

# Patient Accounts

## Module 6 - Claiming using ECLIPSE

This module covers processing ECLIPSE claims and contains the following topics:

Activities	Title
6-1	Submitting Claims
6-2	Re-submitting Claims
6-3	Checking the Report Status
6-4	Processing the ECLIPSE Remittance Advices

## Introduction

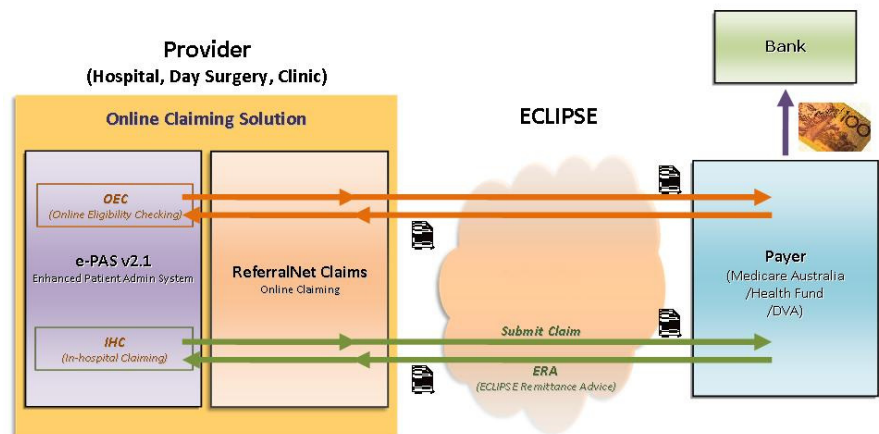
The name ECLIPSE is an industry coined acronym, and stands for: Electronic Claim Lodgement and Information Processing Service Environment.

ECLIPSE is an extension to Medicare Australia's online claiming solutions and

- ♦ Offers a secure connection between practices, public and private hospitals, billing agents, Medicare and Department of Veterans' Affairs and health funds.
- ♦ Incorporates direct communication for providers with Medicare and health funds, all in the one transaction.

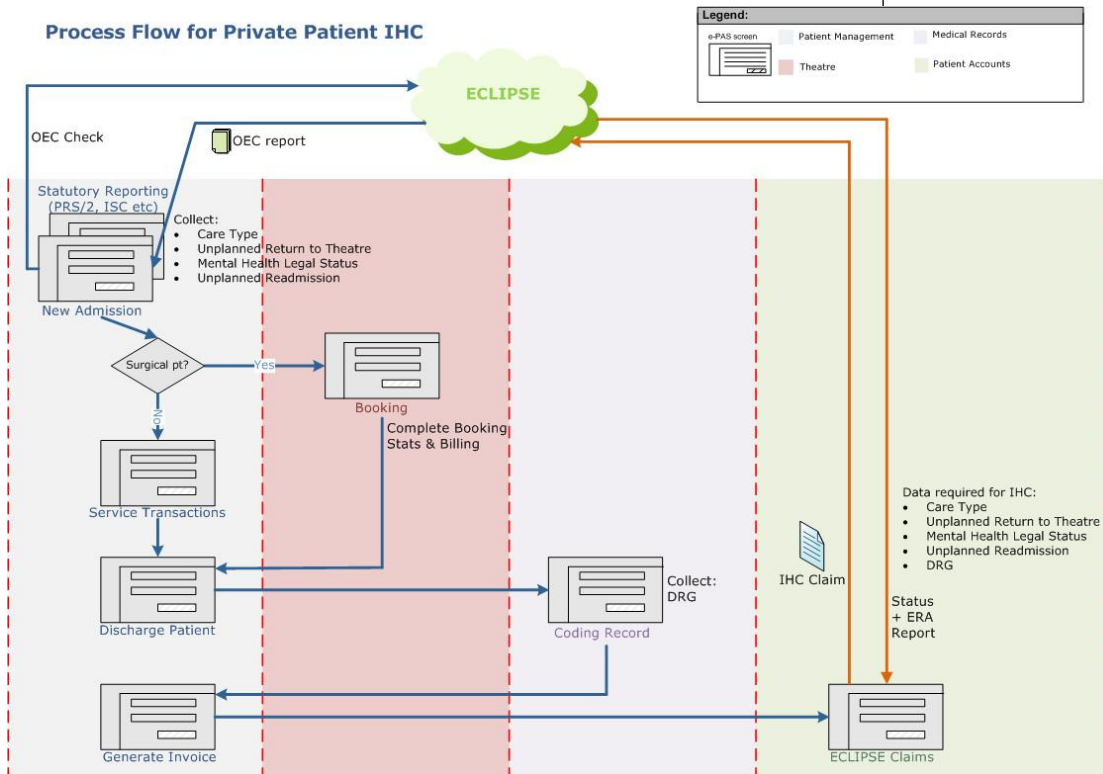
In Hospital Claiming (IHC) allows public and private hospitals and day facilities to lodge claims for a patient's hospital stay directly with their Health Fund or DVA. This includes claims for accommodation, theatre, prosthetics and miscellaneous services.

You can submit individual invoices or a batch of invoices for IHC. The process is summarised in the following diagram where ReferralNet Claims operates in the background and is transparent to the user. Based on the status of the claim the user determines if the monies have been received from the Health Fund and the payments can be allocated.



◆ Introduction

Navigating through the e-PAS screens, this process looks like:



Before you can submit a claim through ECLIPSE, remember, that the episode must be coded (ICD coding), grouped and invoiced. To ensure that all the required episode information is also collected (for example Care Type) ensure that the statutory reporting information is complete.



Activity

Use this space to add your own notes.

## Activity 6-1: Submitting Claims

You can submit a batch of claims for a specific Health Fund or for a date range. There are 2 tabs on the ECLIPSE Claiming screen one for claims and the other for the Electronic Remittance Advices.

The IHC enquiry screen shows the debtor, MRN/episode number, the invoice Date and number and a Status with the Transmission date. The Report Status and Process Status are set by ECLIPSE. Once the report status is READY indicating that the Health Fund has paid the claim, the Process Status is COMPLETE and an ERA has been sent.

