine-tune your claim list until it contains only those claims for which you need change information. If you request the report on too many claims, your report will timeout before it is created. Please limit the number of claims in the report request.

- This report is available for both unreleased claims (1220) and released claims (1420).
- Each claim begins with an identification line and is followed by the change history for each changed field on the claim. The history includes the following (in order of columns presented):
  (a) date of change, (b) time of change, (c) name of user or process that made the change,
  (d) what was bridged in, (e) what was done to the data, (f) the data itself.
- If data on the line that contains ORIGINAL is empty, the field was originally empty.
- All changes made to claims are recorded. Changes on this report are changes to fields that you have set up as monitored fields in *Claim Changes* on the *Maintenance, System Administration* menu. If you have not set up any monitored fields, the report will always be empty
- You can monitor changes to any fields except the fields on the History or Payer Activity tabs.
- Because each claim can potentially contain a large number of service lines, and because the report will reflect changes to the field in every service line, we recommend that you do not monitor changes on service line field unless it is absolutely necessary.

March 15, CCYY 01:22:33 PM

PAGE NO: 1
CLIENT: 9999
USER ID: tbill

CLAIM CHANGES SUMMARY REPORT

PAT CTRL NO	PATIENT NAME	PAYER	AMOUNT	BILL TYPE	STMT FROM DATE	STMT THRU DATE
1012665	CLARK, JOHN	MEDICARE	465.20		08/02/CCYY	08/02/CCYY

Diagnosis Code , 0

8/7/CCYY	***6:47:15PM***	hydeba	Original	***line deleted***	920
8/7/CCYY	***6:47:15PM***	hydeba		***line deleted***	920.22

PAT CTRL NO	PATIENT NAME	PAYER	AMOUNT	BILL TYPE	STMT FROM DATE	STMT THRU DATE
12345	HYDE, BARB	BC/BS OF TULSA	10, 456.90	111	08/06/CCYY	08/10/CCYY

Accident State , 0

8/12/CCYY	***3:24:14PM***	hydeba	Original	***line inserted***	
8/12/CCYY	***3:24:14PM***	hydeba		***line inserted***	OK

REPORT TOTALS:

TOTAL CLAIMS:	2
TOTAL AMOUNT:	10,922.10
TOTAL CHANGES:	2