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About this Document

This document describes the new features, enhancements, UI and database level changes, supported platforms, framework upgrade, supported upgrades, and technology upgrade made in this release. It also highlights the discontinued features, bug fixes, and known issues in this release.

This document does not describe the functionality of Oracle Revenue Management and Billing or technical know-how on how to install or upgrade Oracle Revenue Management and Billing. For more detailed information, you can refer to the following documents:

Document	Description
Oracle Utilities Application Framework Business Process Guide	Explains how to get acquainted with the user interface. It explains the different types of pages or portals that you may come across in the application. It describes how to set the user preferences and how to create, manage, assign, and complete a To Do in the application. It also explains how to submit reports and view historic reports in the application.
Oracle Utilities Application Framework Administrative Guide	Lists and describes various features, options, and tools available in Oracle Utilities Application Framework (OUAF). It also explains how to implement the business requirements using these features, options, and tools in Oracle Revenue Management and Billing.
Oracle Revenue Management and Billing Business Process Guide	Lists and describes various features available in the system which can be used in both the financial services and insurance domains.
Oracle Revenue Management and Billing Administrative Guide	Lists and describes the various feature-specific options that the system administrator or the implementation team has to configure in order to use the system.
Oracle Revenue Management and Billing Banking User Guide	Lists and describes various banking features in Oracle Revenue Management and Billing. It also describes all screens related to these features and explains how to perform various tasks in the application.
Oracle Revenue Management and Billing Insurance User Guide	Lists and describes various insurance features in Oracle Revenue Management and Billing. It also describes all screens related to these features and explains how to perform various tasks in the application.

Document	Description
Oracle Revenue Management and Billing Installation Guide	Lists the application server pre-requisites, supported platforms, and software and hardware requirements for installing the Oracle Revenue Management and Billing application. It explains how to install the Oracle Revenue Management and Billing application.
Oracle Revenue Management and Billing Quick Installation Guide	Provides high-level information on how to install the Oracle Revenue Management and Billing (ORMB) application and selected additional software.
Oracle Revenue Management and Billing Database Administrator's Guide	Provides information about the Oracle Database Server and Client required for installing the Oracle Revenue Management and Billing database. It explains how to install database with and without demo data. It provides database configuration guidelines including recommended settings for the Oracle Exadata Database machine.
Oracle Revenue Management and Billing Server Administration Guide	Explains the Oracle Revenue Management and Billing (ORMB) architecture and technical know-how required for configuring and using the ORMB application. It explains how to configure and deploy web and business application servers. In addition, it explains how to monitor client machines, web and/or business application servers, and database connections.
Oracle Revenue Management and Billing Security Guide	Lists the security features available in the Oracle Revenue Management and Billing application. It explains how to configure security for the Oracle Revenue Management and Billing application using the default security features.
ORMB - Transaction Feed Management - Batch Execution Guide	Describes the sequence in which the batches must be executed while performing various tasks in the Transaction Feed Management module.
Oracle Revenue Management and Billing Batch Guide	Lists and describes various ORMB batches.
Oracle Revenue Management and Billing Upgrade Guide	Explains how to upgrade the Oracle Revenue Management and Billing framework, application, and its database.
Oracle Revenue Management and Billing Upgrade Path Guide	Explains the path and pre-requisites for upgrading Oracle Revenue Management and Billing from one version to another.

Document	Description
Oracle Revenue Management and Billing Pricing Services	Lists and describes the inbound web services related to the Pricing module. It also explains the pre-requisites, input parameters, and output parameters of these inbound web services.

Change Log

Revision	Last Update	Updated Section	Comments
1.1	31-May-2021	Binder Payment Monitoring	Updated Information
		Accrual	Updated Information
		Geographic Rating Area	Updated Information
		Member Relationship Pricing Parameter	Updated Information
		Subscription Tier Pricing Parameter	Updated Information
		Individual Membership	Updated Information
		Individual Membership Termination	Updated Information
		Individual Membership Renewal	Updated Information
		Field Mapping	Updated Information
1.2	01-Jun-2021	Alert Notification for File Upload Interface	Updated Information
		Alert Notification for Transaction Feed Management	Updated Information
		Price Item Selection during Deal Creation	Updated Information
		Seasonal Pricing for Price Items in a Deal	Updated Information
		Contracted Deal	Updated Information
		Relationship Manager Workbench	Updated Information
		Transaction Feed Management	Updated Information
		C1-Deal Feature Configuration	Updated Information
		Accrual	Updated Information
1.3	09-Jun-2021	Contracted Deal	Updated Information
		Supported Platforms	Added Information
		Documentation Updates	Added Section

Revision	Last Update	Updated Section	Comments
1.4	07-Jul-2021	Due Date based on Bill Creation or Completion Date	Updated Information
		C1-ASOBLLNG Feature Configuration	Updated Information
1.5	17-Jan-2022	-	Added Bookmarks in PDF
1.6	21-Mar-2022	Supported Platforms	Updated Information

Contents

Prerequisites

If a customer is already using the Transaction Feed Management feature and wants to upgrade to Oracle Revenue Management and Billing Version 3.0.0.0.0, then the customer needs to ensure the following (before upgrading):

- All bills generated in the system are in the **Complete** status. In other words, there should not be any bills in the **Pending** status. If there are any bills in the **Pending** status or if any billable charge (generated through TFM) is not yet billed, disaggregation and cancellation of transactions which are uploaded using 2.9.0.1.0 will not happen successfully.

- Transactions which are uploaded using 2.9.0.1.0 must not be in the **Initial Product Determined (INPD)** status. They can be in the **Uploaded (UPLD)**, **Invalid (INVL)**, **Error (EROR)**, **Completed (COMP)**, or **Cancelled (CNCL)** status.

- Equal to (=) or tilde (~) symbol is not used in any existing price item parameter code or value. Otherwise, erroneous results might occur.

New Features (Generic)

This section describes the following new features added in this release which can be used in both financial services and health insurance domains:

- [Due Date based on Bill Creation or Completion Date](#)
- [Alert Notification for File Upload Interface](#)
- [Alert Notification for Transaction Feed Management](#)

Due Date based on Bill Creation or Completion Date

Until now, the system considered the bill date while calculating the bill due date. A new algorithm type named **C1DUDTCALC** is introduced in this release. It enables you to calculate the bill due date either using the bill creation date or bill completion date. It contains the following parameters:

- **Days To Add** – Used to specify the characteristic type which indicates the number of days you want to add to the bill creation date or bill completion date in order to derive the bill due date. This type of characteristic is defined for an account.

