Optum

Assurance Reimbursement Management™

# 1100 Balancing report

The **Balancing (1100)** report is a submission report which means it is based on a single claim submission file. The report can be created automatically from an auto-list or created manually from *Create Reports, Submission*.

- The first row in the report is a heading row that names the columns.
- The data of the report is a row for each claim in the claim submission file.
- The report is a delimited file that follows the standard product rules for determining its delimiter:
  - Default is the delimiter set in **Report Options**.
  - To change the delimiter for this report only, create an auto module and change the delimiter for the auto module.
- The native extension for this report is .csv. If your system requires another extension, it must be changed after the file is downloaded to your system.
- *Discarded* claims are not stored in the database; only the record of their bridging and discard is stored.

| # | Field name | Type | Max length | Optum comments |
|---|---|---|---|---|
| 1 | COID | N | 5 | From 00 record<br>Client Unit (STSPC_UNIT) |
| 2 | Filler (BILL83) | A/N | 6 | Empty (not used) |
| 3 | Patient Control Number | N | 12 | |
| 4 | Patient Name | A/N | 30 | Last, First MI |
| 5 | Effective Date CCYYMMDD | N | 8 | Bill generated date from 10 record (C_DATE) |
| 6 | Run Date CCYYMMDD (Transaction Date) | N | 8 | Bridge date (BR_DATE)<br>*Not visible* |
| 7 | Patient Type | A/N | 2 | I/O (INPOUTP)<br>*Not visible* |
| 8 | Financial Class | A/N | 2 | Active payer FC (FCLASS) |
| 9 | Service Code | A/N | 4 | From the 01 record (STSPC_1) |
| 10 | Charge Billed | A/N | 14 | Total chgs (TOT_AMT) |
| 11 | Status | A/N | 20 | *Accepted, Rejected, Warned, Split, Discarded* |

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