Use the IHC Enquiry screen to search by debtor where you can search for all un-submitted claims for a specified Health Fund for a date range of a week.

The default search is for claims already submitted and failed submissions, so don't forget to change the search criteria to Not Submitted.

To search for and submit claims:

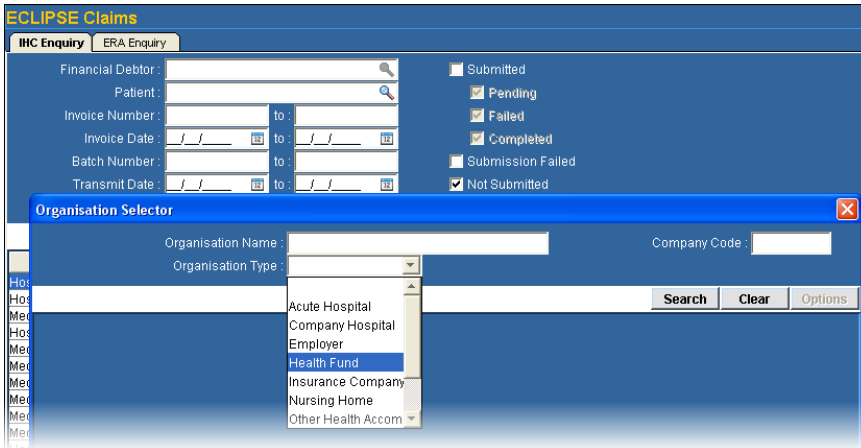
1. From the Patient Accounts menu, select ECLIPSE Claims.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status	Process Status	Status Date	Select
Hospitals Contribution Fun000066 / 4	140		28/07/2009	Pending	28/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	31/07/2009	<input type="checkbox"/>
Hospitals Contribution Fun000065 / 3	141		28/07/2009	Pending	28/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	31/07/2009	<input type="checkbox"/>
Medibank Private	000077 / 1	104	25/05/2009	Pending	08/06/2009	REPORTED	COMPLETE	31/07/2009	<input type="checkbox"/>
Hospitals Contribution Fun000067 / 1	86		07/05/2009	Pending	25/05/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	31/07/2009	<input type="checkbox"/>
Medibank Private	000061 / 4	87	14/05/2009	Pending	14/05/2009	PROCESSING	HEALTH_FUND_ASSESS	31/07/2009	<input type="checkbox"/>
Medibank Private	000061 / 7	88	23/04/2009	Pending	28/04/2009	REPORTED	COMPLETE	31/07/2009	<input type="checkbox"/>
Medibank Private	000061 / 6	87	23/04/2009	Pending	28/04/2009	REPORTED	COMPLETE	31/07/2009	<input type="checkbox"/>
Medibank Private	000061 / 5	86	23/04/2009	Pending	28/04/2009	REPORTED	COMPLETE	31/07/2009	<input type="checkbox"/>
Medibank Private	000062 / 1	80	23/04/2009	Pending	23/04/2009	REPORTED	COMPLETE	31/07/2009	<input type="checkbox"/>
Medibank Private	000061 / 1	82	22/04/2009	Pending	23/04/2009	PROCESSING	HEALTH_FUND_ASSESS	31/07/2009	<input type="checkbox"/>
Hospital Benefits Associa000033 / 2881			07/04/2009	Pending	07/04/2009	REPORTED	COMPLETE	31/07/2009	<input type="checkbox"/>
Department Of Veterans A000031 / 3	95		01/04/2009	Pending	01/04/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	31/07/2009	<input type="checkbox"/>

2. Clear the Submitted and Submission fields.
3. Select **Not Submitted**.

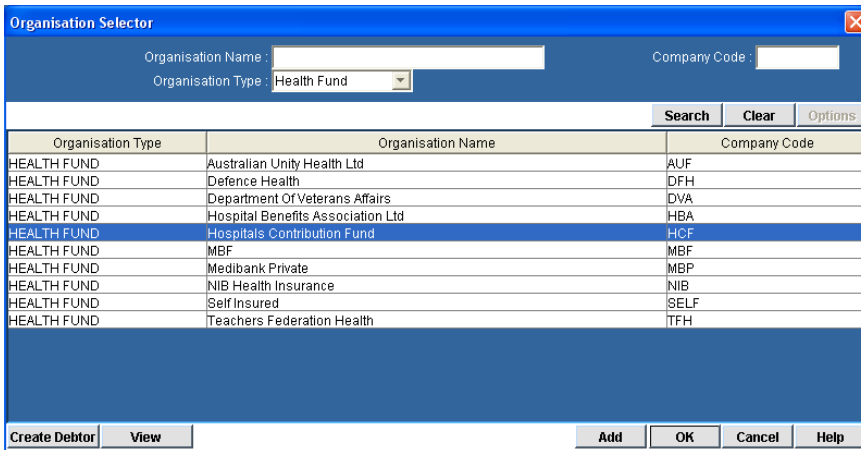
◆ Activity 6-1: Submitting Claims

4. In the Financial Debtor field, click .



The screenshot shows the 'ECLIPSE Claims' interface. At the top, there are tabs for 'IHC Enquiry' and 'ERA Enquiry'. Below these are several input fields: 'Financial Debtor', 'Patient', 'Invoice Number', 'Invoice Date', 'Batch Number', and 'Transmit Date', each with a search icon. To the right of these fields are checkboxes for 'Submitted', 'Pending', 'Failed', 'Completed', 'Submission Failed', and 'Not Submitted'. A dialog box titled 'Organisation Selector' is open in the foreground. It has fields for 'Organisation Name' and 'Company Code'. Below these is a dropdown menu for 'Organisation Type' which is currently open, showing a list of options: 'Acute Hospital', 'Company Hospital', 'Employer', 'Health Fund' (which is highlighted), 'Insurance Company', 'Nursing Home', and 'Other Health Accom'. At the bottom of the dialog are 'Search', 'Clear', and 'Options' buttons.