- **Specific Date** – Used when you want a specific date to be a bill due date. In such case, the month and year for the bill due date are derived from the bill creation date or bill completion date. This parameter is used when the characteristic type specified in the **Days To Add** parameter is not defined for the account. If the derived bill due date is earlier than bill creation date or bill completion date, the system adds one month to the bill due date. Here, the parameter value should be greater than zero and less than or equal to 28.

- **Due Date Rule** – Used to specify the characteristic type which indicates whether the bill due date should be calculated considering the business days (i.e. excluding weekends and holidays) or considering the calendar days (i.e. including weekends and holidays). This type of characteristic is defined for a division. The system derives the characteristic from the division to which the account belongs. Here, you must specify a predefined characteristic type which has the following two characteristic values:

Characteristic Value	Should be…
W	Used when you want to calculate the bill due date considering the business days (i.e. excluding weekends and holidays). The system derives the business days from the work calendar of the division. If the holidays are defined in the work calendar of the division, the system excludes the holidays along with weekends during bill due date calculation.
C	Used when you want to calculate the bill due date considering the calendar days (i.e. including weekends and holidays). The system derives the calendar days from the work calendar of the division.

- **Date To Consider** – Used to indicate whether you want to calculate the bill due date using the bill creation date or bill completion date. The valid values are:
  - **BILL_CRE_DT** – Used when you want to calculate the bill due date using the bill creation date.

o   **BILL_COMP_DT** – Used when you want to calculate the bill due date using the bill completion date.

To derive the bill due date for an account using the bill creation or completion date, you need to attach an algorithm which is created using the **C1DUDTCALC** algorithm type to the **Override Due Date** system event of the respective customer class.

Alert Notification for File Upload Interface

Oracle Revenue Management and Billing enables you to configure alert notification for the **File Upload Interface** utility. At present, the system supports the following two alert notifications:

- To Do Creation
- Email Notification

The objective of these notifications is to create an alert for the records which are in the **Error** status. Once a To Do is created, it indicates the number of records which are in the **Error** status. However, the email notification provides the error summary statistics.

A new batch named **C1-ERRAL** is introduced in this release. While executing the **C1-ERRAL** batch, you need to set the **To Do Created For** parameter to **FRT**. In addition, you need to specify the file request type. The system considers the files which are uploaded using the specified file request type and checks whether there are any records in these files which are currently in the **Error** status. If there are any error records, the system creates a To Do using the To Do type which is specified in the respective file request type. A new To Do type named **C1-FUPTD** is shipped with the product. You need to specify the **C1-FUPTD** To Do type in the **Error To Do Type** field while defining a file request type.

On clicking the To Do notification in the **To Do List** screen, you can view the error records in the **File Upload Dashboard** screen. Note that the system will not create a new To Do when the To Do for the same drill key combination already exists in the **Open** status.

To create an email notification, you need to attach an algorithm which is created using the **C1-FUPERREML** algorithm type to the **To Do Post-Processing** system event of the **C1-FUPTD** To Do type. On creating a To Do, the batch creates an email outbound message which contains the error summary statistics.

Alert Notification for Transaction Feed Management

Oracle Revenue Management and Billing enables you to configure alert notification for the **Transaction Feed Management** feature. At present, the system supports the following two alert notifications:

- To Do Creation
- Email Notification

The objective of these notifications is to create an alert for the records which are in the **Ignored** or **Error** status. Once a To Do is created, it indicates the number of records which are in the **Ignored** or **Error** status. However, the email notification provides the error summary statistics.

A new batch named **C1-ERRAL** is introduced in this release. While executing the **C1-ERRAL** batch, you need to set the **To Do Created For** parameter to **TFM**. In addition, you need to specify the transaction status

(for example, EROR or IGNR) for which you want to create an alert notification. On executing the **C1-ERRAL** batch, the system creates a To Do using the **C1-TXNER** To Do type.

The **C1-ERRAL** batch must be executed only after all the transaction feed management batches are executed successfully. If the **C1-ERRAL** batch is executed for the first time, the system considers all the transactions whose **CURR_SYS_PRS_DT** is earlier than or equal to the batch business date. However, in the subsequent execution, the system considers only those transactions whose **CURR_SYS_PRS_DT** is later than the last To Do generation date and earlier than or equal to the batch business date.

On clicking the To Do notification in the **To Do List** screen, you can view the error records in the **Feed Management Dashboard** screen. Note that the system will not create a new To Do when the To Do for the same drill key combination already exists in the **Open** status.

To create an email notification, you need to attach an algorithm which is created using the **C1-TFMERREML** algorithm type to the **To Do Post-Processing** system event of the **C1-TXNER** To Do type. On creating a To Do, the batch creates an email outbound message which contains the error summary statistics.

New Features (Specific to Financial Services)

This section describes the following new features added in this release which can be used in the financial services domain:

- Price Item Selection during Deal Creation
- Seasonal Pricing for Price Items in a Deal
- Include Customer Hierarchy in a Deal
- Contracted Deal
- Relationship Manager Workbench

Price Item Selection during Deal Creation

Oracle Revenue Management and Billing enables you to select the price items which you want to offer in a deal. If you create a deal for an existing customer, the system, by default, considers the following price items:

- Whose pricing is directly assigned to the customer
- Whose pricing is inherited by the customer

The system does not consider the price items assigned to the customer's accounts and the price items assigned to the child customers and their accounts. However, if you create a deal for an account, the system, by default, considers the following price items:

- Whose pricing is directly assigned to the account
- Whose pricing is inherited by the account

If required, you can deselect a price item by clicking the **Edit** icon in the **Price Item Group Selection** column corresponding to the customer or account in the **Customer Hierarchy** section. Only the selected price items are considered in the deal for simulation.

A new screen named **Select Price Item Group** is introduced in this release. You can access the **Select Price Item Group** screen in either of the following ways:

- By clicking the **Edit** icon in the **Price Item Group Selection** column corresponding to the customer or account in the **Simulation Details** zone of the **Deal Information** screen

- By clicking the **Select Price Item Group** button in the **Pricing and Commitments** screen

- By clicking the **Save and Select Price Item Group** button in the **Price List Assignment** screen

Earlier, on assigning a new price list to an entity in the customer hierarchy, all price assignments from the price list were by default inherited by the entity in the deal. Now, on assigning a price list to an entity in the customer hierarchy, you need to select the price items whose pricing you want to inherit from the price list. Only the selected price items from the price list will be considered in the deal for simulation. If you remove a price list which is newly assigned to an entity in the deal, the price item pricing inherited from the price list is removed from the **Pricing and Commitments** screen.

