# The Different Claim Stages

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Version 14.19

## The Different Claim Stages

| Stage | Meaning of Stage | When you would use this stage | What categories are in this stage? (ex: A0-A2? or Q0-Q3?) |
|---|---|---|---|
| **Urgent Problems** | - Still in Q0 status (never sent or printed) after two weeks<br>- Still in Q2 status (never acknowledged by clearinghouse after two weeks<br>- Still in A1/A2 status (acknowledged but never paid) after two weeks<br>- Rejected or denied at any time (A3,A4,A6,A7,A8,F2) | To work claims sitting with no action taken (like if a Q0 claim was daysheeted and not sent, and has an insurance balance) | Various, see lists in second column |
| **All Daysheeted claims (A/R)** | All archived claims | When working your A/R | Could be any category |
| **Not Daysheeted, new claims only** | Claims that are not archived on a daysheet | When queueing your claims to the claims queue | Could be any category |
| **Not Daysheeted, include payments** | Claims that are not archived on a daysheet, including those with only current payments | To check for current payments on current charges | Could be any category |
| **Unsent (not transmitted or printed)** | Claims that are not dropped to a CMS-1500 or sent electronically to the clearinghouse. | To see what claims still need to be processed to CH | Q0 |
| **In** | Claims that are sent to | To see that claims are ready | |

| | | | |
|---|---|---|---|
| **transmission queue** | Claims Queue to be printed or transmitted electronically | to be printed to paper or sent electronically | Q1 |
| **Transmitted, not yet acknowledged** | Claims that are sent from Claims Queue with a Q2 status | To see what claims are not acknowledged from CH | Q2 |
| **Printed (claim or statement)** | Claims that are printed from the claims queue or printed from the patient account | To see what claims are printed | Q3 |
| **Acknowledged by clearinghouse** | Claims that received an acknowledgement file back from Clearinghouse | To see what claims are acknowledged from CH | A0,A1 |
| **Acknowledged by payer** | Claims that received an acknowledgement file back from Insurance Payer | To see what claims are acknowledged from Insurance Payer | A2,A5 |
| **Denied or Rejected** | Claims that are rejected internally in OP and not transmitted or claims that were rejected from Clearinghouse | To see what claims are rejected or denied internally or externally | A3,A4,A6,A7,A8,F2 |
| **Pended** | Claims that are pending at the Payer | To see what claims are pending at the insurance level | P0-P6,R0-R16 |
| **Finalized/Paid** | Claims that are finalized at payer, or paid in Office Practicum | To see what claims are finalized and or paid | F0,F1,F3,F3F,F3N,F4 |
| **Uncollectable** | This is used to track the uncollectable balances for patients that are in bad debt | To track the total balances sent to an U/C status and potentially use this to send to a collection agency. | FU |
| **Office Responsibility** | This is used to create a "queue" of claims that need to be assessed by someone in the Practice. | To track claims that need to be looked at by a defined group of staff in the Practice. | QR |

Version 14.10

# The Different Claims+AR Stages

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|---|---|---|---|

| Stage | Meaning of Stage | When you would use this stage | What categories are in this stage? (ex: A0-A2? or Q0-Q3?) |
|---|---|---|---|
| **Urgent Problems** | - Still in Q0 status (never sent or printed) after two weeks<br>- Still in Q2 status (never acknowledged by clearinghouse after two weeks<br>- Still in A1/A2 status (acknowledged but never paid) after two weeks<br>- Rejected or denied at any time (A3,A4,A6,A7,A8,F2) | To work claims sitting with no action taken (like if a Q0 claim was daysheeted and not sent, and has an insurance balance) | Various, see lists in second column |
| **All Daysheeted claims (A/R)** | All archived claims | When working your A/R | Could be any category |
| **Not Daysheeted, new claims only** | Claims that are not archived on a daysheet | When queueing your claims to the claims queue | Could be any category |
| **Not Daysheeted, include payments** | Claims that are not archived on a daysheet, including those with only current payments | To check for current payments on current charges | Could be any category |
| **Unsent (not transmitted or printed)** | Claims that are not dropped to a CMS-1500 or sent electronically to the clearinghouse. | To see what claims still need to be processed to CH | Q0 |
| **In transmission queue** | Claims that are sent to Claims Queue to be printed or transmitted electronically | To see that claims are ready to be printed to paper or sent electronically | Q1 |
| **Transmitted, not yet acknowledged** | Claims that are sent from Claims Queue with a Q2 status | To see what claims are not acknowledged from CH | Q2 |
| **Printed (claim** | Claims that are printed from the claims queue or printed | To see what claims are | Q3 |

| or statement) | from the patient account | printed | |
|---|---|---|---|
| **Acknowledged by clearinghouse** | Claims that received an acknowledgement file back from Clearinghouse | To see what claims are acknowledged from CH | A0,A1 |
| **Acknowledged by payer** | Claims that received an acknowledgement file back from Insurance Payer | To see what claims are acknowledged from Insurance Payer | A2,A5 |
| **Denied or Rejected** | Claims that are rejected internally in OP and not transmitted or claims that were rejected from Clearinghouse | To see what claims are rejected or denied internally or externally | A3,A4,A6,A7,A8,F2 |
| **Pended** | Claims that are pending at the Payer | To see what claims are pending at the insurance level | P0-P6,R0-R16 |
| **Finalized/Paid** | Claims that are finalized at payer, or paid in Office Practicum | To see what claims are finalized and or paid | F0,F1,F3,F3F,F3N,F4 |
| **Uncollectable** | This is used to track the uncollectable balances for patients that are in bad debt | to track the total balances sent to an U/C status and potentially use this to send to a collection agency. | FU |