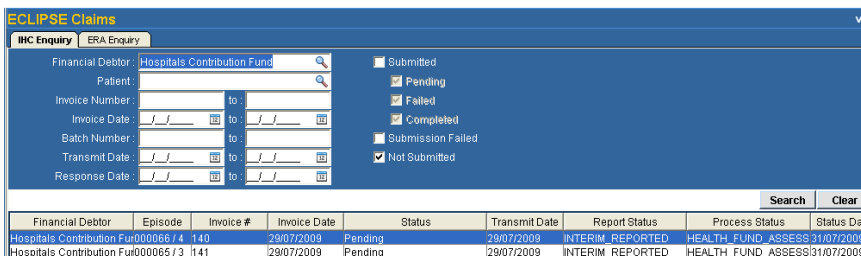
5. In the Organisation Type list, select Health Fund and click **Search**.



This screenshot shows the 'Organisation Selector' dialog box with the 'Organisation Type' dropdown set to 'Health Fund'. Below the dropdown is a table listing various health fund organisations. The 'Hospitals Contribution Fund' is highlighted in blue. At the bottom of the dialog are buttons for 'Create Debtor', 'View', 'Add', 'OK', 'Cancel', and 'Help'.

Organisation Type	Organisation Name	Company Code
HEALTH FUND	Australian Unity Health Ltd	AUF
HEALTH FUND	Defence Health	DFH
HEALTH FUND	Department Of Veterans Affairs	DVA
HEALTH FUND	Hospital Benefits Association Ltd	HBA
HEALTH FUND	Hospitals Contribution Fund	HCF
HEALTH FUND	MBF	MBF
HEALTH FUND	Medibank Private	MBP
HEALTH FUND	NIB Health Insurance	NIB
HEALTH FUND	Self Insured	SELF
HEALTH FUND	Teachers Federation Health	TFH

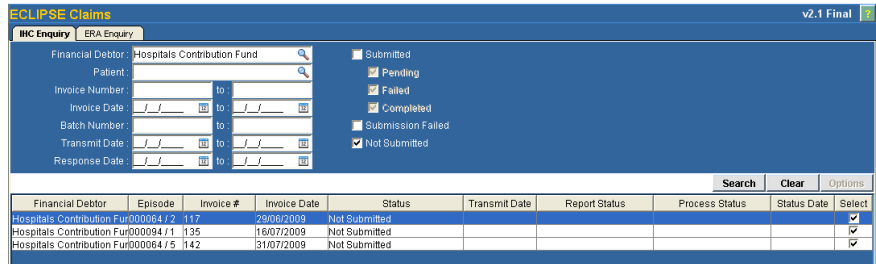
6. Select Hospitals Contribution Fund and click **OK**.



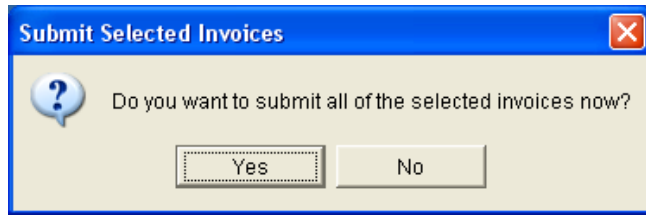
This screenshot shows the 'ECLIPSE Claims' main interface. The 'Financial Debtor' field now contains 'Hospitals Contribution Fund'. The 'Organisation Selector' dialog box is no longer visible. The interface shows the same input fields and checkboxes as in the previous screenshot. At the bottom, there is a table with columns: 'Financial Debtor', 'Episode', 'Invoice #', 'Invoice Date', 'Status', 'Transmit Date', 'Report Status', 'Process Status', and 'Status Date'.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status	Process Status	Status Date
Hospitals Contribution Fun000066 / 4	140		29/07/2009	Pending	29/07/2009	INTERIM REPORTED	HEALTH_FUND_ASSESS	31/07/2009
Hospitals Contribution Fun000066 / 3	141		29/07/2009	Pending	29/07/2009	INTERIM REPORTED	HEALTH_FUND_ASSESS	31/07/2009

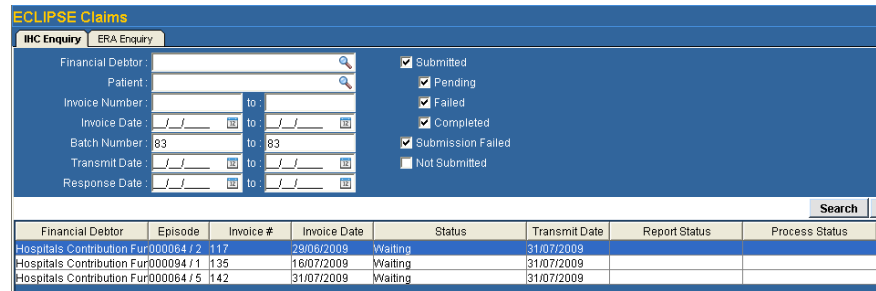
7. Click **Search**. The Un-submitted Claims for HCF display.



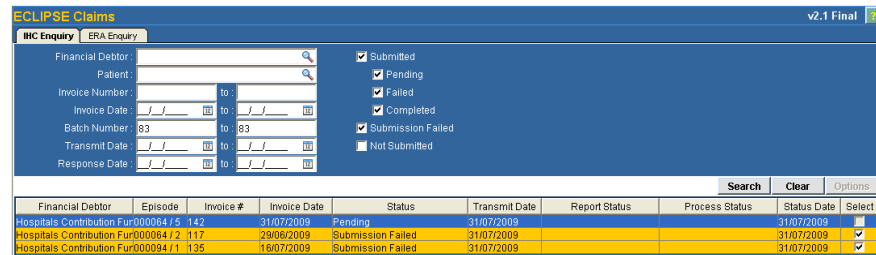
8. Click **Submit Selected Invoices** and **Yes** to confirm.