However, if you override a price list pricing and create a customer or account agreed pricing for the entity, the system does not delete the customer or account agreed pricing when the assigned price list is removed from the deal.

The system enables you to select or deselect all price items within a root level or non-root level hierarchy entity by selecting the check box corresponding to the root level or non-root level hierarchy entity. On clicking the check box corresponding to the root level hierarchy entity, all the subsequent non-root level hierarchy entities and their price items are selected.

Seasonal Pricing for Price Items in a Deal

Oracle Revenue Management and Billing enables the relationship manager to create a seasonal pricing for a price item. This feature enables the relationship manager to offer different rates for a price item for different periods. You can create a seasonal pricing for a price item by overriding the proposed pricing of the price item which is effective from the deal start date. While creating a seasonal pricing, you need to ensure the following:

- Start and end dates are specified in the seasonal pricing
- Start date is later than the deal start date
- End date is not later than the date which is calculated using the start date and number of months specified in the **Validity Period for Deal in Months** option type of the **C1-Deal** feature configuration
- Price assignment type of the seasonal pricing should be same as the proposed pricing which is overridden

If the proposed pricing which you are overriding to create the seasonal pricing is open-ended (i.e. the end date is not specified in the proposed pricing), the system automatically ends the proposed pricing of the price item. The end date of the proposed pricing is set to Seasonal Pricing Start Date - 1.

You can define more than one seasonal pricing for a price item which is effective during a different date range. However, note that you cannot define more than 10 seasonal pricing for a customer or an account. Along with the proposed pricing, the system sends the seasonal pricing of a price item for product, division, and deal level approval. An approver can only approve the seasonal pricing, but cannot recommend a change in the seasonal pricing. An approver can approve the seasonal pricing when the average price falls within the floor and ceil limits of the approver. The relationship manager or approver can send the seasonal pricing of a price item to the price item manager for approval. In such case, the price item manager can view both proposed and seasonal pricing for the price item. But, the price item manager can only approve the seasonal pricing of the price item.

You cannot specify the commitments for the seasonal pricing in the deal. By default, the system considers the commitments of the proposed pricing while calculating the revenue from the seasonal pricing. Also, the system does not consider the seasonal pricing of a price item while calculating the product, division, and deal level financial summary. The system only considers the proposed pricing of a price item while calculating the product, division, and deal level financial summary. You can view the revenue generated for a price item from the seasonal pricing in the **Pricing and Commitments** screen.

If the seasonal pricing is created for a price item with the assignment level other than **Customer Agreed** or **Account Agreed**, the system will automatically consider the proposed pricing of the price item after the seasonal pricing's effective end date. However, if the seasonal pricing is created for a price item with the assignment level as **Customer Agreed** or **Account Agreed**, the relationship manager will have to create a new seasonal pricing for the price item for the remaining deal period. Let us understand this with the help of the following scenarios:

Scenario	Assignment Level	Proposed Pricing		Seasonal Pricing	
		Start Date	**End Date**	**Start Date**	**End Date**
Scenario 1	Customer Price List or Account Price List	01-01-2021	31-12-2021	01-03-2021	30-06-2021
Scenario 2	Customer Agreed or Account Agreed	01-01-2021	31-12-2021	01-02-2021	31-05-2021

In scenario 1, the system considers the proposed pricing of the price item after the seasonal pricing of the price item is expired. However, in scenario 2, the relationship manager will have to create a new seasonal pricing for the price item which is effective from 01-06-2021 to 31-12-2021.

Include Customer Hierarchy in a Deal

Earlier, while creating a deal for an existing customer, the system, by default, considered all child and grandchild persons and their accounts in the customer hierarchy. Now, the system facilitates you to indicate whether you want to consider all child and grandchild persons and their accounts in the customer hierarchy while creating a deal.

A new option named **Include Hierarchy** is introduced in this release. It appears when the entity type is set to **Customer** and simulation type is set to **Customer** while creating a deal. If you select the **Include Hierarchy** option while creating a deal, the system considers all child and grandchild persons and their accounts in the customer hierarchy. Note that if you select a reference customer while creating a deal for an existing customer, the system considers all child and grandchild persons and their accounts in the referenced customer's hierarchy irrespective of whether the **Include Hierarchy** option is selected or not.

Contracted Deal

At present, the relationship manager of a deal can offer a customer or account agreed pricing for a price item or can inherit the pricing for a price item from a price list. If you inherit the pricing for a price item from a price list in a deal and if you change the price item pricing in the price list after orchestrating the deal, the price list is updated in the system. As a result, the pricing offered for a price item to an entity in the deal is overridden. Oracle Revenue Management and Billing enables you to handle this issue by creating a contracted deal.

A new option named **Contracted Deal** is introduced in this release. If you select the **Contracted Deal** option while creating a deal for an existing customer, account, or prospect, any change in the price item pricing of the price list (after orchestration) will not affect the price item pricing offered in the deal.

The **Contracted Deal** option works in conjunction with a new option named **Variable Price** which is available while defining a price item. If the **Variable Price** option is selected for a price item, the system will inherit the pricing for the price item from the price list. In such case, the pricing offered for a price item to an entity in the deal is overridden when the price list pricing is changed after orchestrating the deal in the system.

However, if the **Variable Price** option is not selected for a price item, the system will create a customer or account agreed pricing for the price item, whose pricing is inherited from the price list, whenever the relationship manager orchestrates the deal. In such case, the pricing offered for a price item to an entity in the deal is not overridden when the price list pricing is changed in the system. This enables the relationship manager to create deals for an existing customers, accounts, and prospects where the pricing of the price items are fixed for a particular timeframe. Note that the system creates a customer or account agreed pricing for the price item whose pricing is inherited from the price list only when the commitments are specified for the price item in the deal. If the commitments are not specified for the price item in the deal, the system does not create customer or account agreed pricing for the price item, whose pricing is inherited from the price list. In such case, the system ignores the price items without commitments. It neither creates an error message nor creates a To Do to indicate the error that occurred while creating the price assignments during orchestration.

While accepting a contracted deal, you need to specify the customer acceptance end date. The system then uses the customer acceptance end date as the effective end date while creating the customer or account agreed price assignments during orchestration.

