Timely Filing Letter

Last modified on 08/21/2025 9:57 am EDT

For customers utilizing ePS (eProvider Solutions) Clearinghouse, a new Timely Filing Letter with claim-specific information is at your fingertips, should you need to file an appeal for a Timely Filing Denial.

- 1. Navigate to Billing > Live Claims Feed
- 2. Select the patient's appointment using their name, drc claim#, or date of service. Press **the Update Filter** button after entering your parameters.
- 3. The Timely Filing Letter option can be found in the billing log at the bottom of the appointment screen.

Logs									
Datetime	User	Description							
Aug 20, 2025 8:39:24 AM		Claim status changed to Sent to Payer [EPS - EPROVIDER SOLUTIONS]							
Aug 20, 2025 8:39:24 AM		Primary Insurance status changed from "In Process EPS" to "In Process Payer"							
Aug 20, 2025 5:17:16 AM		Electronic Claim Submitted. File name: 837p_	Timely Filing Letter	View 837P					
Aug 20, 2025 5:17:16 AM		Claim status changed to Submitted							
Aug 20, 2025 5:17:15 AM		Primary Insurance status changed from ** to *In Process EPS*							
Aug 20, 2025 5:11:14 AM		Billing status changed from "Ready To Bill" to "Bill Insurance"							
Aug 19, 2025 5:44:17 PM		Billing status changed from "Walting for Dr's signature" to "Ready To Bill"							
Aug 7, 2025 4:27:58 PM		Modified line item:							
Aug 7, 2025 4:27:58 PM		Billing status changed from ** to "Walting for Dr's signature"							
Aug 6, 2025 6:34:20 PM		Added line item with template billing profile switch							
Aug 6, 2025 6:34:03 PM		Added line item with template billing profile switch							
Aug 6, 2025 2:05:19 PM		Added line item with template billing profile switch							
Aug 6, 2025 11:33:11 AM		icd_version changed from ** to *icd10*							
Jul 30, 2025 8:23:46 PM		primary_insurance_id_number changed from ** to secondary_insurance_id_number changed from ** to							

4. Here is a sample of the letter:

TEST				
HARLOTTE, NC 70442123	4			
JNITED HEALTHCARE				
03/07/2025 UNITED HEALTHCARE,				
We would request a review	v of the timely fili	ng for the following claim filed on beh	alf of PATIENT, TEST A, date	e of birth
01/25/1993 and insured u	nder the subscribe	er PATIENT, TEST A with the insured id	l of 999999999. Based on th	ne below
file submission information	n, this claim was s	ubmitted within your timely filing limi	its and should be reconsider	red for
adjudication.				
Below are the claim details	for which we are	e requesting this review.		
Billing Provider		TEST EPS		
Billing NPI Billing Tax Id		1238431138		
Type of Bill/Place of Servic	e	11		
Date of Service		03/08/2017		
Principal Dx Reason for Vi	sit Other DXs			
R87612	R87610			
Date HCPCS/CD	T Modifiers	Description	Units	Amount
	the second se			
ile Transmission Informat	ion:		1	90.00
03/08/2017 88175 File Transmission Informat Attachments:	ion:		1	90.00
C3/08/2017 88175 File Transmission Informat Attachments: Additional comments:	ion:		1	90.00
03/08/2017 88175 File Transmission Informat Attachments: Additional comments:	ion:		1	90.00
03/08/2017 88175 File Transmission Informat Attachments: Additional comments:	ion:		1	90.00
File Transmission Informat Attachments: Additional comments:	ion:		<u>1</u>	90.00
63/08/2017 88175 File Transmission Informat Attachments: Additional comments:	ion: rding this letter, p	please contact our billing office at (605	5)	90.00
16103/08/2017 18175 File Transmission Informat Attachments: Additional comments: If there are questions rega Thank you,	ion: rding this letter, p	please contact our billing office at (605	5)	90.00
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03/08/2017 88175 File Transmission Informat Attachments: Additional comments: If there are questions rega Thank you, Billing Department TEST EPS	ion: rding this letter, p	please contact our billing office at (605	5)	90.00