9. Notice that the Status is updated from *Waiting* to *Pending*.



10. Click **Search** again and the Status is refreshed.



11. Select the second line item with a status = *Submission Failed*.

◆ Activity 6-1: Submitting Claims

12. Click **In Hospital Claim Detail** to view the error message.

**In Hospital Claim**

**Invoice Details**

MRN : 000064  
 Episode : 2  
 Date : 29/06/2009  
 Number : 117  
 Amount : 665.00  
 Responsible : Hospitals Contribution Fund

**Claim Details**

Status : **Submission Failed**      Transaction ID :  
 Transmit Date : 31/07/2009 16:09:30      Account Reference ID : 000064x117  
 Status Date : 31/07/2009 16:09:32      Batch : 83  
 IHC Status Code :  
 IHC Report Status :  
 IHC Process Status :

**Submission Error : The Care Type has not been entered for the episode**

Re-submit    View Process Report    View ERA Report    Copy to Clipboard    Cancel

13. Take note of the highlighted details and click **Cancel**.

14. From the Patient Management menu, select Episode Transaction.

15. Enter the MRN = 64 and click **Search**.

16. Click **Episode List** and highlight Episode = 2.

**Episode List**

Identifier : 000064      Chart (v1) : 5. NORTH WARD ROOM 5  
 Name : Halford,Heather      000064  
 Date of Birth : 12/12/1976      Gender : Female

Episode No	Admiss No	Type	Status	Admission Date	Admission Time	Discharge
5	1128	Day-Patient	ACTIVE	10/07/2009	08:00	Complete
4	1125	Day-Patient	ACTIVE	07/07/2009	08:00	Complete
3	1114	Day-Patient	ACTIVE	29/06/2009	07:30	Complete
2	1085	Day-Patient	ACTIVE	09/06/2009	09:00	Complete
1	1081	In-Patient	ACTIVE	04/05/2009	09:00	Complete

17. Click **Edit** and select the PRS/2 tab.

Episode Details							
Episode Details	Relationships	Episode Comment	Episode Payers	Providers	Diets	Chart Volume List	Provisional
<b>PRS2</b>	GHAPDC Info	ISAAC	3 B Certificates	Category Override	SNAP	AROC	NSW Cancer Register
Identifier : 000064		Chart (v1) : 5. NORTH WARD ROOM 5					
Name : Halford,Heather		000064					
Date of Birth : 12/12/1976		Gender : Female					
Episode Number : 2		Admission : 09/06/2009 09:00		Reason :			
Admission Number : 1085		Discharge : 09/06/2009 12:00		Provisional DRG : (D65Z) Nasal Trauma and Deformity			
Payer Name : Hospitals Contribution Fund				Coding Status : Coding			
Qualification Status :				Contract Type :			
Care Type :				Contract Role :			
Admission Criterion :				Funding Arrangement :			
Intended Duration of Stay :				Readmission Status :			
Hospital Insurance Status :				Unplanned Theatre Visit :			
Mental Health Legal Status :				<input type="checkbox"/> Same Day Authorization			
Preferred Language :				Palliative Care Status :			
Interpreter Required :				Program Identifier :			
Src of Referral to Palliative Care :				ACAS Status :			
Contract/Spoke Identifier :				Mental Health Identifier :			

18. Click **Edit** and enter the Care Type.

Episode Details							
Episode Details	Relationships	Episode Comment	Episode Payers	Providers	Diets	Chart Volume List	Provisional
<b>PRS2</b>	GHAPDC Info	ISAAC	3 B Certificates	Category Override	SNAP	AROC	NSW Cancer Register
Identifier : 000064		Chart (v1) : 5. NORTH WARD ROOM 5					
Name : Halford,Heather		000064					
Date of Birth : 12/12/1976		Gender : Female					
Episode Number : 2		Admission : 09/06/2009 09:00		Reason :			
Admission Number : 1085		Discharge : 09/06/2009 12:00		Provisional DRG : (D65Z) Nasal Trauma and Deformity			
Payer Name : Hospitals Contribution Fund				Coding Status : Coding			
Qualification Status : Not Applicable(0)				Contract Type :			
Care Type : Other care -Acute- includi...				Contract Role :			
Admission Criterion : Day Band 1A, 1B, 2, 3 and...				Funding Arrangement :			
Intended Duration of Stay : Intended same day(1)				Readmission Status : Not Applicable/not known(8)(8)			
Hospital Insurance Status : Insured but level of hospiti...				Unplanned Theatre Visit : No unplanned theatre visit...			
Mental Health Legal Status : Not applicable(9)(8)				<input type="checkbox"/> Same Day Authorization			
Preferred Language : English(19)(1201)				Palliative Care Status : No Palliative Care re...			
Interpreter Required : Not Stated/Inadequately D...				Program Identifier :			
Src of Referral to Palliative Care :				ACAS Status :			
Contract/Spoke Identifier :				Mental Health Identifier :			

19. Enter the mandatory data and click **OK**.

◆ Activity 6-2: Re-submitting Claims

## Activity 6-2: Re-submitting Claims

To re-submit the claim:

1. From the Patient Accounts menu, select ECLIPSE Claims.
2. Select Submission Failed and enter the Health Fund.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status	Process Status	Status Date	Select
Hospitals Contribution Fur000084 / 5	142		31/07/2009	Pending	31/07/2009	PROCESSING	HEALTH_FUND_ASSESS	31/07/2009	
Hospitals Contribution Fur000086 / 4	140		29/07/2009	Pending	29/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	31/07/2009	
Hospitals Contribution Fur000086 / 3	141		29/07/2009	Pending	29/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	31/07/2009	

3. Click Search.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status
Hospitals Contribution Fur000084 / 2	117		29/06/2009	Submission Failed		31/07/2009
Hospitals Contribution Fur000094 / 1	135		16/07/2009	Submission Failed		31/07/2009
Hospitals Contribution Fur000094 / 1	134		16/07/2009	Submission Failed		16/07/2009

4. Click **Submit Selected Invoices** and **Yes**.

**Submit Selected Invoices**

Do you want to submit all of the selected invoices now?