> **Note:** You cannot define seasonal pricing for a price item in a contracted deal.

Relationship Manager Workbench

A new screen named **Relationship Manager Workbench** is introduced in this release. It is designed for a relationship manager wherein the relationship manager can obtain a holistic view of all its customers. It is designed to provide the following statistics to a relationship manager:

- Revenue Metrics
- Customer Metrics
- Customer Hierarchy
- Deal Metrics
- Top 10 Customers by Revenue
- Top 10 Products by Revenue
- Top 10 Price Items by Revenue
- Top 10 Customers by Revenue Variations

In addition, a relationship manager can also view all the assigned To Dos from the **Relationship Manager Workbench** screen.

New Features (Specific to Insurance)

This section describes the following new features added in this release which can be used in the insurance domain:

- Individual Health Insurance Management
- Individual Health Insurance Pricing
- Individual Health Insurance Billing
- Business Rules
- Membership Identifiers
- Individual Membership
- Individual Membership Termination
- Individual Membership Renewal
- Automatic Contract Creation for Individual Membership
- Binder Payment for Individual Membership
- Binder Payment Creation
- Binder Payment Monitoring

Individual Health Insurance Management

Individual health insurance is a coverage that an individual purchase on its own, on an individual or family basis, as opposed to obtaining through an employer. An individual can buy a generic, Medicare, Medicaid, or CHIP health insurance plan from a health insurance payer or from an insurance exchange.

A health insurance payer and insurance exchange sells different plans from the health products to an individual. A health product is a discrete package of health insurance coverage benefits that are offered using a particular product network type (such as health maintenance organization, preferred provider organization, exclusive provider organization, point of service, or indemnity) within a service area.

A health product can include multiple health benefit plans which may cover medical expenses, hospitalization, doctor and hospital visits, prescription drugs, wellness care, etc. A health benefit plan can be a primary or add-on plan. A primary health benefit plan is a standalone plan, which is sold directly. For example, Medical Insurance is a primary health insurance plan.

An add-on plan is also known as supplemental plan. An add-on plan can be an ancillary or rider plan. An add-on plan is not a standalone plan and hence it is not sold directly. For example, the Dental, Vision, Accidental Death, Disability, Critical Illness, Long-Term Care, and Life Insurance plans can be sold as add-on health insurance plans.

Oracle Revenue Management and Billing enables you to create and edit the following entities for a fully-insured individual business:

- Health Products
- Health Plans

- Individual Memberships
- Member Persons
- Medicare or Other Benefits
- Accounts
- Contracts
- Price Items (offered as services)
- Pricing Rule Types
- Pricing Rules
- Price Assignments
- Billable Charges

Two new business objects named **C1-HealthcareProduct** and **C1-HealthPlan** are introduced in this release. The **C1-HealthcareProduct** business object enables you to create a health product. You can define and edit a health product through a health product and plan inbound message. While defining a health product, you need to specify the following details – product type, product sub type, product category, product LOB, product LOB category, start date, end date, status, etc. A health product can be a bundled or non-bundled product. A bundled product means it includes one or more health products. You can define characteristics for a health product. A health product should be associated with a division (i.e. service area). You can associate a health product to one or more divisions and one division can have one or more health products.

The **C1-HealthPlan** business object enables you to create a health plan for a health product. You can define and edit a health plan through a health product and plan inbound message. While defining a health plan, you need to specify the following details – health product, start date, end date, status, etc. In addition, you need to indicate whether the health plan is a charitable plan, standard plan, grandfather plan, qualified from exchange, ancillary plan, rider plan, add-on plan, etc. You can define characteristics for a health plan.

A health product can have one or more health plans. On inactivating a health product, the system will not automatically inactivate the respective health plans. An individual can subscribe for one or more health plans. The system creates an individual membership for each subscribed health plan. An individual membership can have one or more member persons. One member person in an individual membership must be the main subscriber. You can add one or more dependent persons in the individual membership. One member person in an individual membership should be financially responsible for the individual membership. For more information, see the [Individual Memberships](#) section.

If an individual subscribe for an add-on health plan along with a primary health plan, the system enables you to indirectly link a primary health plan with an add-on health plan by associating the primary individual membership with the add-on individual membership. At present, you can associate only one add-on individual membership with the primary individual membership. The system creates the billable charges for both primary and add-on individual memberships independently.

On terminating the primary individual membership, the system provides a facility to automatically terminate the individual membership on the add-on health plan. For more information, see the Individual Membership Termination section. However, on canceling, reinstating, or renewing a primary individual membership, the system does not automatically cancel, reinstate, or renew the individual membership on the add-on health plan. To cancel, reinstate, or renew an individual membership on the add-on health plan, the system must receive the required information for the individual membership from the enrollment system.

Individual Health Insurance Pricing

Oracle Revenue Management and Billing enables you to define pricing for different services offered in a health plan. Each service offered in a health plan should be defined as a price item in the system. For example, services may include medical insurance, home care, hospital visits, etc.

You can define the age based, tier based, or additional charge pricing for a price item using the respective pricing rule. You can create an age based, tier based, and additional charge pricing rule using the respective pricing rule type. The following pricing rule type and pricing rule business objects are enhanced to support the fully-insured individual business:

- C1-PrcRuleTypeAgeBased
- C1-PricingRuleAgeBased
- C1-PrcRuleTypeTierBased
- C1-PricingRuleTierBased
- C1-PrcRuleTypeCapitationFee
- C1-PricingRuleCapitationFee
- C1-PrcRuleTypeBenefit

You can create a pricing rule for a health plan using a pricing rule type only when the pricing rule type is associated with the health plan. The system enables you to define pricing rules for various services offered in the health plan. You must add the required price items in a pricing rule type. The system then enables you to create a pricing rule for a price item using the respective pricing rule type. While defining an age based pricing rule for a price item, you can offer different rates to different member persons based on the age, member relationship, geographic rating area, member person attributes, etc. You can also charge additional fee or given discount to a member person based on modifier attributes. For example, you may charge more premium to an alcoholic person compared to a non-alcoholic person for the same service (i.e. price item). While defining a tier based pricing rule for a price item, you can offer different rates to different memberships based on the subscription tier, geographic rating area, member person attributes, etc.

