



NO PAY REPORT

What is captured in this report?

The No Pay Report presents all domestic claims processed over a specified period of time. It includes information by facility department by incurred date. The report is also broken down by member and claim service lines. This report is only available when the rendering provider of service is also a Health Plans client.

Why run this report?

This report is designed to assist the user in identifying the domestic claims that have been adjudicated on behalf of their benefit plan. It also may be used by the client's patient accounts staff to post payments to the client's account receivables system and to balance bill employees for domestic services rendered (if there is a balance due). For some users, this report replaces a provider explanation of benefits.

What are the required data parameters?

Users must enter a span of paid dates to create this report.

What time periods are available?

The data is refreshed nightly and is available as far back as 36 months from the current month. Users typically create this report on a weekly basis and then run a recap at month-end.

Glossary of Terms

For a complete glossary of report terms, please see the Getting Started Guide.