Yes No

5. Wait 10 seconds and click **Search**.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status	Process Status	Status Date	Select
Hospitals Contribution Fur000084 / 2	117		29/06/2009	Pending	31/07/2009	PROCESSING	HEALTH_FUND_ASSESS	31/07/2009	
Hospitals Contribution Fur000094 / 1	135		16/07/2009	Submission Failed	31/07/2009			31/07/2009	
Hospitals Contribution Fur000094 / 1	134		16/07/2009	Submission Failed	31/07/2009			31/07/2009	

6. Note that the Report Status of the episode you corrected now displays as PROCESSING.
7. To submit the remaining claims follow the process in steps 11 to 19 in Activity 5-1 to correct the errors.
8. Re-submit the claims.

## Activity 6-3: Checking the Report Status

Once the claims have been submitted successfully, you can check the Report Status using the ECLIPSE Claims option.

There are 3 columns displaying a status on this screen:

Status = Claim status in e-PAS

Report Status = Shows if there's an IHC Processing Report to view

Processing Status = the DVA or Health fund status

The following table lists the states and descriptions.

Status	Report Status	Processing Status
<p><b>Not Submitted:</b></p> <p>the claim has not yet been submitted via ECLIPSE</p>	<p>INTERIM_REPORTED</p> <p>DVA or Health Fund has received claim and sends an interim report such as 'Claim is being manually reviewed.</p>	<p>HEALTH_FUND_ASSESSMENT</p> <p>DVA or the Health Fund is assessing the claim which varies from fund to fund and may take up to 21 days.</p>
<p><b>Waiting:</b></p> <p>the claim is being submitted to ECLIPSE</p>	<p>PROCESSING</p> <p>The claim is being processed by ECLIPSE and or the Health Fund</p>	<p>COMPLETE</p> <p>The claim assessment has been completed and a report returned</p>
<p><b>Pending:</b></p> <p>the claim has been submitted to ECLIPSE</p>	<p>READY</p> <p>A report from the Health Fund has been sent and may require further action such as contacting the fund.</p>	<p>HEALTH_FUND_REJECT</p> <p>DVA or the Health Fund has rejected the claim and returned a reason in the report.</p>
<p><b>Submission Failed</b></p> <p>e-PAS detects errors such as inaccurate or missing data and does not send the claim</p>	<p>REPORTED</p> <p>A final IHC Processing report has been sent with the claim details.</p>	
<p><b>Failed</b></p> <p>The claim is rejected by the Health Fund or DVA, see the report</p>		
<p><b>Completed</b></p> <p>the claim has been processed by the Health Fund or DVA, see the ERA</p>		

◆ Activity 6-3: Checking the Report Status

Where the following combination displays the claim has been paid and is ready to be processed and receipted in e-PAS.

Status	Transmit Date	Report Status	Process Status	Sta
Completed	02/07/2009	REPORTED	COMPLETE	23/0
Completed	02/07/2009	REPORTED	COMPLETE	23/0
Completed	02/07/2009	REPORTED	COMPLETE	23/0

Pending claims must always display today's date; otherwise, there may be a breakdown in the communications between e-PAS/ECLIPSE/Health Fund or DVA. Global Health recommends that you log a ticket with Customer Support if the Status Date is older than today's date for Pending claims.

The screenshot shows the 'ECLIPSE Claims' interface. It includes search filters for Financial Debtor, Patient, Invoice Number, Invoice Date, Batch Number, Transmit Date, and Response Date. On the right, there are checkboxes for Submitted, Pending, Failed, Completed, Submission Failed, and Not Submitted. Below the filters is a table with columns: Financial Debtor, Episode, Invoice #, Invoice Date, Status, Transmit Date, Report Status, Process Status, and Status Date. The table contains several rows of data, including entries from Hospitals Contribution Fund, Medibank Private, Hospital Benefits Association, Department Of Veterans Affairs, and Australian Unity Health Ltd.

To check the status of claims:

1. From the Patient Accounts menu, select ECLIPSE Claims.
2. Clear the Submission Failed, Failed and Completed fields.

This screenshot shows the search filters section of the ECLIPSE Claims interface. The filters for Invoice Number, Invoice Date, Batch Number, Transmit Date, and Response Date are visible. On the right side, the checkboxes for Submitted, Pending, Failed, Completed, Submission Failed, and Not Submitted are shown, with Submitted and Pending checked.

3. Click **Search** and note the Status Date.

The screenshot shows the 'IHC Enquiry' tab selected. Search filters include Financial Debtor, Patient, Invoice Number, Invoice Date, Batch Number, Transmit Date, and Response Date. On the right, checkboxes for Submitted, Pending, Failed, Completed, Submission Failed, and Not Submitted are visible. The 'Submitted' checkbox is checked. Below the filters is a table with columns: Financial Debtor, Episode, Invoice #, Invoice Date, Status, Transmit Date, Report Status, Process Status, Status Date, and Select.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status	Process Status	Status Date	Select
Hospitals Contribution Fur000064	117	140	29/06/2009	Pending	31/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Hospitals Contribution Fur000066	140	141	29/07/2009	Pending	29/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Hospitals Contribution Fur000065	141	104	29/07/2009	Pending	29/07/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Medibank Private	000077	11	29/05/2009	Pending	09/06/2009	REPORTED	COMPLETE	03/08/2009	<input type="checkbox"/>
Hospitals Contribution Fur000067	11	96	07/05/2009	Pending	25/05/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Medibank Private	000061	14	14/05/2009	Pending	14/05/2009	PROCESSING	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Medibank Private	000061	17	23/04/2009	Pending	28/04/2009	REPORTED	COMPLETE	03/08/2009	<input type="checkbox"/>
Medibank Private	000061	16	23/04/2009	Pending	28/04/2009	REPORTED	COMPLETE	03/08/2009	<input type="checkbox"/>
Medibank Private	000061	15	23/04/2009	Pending	28/04/2009	REPORTED	COMPLETE	03/08/2009	<input type="checkbox"/>
Medibank Private	000062	11	23/04/2009	Pending	23/04/2009	REPORTED	COMPLETE	03/08/2009	<input type="checkbox"/>
Medibank Private	000061	11	22/04/2009	Pending	23/04/2009	PROCESSING	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Hospital Benefits Associat	000033	28	07/04/2009	Pending	07/04/2009	REPORTED	COMPLETE	03/08/2009	<input type="checkbox"/>
Department Of Veterans Aff	000031	13	01/04/2009	Pending	01/04/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>
Australian Unity Health Ltd	000004	12	31/03/2009	Pending	01/04/2009	INTERIM_REPORTED	HEALTH_FUND_ASSESS	03/08/2009	<input type="checkbox"/>