You can associate one or more pricing rule types with a health plan through a health product and plan inbound message. You can define one or more pricing rules for a health plan through a health product and plan inbound message. The system creates the pricing rule for a price item using the business object which is specified in the pricing rule type. While creating a pricing rule for a health plan, you can define pricing eligibility rules for a pricing rule. The system considers the pricing rule for an individual membership when the pricing eligibility rule (i.e. eligibility criteria) is satisfied.

The system enables you to define a pricing rule for a price item without the pricing rule eligibility. Such pricing rule is considered as a default pricing rule for the price item. If an individual membership is not eligible for any pricing rule, the system uses the default pricing rule of the price item for the individual membership.

> **Note:** On inactivating a health plan, the system will not automatically inactivate the pricing rules defined for the health plan.

Individual Health Insurance Billing

While calculating the premium for an individual membership using an age based pricing rule, the system derives the rate for each eligible member person. The system identifies members which are eligible for premium calculation using the fully-insured pricing and new born business rules.

On creating or editing an individual membership through a health care inbound message or membership repricing inbound web service, the system determines the fully-insured pricing and new born business rules which are applicable for the individual membership. The system enables you to define business rules of the following categories:

- Fully-Insured Pricing
- New Born

While determining the business rules which are applicable for an individual membership, the system executes the business rules of each category which are effective on the inbound processing date based on the priority of the business rule. If an individual membership meets the criteria of the business rule, the system stamps the respective business rule corresponding to the individual membership. In this way, the system derives two business rules – one fully-insured pricing business rule and another new born business rule.

While calculating the premium for an individual membership using a tier based pricing rule, the system derives the subscription tier using the fully-insured pricing and new born business rules.

Once the premium is calculated for an individual membership, the system creates a billable charge for the premium. If the account is defined for the individual membership using the characteristic types specified in the **Account Identifier Type Char Type** and **Account Identifier Value Char Type** option types of the **C1-ASOBLLNG** feature configuration, the system uses the account to bill the charge for the premium. However, if these characteristics are not defined for the individual membership, the system considers the account of the financially responsible member person to the charge for the premium.

Business Rules

Oracle Revenue Management and Billing facilitates you to calculate the premium for each individual membership differently based on various health product, health plan, membership, or member person attributes. You can define different set of business rules for the following categories:

- **Fully-Insured Pricing** – If an individual membership meets the criteria of a fully-insured pricing business rule, the system derives the following information from the business rule:

- o   Maximum Age Limit of Dependents
- o   Dependent Order Priority
- o   Age Calculation Date
- o   Age Recalculation Date
- o   Young Adult Applicability
- o   Young Adult Max Age Limit
- o   Member Relationship Derivation Date
- **New Born** - If an individual membership meets the criteria of a new born business rule, the system derives the following information from the business rule:
  - o   Gift Days Applicability
  - o   New Born Gift Days

A business rule contains a criteria. If the criteria of the business rule is met, the information is derived from the business rule. This information is used while deriving the member relationship for a member person, subscription tier for an individual membership, and while deriving eligible member persons for premium calculation.

You can define criteria for a business rule using a set of parameters which are associated with a business rule type. The system enables you to associate only those parameters in a business rule type where the parameter usage is set to **Business Rule Eligibility Criteria**.

To implement the business rule feature, the following new screens are introduced in this release:

- **Business Rule Type** – Used to specify a list of parameters where the parameter usage is set to **Business Rule Eligibility Criteria**. You can then use the parameter while defining a criteria in the business rule.
- **Business Rule** – Used to search business rules of a particular category (i.e. Fully-Insured Pricing or New Born).

At present, there is no user interface or inbound web service available from where you can define and edit the business rules for each category. You will have to design and develop a custom user interface to create and edit the business rules.

Membership Identifiers

Oracle Revenue Management and Billing enables you to define an identifier for a membership using a membership identifier type. A new screen named **Membership Identifier Type** is introduced in this release. It allows you to create, edit, delete, and copy a membership identifier type.

When you create or edit an individual membership through a health care inbound message or membership repricing inbound web service, you can define various identifiers (for example, beneficiary ID, exchange subscriber ID, and so on) associated with the membership using the membership identifier type. At present, the membership identifiers are only supported for the individual memberships and not for the group memberships.

Individual Membership

Oracle Revenue Management and Billing enables you to create and edit individual memberships from the user interface and through a health care inbound message or membership repricing inbound web service. Note that the user interface for adding and editing individual memberships is not yet well-designed and should only be used by the presales and sales teams for learning and demo purposes and not by the customers.

A new business object for individual membership named **C1-IndMembership** is introduced in this release. While creating an individual membership through a health care inbound message, you need to specify the following details:

- **Health Plan** – Used to indicate the health plan for which the main subscriber has enrolled.
- **Member Person Status** – Used to indicate the main subscriber or dependent person's status.
- **Status Reason** – Used to indicate the reason why you want to change the status of the main subscriber or dependent person.
- **Auto Renew** – Used to indicate whether the individual membership should be automatically renewed.
- **Contract Period** – Used to indicate the period (in months) for which the individual membership should be automatically renewed.
- **Membership Renewal Date** – Used to indicate the date when the individual membership should be renewed. It is required for manual renewal of the individual membership. In case of automatic renewal, the membership renewal date is calculated by the system.
- **Associated Membership Details** –.Used to associate the individual membership with another individual membership which is created for the add-on health insurance plan.
- **Member Identifiers** – Used to specify one or more identifiers for the individual membership.
- **Exchange Details** – Used to indicate whether the individual membership is purchased from the exchange. If the individual membership is purchased from the exchange, you need to specify the exchange ID.
- **Binder Payment Details** – Used to indicate whether the binder payment is required for the individual membership. If so, you need to specify the following details:
  - Grace Days
  - Binder Liability Amount (if required)
  - Threshold Percentage (if required)
  - Hold Billing

  For more information about the binder payments, see the [Binder Payment for Individual Membership](#) section.

Note: On creating an individual membership for a health plan, the membership category is set to **INDV**. However, on creating a group membership for a policy plan, the membership category is set to **GRUP**.

The following table lists the statuses introduced in the lifecycle of the **C1-IndMembership** business object:

Individual Membership Status	Description
Draft	An individual membership is created in the **Draft** status and then transitioned to either the **Pending Effectuation** or **Active** status as mentioned in the health care inbound message or membership repricing incoming message.
Pending Effectuation	If the main subscriber status is set to **Pending Effectuation**, the system sets the status of the individual membership to **Pending Effectuation**. The system determines the individual membership status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration. The system monitors whether the binder payments (if required) are received for the individual membership in the **Pending Effectuation** status. If the binder payments are received, the status of the individual membership is not automatically transitioned to **Active**. The status of the individual membership is changed from **Pending Effectuation** to **Active** only when the main subscriber status update information is received through a health care inbound message or membership repricing inbound web service.
Active	If the main subscriber status is set to **Active**, the system sets the status of the individual membership to **Active**. The system determines the individual membership status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration. If the binder payments are not required for the individual membership, you can directly set the status of main subscriber to **Active**. In addition, if you want to reinstate the individual membership, you must set the status of main subscriber to **Active**. The system will then change the status of the individual membership from **Terminated** to **Active**. In case of reinstatement of the individual membership, the status of the dependent persons is not changed automatically from **Inactive** to **Active** unless the dependent person status update information is received through a health care inbound message or membership repricing inbound web service.
Terminated	If the main subscriber status is set to **Inactive**, the system sets the status of the individual membership to **Terminated**. The system determines the individual membership status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration. Once the status of the individual membership is set to **Terminated**, the system automatically changes the status of the dependent persons to **Inactive**. Note that while inactivating the dependent persons, the system only considers the dependent persons who are in the **Active** status. The system determines the dependent person status reason using the membership status reason preference. The system also updates the end date of the individual membership, main subscriber, and dependent persons. For more information, see the [Individual Membership Termination](#) section.

Individual Membership Status	Description
Canceled	If the main subscriber status is set to **Canceled**, the system sets the status of the individual membership to **Canceled**. The system determines the individual membership status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration.

Once the status of the individual membership is set to **Canceled**, the system automatically changes the status of the dependent persons to **Canceled**. The system determines the dependent person status reason using the membership status reason preference.

The system will also cancel the billable charges and bill segment (if any) created for the individual membership or financially responsible member person account. |

The system also enables you to change the status of a dependent person in the individual membership through a health care inbound message or membership repricing inbound web service. On changing the status of a member person to **Pending Effectuated** or **Active**, the system considers the member person during premium calculation.

On changing the status of the individual membership and member person, the system creates an audit event to trigger the repricing feature. The **C1-IndMembership** business object is configured for the entity audit framework. However, the repricing is triggered only when an active audit event type for the **C1-IndMembership** business object is created in the system.

The system creates appropriate log entries during the individual membership and member person status transition. You can view the status transition logs of individual membership in the **Log** tab of the **Membership (Used for Viewing)** screen. A new zone named **Member Person Log** is introduced in the **Main** tab of the **Membership (Used for Viewing)** screen. It enables you to view the log entries generated on the member person status transition.

You can define individual membership status reasons through the **Status Reason** screen. A new lookup field named **MEMB_PERS_STAT_RSN_FLG** is introduced in this release. Here, you can add the status reasons for the member person.

Individual Membership Termination

To terminate an individual membership, you need to change the status of the main subscriber to **Inactive** through a health care inbound message or membership repricing inbound web service. Along with the main subscriber status, you need to specify the status reason and end date for the main subscriber. If the end date is earlier than or equal to the inbound processing date, the system updates the status, status reason, and end date of the main subscriber and then changes the status of the individual membership to **Terminated**. The system determines the individual membership status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration.

Once the status of the individual membership is set to **Terminated**, the system automatically changes the status of the dependent persons to **Inactive**. Note that while inactivating the dependent persons, the system only considers the dependent persons who are in the **Active** status. The system determines the dependent person status reason using the membership status reason preference.

If the main subscriber end date is later than the inbound processing date, the system creates a record in the **CI_MEMBERSHIP_PROCESS** table with the **Pending** status. The system stores the following information in the record:

- Membership ID
- Member Person ID
- Whether the member person is a main subscriber
- Processing date (it is set to future dated end date of the member person)
- Required action (is set to **Terminate**)

A new batch named **C1-MEPRC** is introduced in this release. On the **C1-MEPRC** batch execution, the system checks whether there are any records in the **CI_MEMBERSHIP_PROCESS** table with the **Pending** status. If so, the system checks whether the processing date of the record is earlier than or equal to the system date. If so, the system determines the required action to be taken for the individual membership from the record. If the **MEMB_PROCESS_FLG** column of the record is set to **Terminate** and the **MAIN_CUST_SW** column is set to **N**, the system changes the status of the dependent person to **Inactive** and updates the end date of the dependent person.

However, if the **MEMB_PROCESS_FLG** column of the record is set to **Terminate** and the **MAIN_CUST_SW** column is set to **Y**, the system updates the status and end date of the main subscriber and then changes the status of the individual membership to **Terminated**. Once the status of the individual membership is set to **Terminated**, the system automatically changes the status of the dependent persons to **Inactive**. The system also updates the end date of the individual membership and dependent persons.

The system enables you to configure whether the individual membership on the add-on health insurance plan should be automatically terminated when the primary individual membership is terminated. If the **Cascade Associate Membership** parameter in the **C1-MEMSTSUP** algorithm is set to **Y**, the system changes the status of the associated individual membership to **Terminated**. Once the status of the associated individual membership is set to **Terminated**, the system automatically changes the status of its main subscriber and dependent persons to **Inactive**. The system also updates the end date of the associated individual membership, its main subscriber and its dependent persons.

Once the required action is completed for the record in the **CI_MEMBERSHIP_PROCESS** table, the system changes the status of the record to **Complete**. However, if the system receives a reinstatement request for an individual membership before processing the termination request, the system changes the status of the record in the **CI_MEMBERSHIP_PROCESS** table to **Canceled**.

Individual Membership Renewal

Oracle Revenue Management and Billing enables you to renew an individual membership in the following two ways:

- Manually
- Automatically

While creating or editing an individual membership through a health care inbound message or membership repricing inbound web service, you must set the **Auto Renew** option for the individual membership to either **Y** or **N**.

If the **Auto Renew** option for an individual membership is set to **N**, you need to specify the following details in a health care inbound message or membership repricing incoming message:

- Membership renewal date
- Status, status reason, and end date of the main subscriber
- Status, status reason, and end date of the dependent person

The enrollment system can send the renewal information either during the enrollment period or after the enrollment period. Irrespective of when the renewal information is received, the membership renewal date must be set to the membership end date + 1. For example, if the enrollment period is from 01-01-2021 to 12-31-2021, then the system must receive the membership renewal date as 01-01-2022. On renewing an individual membership, the dependent person in the individual membership is not automatically activated unless the activation information is received for the dependent person from the enrollment system. The associated membership for an add-on health insurance plan is not automatically renewed unless the renewal information is received for the respective membership from the enrollment system.