4. Click **Clear** and clear the Pending, Failed and Submission Failed fields.

The screenshot shows the 'IHC Enquiry' tab. The search filters are the same as in the previous screenshot. On the right, the checkboxes for Submitted, Pending, Failed, Completed, Submission Failed, and Not Submitted are visible. The 'Submitted' and 'Completed' checkboxes are checked, while 'Pending', 'Failed', and 'Submission Failed' are unchecked.

5. Click **Search** and note the updated status.

The screenshot shows the 'IHC Enquiry' tab. The search filters are the same as in the previous screenshot. On the right, the checkboxes for Submitted, Pending, Failed, Completed, Submission Failed, and Not Submitted are visible. The 'Submitted' and 'Completed' checkboxes are checked. Below the filters is a table with columns: Financial Debtor, Episode, Invoice #, Invoice Date, Status, Transmit Date, Report Status, Process Status, Status Date, and Select.

Financial Debtor	Episode	Invoice #	Invoice Date	Status	Transmit Date	Report Status	Process Status	Status Date	Select
Hospitals Contribution Fur000065	128	129	02/07/2009	Completed	02/07/2009	REPORTED	COMPLETE	23/07/2009	<input type="checkbox"/>
Hospitals Contribution Fur000066	13	129	02/07/2009	Completed	02/07/2009	REPORTED	COMPLETE	23/07/2009	<input type="checkbox"/>
Hospitals Contribution Fur000064	13	123	02/07/2009	Completed	02/07/2009	REPORTED	COMPLETE	23/07/2009	<input type="checkbox"/>
Hospitals Contribution Fur000066	1	95	07/05/2009	Completed	07/05/2009	REPORTED	COMPLETE	23/07/2009	<input type="checkbox"/>

6. To view the ERA reports, select the ERA Enquiry tab.

The screenshot shows the 'ERA Enquiry' tab selected. Search filters include Payer and Payment Run Date. Below the filters is a table with columns: Debtor Name, Payment Run Date, Remittance Advice ID, Payment Reference, Amount, and Part.


Debtor Name	Payment Run Date	Remittance Advice ID	Payment Reference	Amount	Part
Hoca, Mary	03/03/2009	WSS_ERA_TEST_30	00001	\$150.00	1/1
HaFord, Heather	04/03/2009	GLH_ERA_TEST_1	00001	\$50.00	1/1
Stack, Judith	13/03/2009	GLH_ERA_TEST_2	00001	\$100.00	1/1

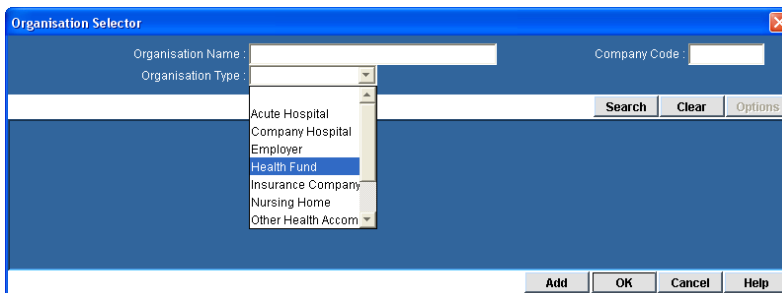
## Activity 6-3: Processing the ECLIPSE Remittance Advices

For any claims that have been processed and paid there will be a listing under the ERA Enquiry tab. When processing the ECLIPSE Remittance Advice report, we recommend that you reconcile the amounts listed on the report with those itemised on the original invoices. If the amounts reconcile; process the ERA which automatically receipts and allocates the amounts listed on the Hospital invoices.

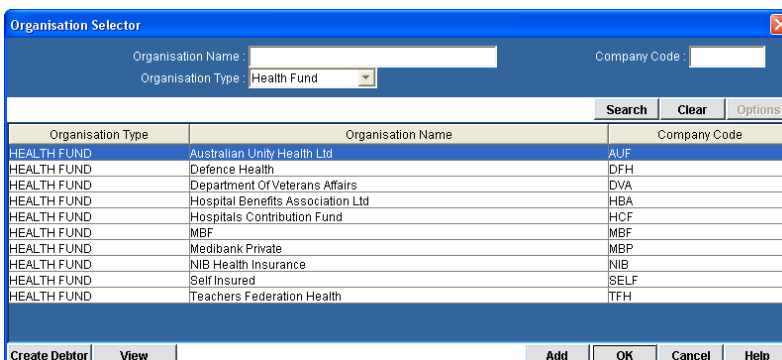
Complete Task...	To...
1	Search for and view the ERA
2	Reconcile the ECLIPSE Remittance Advice
3	Process the ERA
4	View and verify the payments

Task 1 - To view the ERA:

1. From the Patient Accounts menu, select ECLIPSE Claims.
2. Select the ERA Enquiry tab.
3. In the Payer field click  to search for the Health Fund.