If the **Auto Renew** option for an individual membership is set to **Y**, you need to specify the contract period for which the individual membership should be automatically renewed. The system then creates a record in the **CI_MEMBERSHIP_PROCESS** table with the **Pending** status. The system stores the following information in the record:

- Membership ID
- Main Subscriber ID
- Whether the member person is a main subscriber
- Processing date (it is set to the membership end date)
- Required action (is set to **Renew**)

On the **C1-MEPRC** batch execution, the system checks whether there are any records in the **CI_MEMBERSHIP_PROCESS** table with the **Pending** status. If so, the system checks whether the processing date of the record is earlier than or equal to the system date. If so, the system determines the required action to be taken for the individual membership from the record. If the **MEMB_PROCESS_FLG** column of the record is set to **Renew** and the **MAIN_CUST_SW** column is set to **Y**, the system calculates the renewal date and new end date for the individual membership.

The renewal date for the individual membership is set to membership end date + 1. For example, if the enrollment period is from 01-01-2021 to 12-31-2021, the system sets the renewal date to 01-01-2022 (i.e. 12-31-2021 + 1). The new membership end date is calculated using the renewal date and contract period. For example, if the renewal date is 01-01-2022 and contract period is 12 months, the system sets the end date of membership, main subscriber, and dependent persons to 12-31-2022. The associated membership for an add-on health insurance plan is not automatically renewed during the individual membership renewal.

The automatic renewal request for an individual membership must be received during the enrollment period. If the automatic renewal request for an individual membership is received after the enrollment period, the system will not renew the individual membership automatically.

Once the membership end date is changed, the system will trigger the repricing feature and accordingly create or extend the billable charge for the renewed period.

Automatic Contract Creation for Individual Membership

Oracle Revenue Management and Billing automatically creates contracts for each account of the financially responsible member person when:

- Person is added to an individual membership
- Account is added for a financially responsible member person
- Health plan is added or edited in the system

In the former two scenarios, the system derives the individual membership where the person is financially responsible for the membership. Once the individual membership is derived, the system derives the health plan for which the individual membership is enrolled.

Once the health plan is derived, the system checks whether the pricing rule types are associated with the health plan. If a pricing rule type is associated with the health plan and the pricing rule type contains one or more price items, it creates a contract using a distinct contract type which is associated with each price item. Let us assume that PRT1 is associated with the health plan and it contains three price items - PI1, PI2, and PI3. Now, if the PI1 is associated with the CT1 contract type, PI2 is associated with the CT2 contract type, and PI3 is associated with the CT3 contract type, the system will create three contracts - C1 using CT1, C2 using CT2, and C3 using CT3. However, if the PI1 and PI3 are associated with the CT1 contract type and PI2 is associated with the CT2 contract type, the system will create two distinct contracts - C1 using CT1 and C2 using CT2.

If multiple pricing rule types are associated with the health plan and each pricing rule type contains multiple price items, it creates a contract using a distinct contract type which is associated with each price item of each pricing rule type.

The status of each contract is set to **Active**. The contract start date is set to the start date of the respective individual membership. If the same contract type is associated with the same or different price items on the same or different pricing rule types of different health plans, the contract start date is set to the start date of the earliest health plan. The default rate schedule specified on the respective contract type is added to the contract in the rate information and its effective date is set to the contract start date.

> **Note:**
>
> The system creates a contract using a contract type for an account only when the division to which the account and contract type belongs is same.
>
> If a contract of a contract type is already present on the account, the system will not create a new contract. Instead, it will update the start date of the existing contract, if required.

Binder Payment for Individual Membership

On enrolling for an individual health insurance plan, the financial responsible member person needs to pay first month's premium often called as binder payment to complete the enrollment process. The individual membership enrollment is effectuated when the binder payment is received. The binder payment should be received by the billing system and not by the enrollment system. The binder payment is not required during individual membership renewal and reinstatement.

Few health insurance payers send bills to collect the binder payment, whereas few do not send bills to collect the binder payment. In other words, the bill generation process for individual membership is kept on hold by some health insurance payers until the binder payment is received.

Oracle Revenue Management and Billing enables you to create binder payments for an individual membership. For more information on how to create a binder payment, see the [Binder Payment Creation](#) section. While creating an individual membership through a health care inbound message or through a membership repricing inbound web service, you must set the **Binder Payment Applicability** option for the individual membership to either **Y** or **N**. You can set the **Binder Payment Applicability** option to **Y** only when the following conditions are met:

- Individual membership status is set to the value specified in the **Membership Status Code for Pending Effectuation** attribute of the binder payment preference.

- Membership status reason is set to the value specified in the **Membership Status Reason when Awaiting Binder Payment** attribute of the binder payment preference.

The system considers the binder payment preference which is specified in the **Binder Payment Field Mapping** option type of the **C1-ASOBLLNG** feature configuration.

If the **Binder Payment Applicability** option is set to **Y** for an individual membership, it means that the system should monitor whether the binder payment is received before activating the individual membership. On receiving the binder payment for the individual membership, the system only changes the membership and its member persons' status reason and not the membership and its member person' status. The membership and its member persons' status is changed only when the system receives the main subscriber's status update information from the enrollment system through a health care inbound message. However, if the **Binder Payment Applicability** option is set to **N** for an individual membership, it means that binder payment is not required for activating the individual membership. For more information about the binder payment monitor process, see the [Binder Payment Monitoring](#) section.

If the **Binder Payment Applicability** option is set to **Y** for an individual membership, you need to specify the following binder payment details through a health care inbound message:

- **Grace Days** – Used to calculate the grace date for the individual membership.
- **Binder Liability Amount** – Used to specify the binder liability amount. This data is required when the **Consider Binder Liability Amount** attribute is set to **Y** in the binder payment preference.
- **Threshold Percentage** – Used to specify the threshold percentage using which the threshold amount should be calculated.
- **Hold Billing** – Used to indicate whether you want to hold the bill generation process for the individual membership until the binder payment is received.