4. From the Organisation Type list, select Health Fund and click **Search**.



Organisation Type	Organisation Name	Company Code
HEALTH FUND	Australian Unity Health Ltd	AUF
HEALTH FUND	Defence Health	DFH
HEALTH FUND	Department Of Veterans Affairs	DVA
HEALTH FUND	Hospital Benefits Association Ltd	HBA
HEALTH FUND	Hospitals Contribution Fund	HCF
HEALTH FUND	MBF	MBF
HEALTH FUND	Medibank Private	MBP
HEALTH FUND	NIB Health Insurance	NIB
HEALTH FUND	Self Insured	SELF
HEALTH FUND	Teachers Federation Health	TFH

5. Select Hospitals Contribution Fund (HCF) from the list and click **OK**.

Debtor Name	Payment Run Date	Remittance Advice ID	Payment Reference	Amount	Part
Hospital Contributions Fund	03/07/2009	889	889	\$172.50	1/1
Hospital Contributions Fund	06/07/2009	STT00000ABC12345-123	1234H1	\$1526.36	2/2
Hospital Contributions Fund	09/07/2009	20090709QN01	104000104638	\$150.00	1/1
Hospital Contributions Fund	21/07/2009	GLH_ERA_TEST_21	12345	\$3424.00	1/1

6. Select the last item listed and click **Remittance Advice Detail**.

**ECLIPSE Remittance Advice**

**ERA Details**

Transaction ID : ECL020090709085052362783  
 Debtor Name : **Hospital Contributions Fund**  
 Remittance Advice ID : **20090709QN01**  
 Part : **1 / 1**  
 Payment Run Date : **09/07/2009**  
 Deposit Amount :  
 Payment Reference : **104000104638**  
 Account Name : **Global Health Hospital**  
 BSB : **063449**  
 Account Number : \*\*\*\***9144**

**Process** **View ERA Report** **Copy to Clipboard** **Cancel**

7. Click **View ERA Report**.

ECLIPSE Remittance Advice Report

Payer Details		Payee Details	
Payer Name: Hospital Contributors Fund	Remittance Advice ID: GLH_ERA_TEST_21	Payee Location ID: GLH00000	Bank Account Number: 100010012
Payment Run Date: 21/07/2009	Part Number: 1	BSB Code: 063449	Deposit Amount: \$3424.00
Payment Reference: 12345	Part Total: 1	Bank Account Name: Global Health	


  

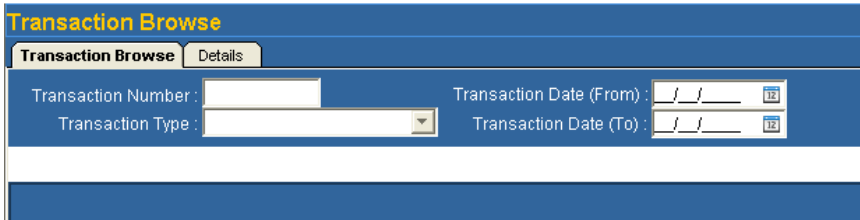
Claim ID	Claim Channel Code	Date of Lodgement	Transaction ID	Account Reference ID	Benefit Amount	Previous Account Reference ID	Previous Transaction ID
11112	SB4	20/05/2009	GLH00000a21f4a13ad540d00	000064x142	\$1573.00		
11112	SB4	20/05/2009	GLH00000a21f4a13ad507800	000065x141	\$379.00		
11112	SB4	20/05/2009	GLH00000a21f4a13ad3e3000	000066x140	\$1472.00		

8. Note down the Account Reference IDs and corresponding Benefit Amounts. The Account Reference ID is the patient’s MRN number and invoice number separated by the letter x.

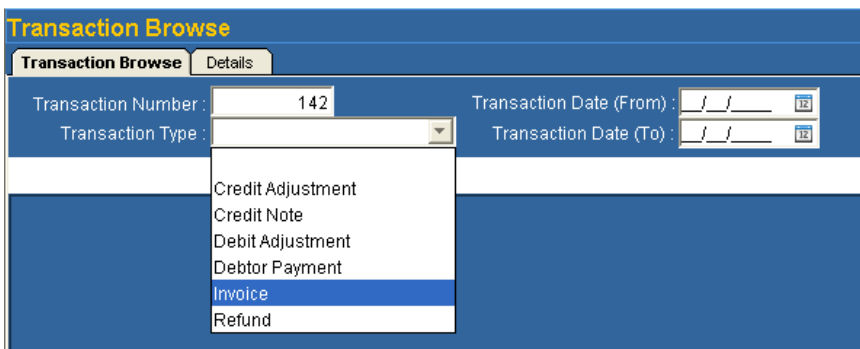
◆ Activity 6-3: Processing the ECLIPSE Remittance Advices

Task 2 - To reconcile the ECLIPSE Remittance Advice:

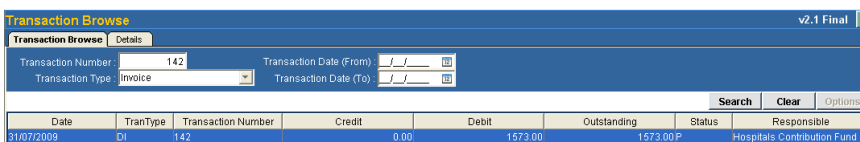
1. Click **Cancel** and select Account Enquiry from the Patient Accounts menu.
2. Click .



3. Enter the first invoice number and select Invoice from the Transaction Type list.



4. Click **Search**.

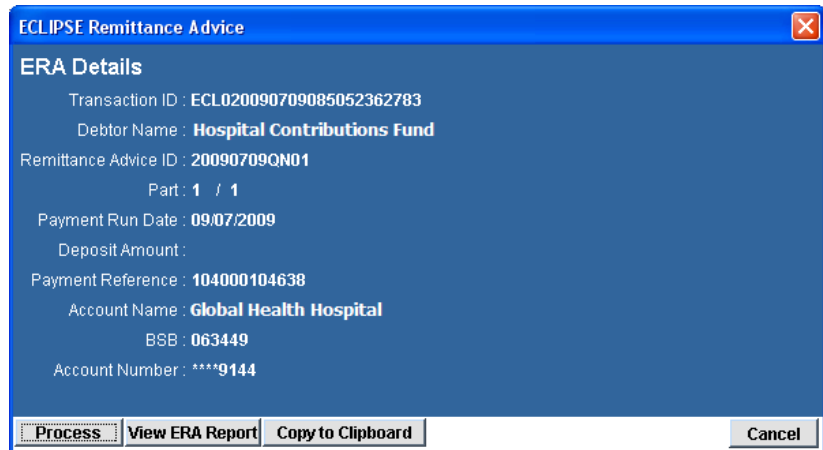


Date	TranType	Transaction Number	Credit	Debit	Outstanding	Status	Responsible
31/07/2009	DI	142	0.00	1573.00	1573.00P		Hospitals Contribution Fund

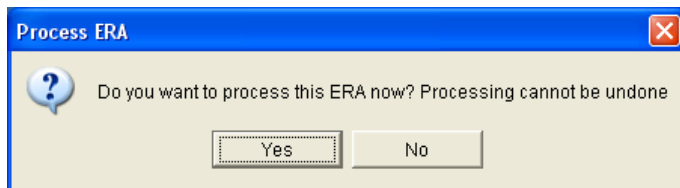
5. Verify that the transaction is a DI (invoice) and the Outstanding amount matches that shown on the ERA report.
6. Repeat steps 3 to 5 for invoice numbers *141* and *140*.

Task 3 - To process the ERA:

1. From the Patient Accounts menu select ECLIPSE Claims.
2. Search for and display the Remittance Advice Detail by repeating steps 2 to 6 of the first part of this activity.



3. Click **Process**.



4. Click **Yes** to confirm. The payment is automatically allocated across all the invoices and the ERA removed from the ERA Enquiry list.

**ECLIPSE Claims** v2.1 Final

Payer:

Payment Run Date:  to:

Debtor Name	Payment Run Date	BSB	Remittance Advice ID	Payment Reference	Amount	Part
Hospital Contributions Fund	09/07/2009	888			\$172.50	1/1
Hospital Contributions Fund	09/07/2009	ST100000ABC12345-123		1234H1	\$1526.36	2/2
Hospital Contributions Fund	09/07/2009	20090709QN01		104000104638	\$150.00	1/1

◆ Activity 6-3: Processing the ECLIPSE Remittance Advices

Task 4 - To view and verify the payments:

1. From the Patient Accounts menu, select Receiving.

Receipt No	Payment Date	Mrn	Payer Name	Amount	Sts	Alloc
101	22072009		HCF	3424.00P	Yes	
100	22072009		Joe Blaw	60.00P	No	
99	16072009		Medibank Private	2000.00P	Yes	
98	16072009	000094	Hoca, Mary	150.00P	Yes	
97	16072009	000092	Chan, Jacky	100.00P	Yes	
96	16072009	000093	Harding, Lauren	50.00P	Yes	
95	16072009	000004	Smith, Anthony	150.00P	Yes	
94	16072009	000033	Yang, Ji	250.00P	Yes	
93	14072009	000090	Yang, Ji	100.00P	Yes	
92	03072009		MPL	989.00P	Yes	
91	03072009		MPL	4984.40P	Yes	
90	03072009	000081	Symons, Ronald	1235.00P	Yes	
89	02072009		Ji Yang	1.00P	Yes	
88	02072009		Sundry debtor	50.00P	Yes	
87	02072009		Hospital Benefits Association Ltd	500.00P	Yes	
86	02072009	000033	Yang, Ji	60.00P	Yes	
85	01072009	000033	Yang, Ji	50.00P	No	
84	30062009	000033	Yang, Ji	5.00P	Yes	
83	30062009	000033	Yang, Ji	50.00P	No	
82	30062009	000033	Yang, Ji	50.00P	No	
81	30062009	000033	Yang, Ji	20.00P	No	
80	30062009	000033	Yang, Ji	30.00P	No	
79	30062009		Hospital Benefits Association Ltd	50.00P	No	
78	30062009	000033	Yang, Ji	30.00P	No	
77	30062009	000092	Chan, Jacky	200.00P	No	
76	30062009	000092	Chan, Jacky	200.00P	No	
75	30062009	000033	Yang, Ji	30.00P	Yes	
74	29062009		Hospital Benefits Association Ltd	5.00P	Yes	
73	29062009		Hospital Benefits Association Ltd	50.00P	Yes	
72	29062009	000033	Yang, Ji	5.00P	No	
71	29062009	000033	Yang, Ji	30.00P	Yes	
70	29062009	000033	Yang, Ji	60.00P	Yes	
69	23062009	000033	Yang, Ji	30.00P	No	
68	23062009	000033	Yang, Ji	30.00P	No	
67	23062009	000033	Yang, Ji	30.00P	No	
66	23062009	000087	Ekstrin, Chretienne	100.00P	Yes	
65	12062009	000033	Yang, Ji	20.00P	No	
64	12062009	000033	Yang, Ji	50.00P	Yes	
63	12062009	000033	Yang, Ji	50.00P	Yes	
62	21052009		MPL	499.00P	Yes	
61	11052009	000033	Yang, Ji	60.00P	No	
60	11052009	000033	Yang, Ji	50.00P	Yes	
59	11052009		Medibank Private	20.00P	No	
58	22042009		Medibank Private	510.00P	Yes	
57	22042009		Medibank Private	510.00P	No	
56	17042009	000033	Yang, Ji	50.00P	Yes	

2. Select the receipt and click **View Receipt**.

Receipt: 101	Date: 22/07/2009	AllocationType	Reference	Allocation
Name: HCF		INVOICE	142	1573.00
Mrn:		INVOICE	141	379.00
Amount: \$3424.00	Allocated: \$3424.00	INVOICE	140	1472.00
Allocation Type: INVOICE				
Reference: 142				
Description:				
Outstanding: \$1573.00				
Allocation: \$1573.00				

Occasionally there may be an overpayment from a Health Fund due to a change in rates and so on. This is displayed as an Allocation Type of PRE PAYMENT:

Receipt: 101	Date: 22/07/2009	AllocationType	Reference	Allocation
Name: HCF		INVOICE	95	474.00
Mrn:		INVOICE	128	1520.00
Amount: 3053.00	Allocated: 3053.00	INVOICE	129	239.00
Allocation Type: PRE-PAYMENT		PRE-PAYMENT	Pre-payment from...	155.00
Reference: Pre-payment from 12482252f		INVOICE	123	665.00
Description:				
Allocation: 155.00				