The system facilitates you to validate binder payment against the threshold amount. If the **Consider Binder Liability Amount** attribute is set to **Y** in the binder payment preference, the system calculates the threshold amount for the binder payment using the binder liability amount and threshold percentage. For example, if the binder liability amount is set to 50 and threshold percentage is set to 20, the system sets the threshold amount to 10 (i.e. (50*20)/100). The system can receive one or more binder payments for an individual membership. If the **Consider Binder Liability Amount** attribute is set to **Y**, the system must receive the binder payments whose sum is equal to or greater than the threshold amount. However, if the **Consider Binder Liability Amount** attribute is set to **N**, the system does not calculate the threshold amount for the binder payment. In such case, the system must receive a binder payment with the amount greater than zero.

On editing the binder liability amount and threshold percentage for an individual membership, the system recalculates the threshold amount for the binder payment. On creating a billable charge for an individual membership where the **Hold Billing** option is set to **Y**, the system will set the bill after date in the billable charge to a far future date (i.e. 12-31-2099).

Binder Payment Creation

Oracle Revenue Management and Billing considers a payment as a binder payment when a characteristic is defined for the payment using the characteristic type specified in the **Binder Payment Identification Characteristics Type** attribute of the binder payment preference. The system considers the binder payment preference which is specified in the **Binder Payment Field Mapping** option type of the **C1-ASOBLLNG** feature configuration. This type of characteristic must be defined when the binder payment is created. It stores the membership identifier to indicate the individual membership for which the binder payment is received.

You can create a binder payment through the following features or interfaces:

- Payment Web Service
- Payment Upload
- Payment Upload Staging
- Payment Request
- Payment Event
- EDI 820 File Upload

While creating a payment through any of the above mechanism except the latter one, you need to ensure that the binder payment identification characteristic is defined for the payment. However, in case of EDI 820 File Upload, the system will extract the data stored in the NM1 tag and store it in the payment characteristics staging table. This is done when the **C1-PUPSG** batch is executed.

You can view the binder payments received for the membership or financial responsible member person's account through the **Payment Event Summary** and **Customer 360° Information** screens.

Binder Payment Monitoring

A new batch named **C1-BPMNT** is introduced to monitor the binder payments for the individual memberships. It checks whether there are any individual memberships where:

- Individual membership status is set to the value specified in the **Membership Status Code for Pending Effectuation** attribute of the binder payment preference.
- Membership status reason is set to the value specified in the **Membership Status Reason when Awaiting Binder Payment** attribute of the binder payment preference.

Note: The batch considers the binder payment preference which is specified in the **Binder Payment Field Mapping** option type of the **C1-ASOBLLNG** feature configuration.

If so, the batch checks whether the **Binder Payment Applicability** option is set to **Y** for the individual membership. If so, the system calculates grace date using the membership start date and grace days. If the grace date is equal to or earlier than system date, the batch derives the account for the individual membership. While deriving the account for the individual membership, the system checks whether the characteristic types specified in the **Account Identifier Type Char Type** and **Account Identifier Value Char Type** option types of the **C1-ASOBLLNG** feature configuration are defined for the individual membership. If so, the system derives the account using these characteristics defined for the individual membership. If these characteristics are not defined for the individual membership, the system derives the account of financially responsible member person. The system checks whether a payment with the binder payment identification characteristic exists against any contract of the account. If so, the system derives the value from the **Binder Payment Identification ID Type** attribute of the binder payment preference. The system then checks whether the binder payments are received for the individual membership using the values from the following:

- Binder Payment Identification Characteristic
- Binder Payment Identification ID Type attribute of the binder payment preference

If the binder payments are received for the individual membership, the system does the following:

If the Consider Binder Lability Amount set to…	Then…
Y	The system validates whether the sum of binder payments is equal to or greater than the threshold amount. If so, the system does the following:

If the Consider Binder Lability Amount set to…	Then…
	• Creates a To Do using the To Do type which is specified in the **To Do Type for Binder Payment Received** attribute of the binder payment preference. • Updates the membership status reason to the value specified in the **Membership Status Reason when Binder Payment Received** attribute of the binder payment preference. • Updates the member person status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration. • Changes the bill after date of the billable charges when the **Hold Billing** option for the individual membership is set to **Y**.
N	The system does not validate the binder payment against the threshold amount. If the binder payment amount is greater than zero, the system does the following: • Creates a To Do using the To Do type which is specified in the **To Do Type for Binder Payment Received** attribute of the binder payment preference. • Updates the membership status reason to the value specified in the **Membership Status Reason when Binder Payment Received** attribute of the binder payment preference. • Updates the member person status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration. **Note:** In this case, the system does not update the bill after date of the billable charges when the **Hold Billing** option for the individual membership is set to **Y**. The system updates the bill after date of the billable charges when the status of the individual membership is changed to **Active** through a health care inbound message.

If the grace date is later than the system date, the batch does the following irrespective of whether the **Consider Binder Lability Amount** attribute is set to **Y** or **N**:

- Creates a To Do using the To Do type which is specified in the **To Do Type for Binder Payment Not Received** attribute of the binder payment preference.
- Updates the membership status reason to the value specified in the **Membership Status Reason when Binder Payment Not Received** attribute of the binder payment preference.
- Updates the member person status reason using the membership status reason preference which is specified in the **Status Reason Mapping** option type of the **C1-ASOBLLNG** feature configuration.

Enhancements (Generic)

This section lists the enhancements made to the following features which can be used in both financial services and insurance domains:

- [Menu Restructuring](#)
- [Refund Request](#)
- [Effective Pricing](#)
- [Parameter](#)
- [Transaction Feed Management](#)

Menu Restructuring

The **Main Menu** structure is redesigned in Oracle Revenue Management and Billing Version 3.0.0.0.0. This is done with the objective to consolidate all sub-menus (of screens) related to a particular key business function under a logically designed business menu. This will help the business users to easily navigate to different screens in order to complete a business process.

The following table lists the menu options of the new Main menu and indicates whether the default user groups have access to the respective menu option:

Menu Option	C1_BSERVICES	HCADMIN	ALL_SERVICES
Customer Management	Yes	Yes	Yes
Deal Management	Yes	No	Yes
Pricing Management	Yes	Yes	Yes
Rates	Yes	Yes	Yes
Transaction and Audit Event Management	Yes	Yes	Yes
Billing Management	Yes	Yes	Yes
Payments	Yes	Yes	Yes
Accounting and Receivables	Yes	Yes	Yes
Delinquency Management	Yes	Yes	Yes
Report and Inquiry	Yes	Yes	Yes
Approval Workflow	Yes	Yes	Yes
Broker Management	No	No	Yes
Sales and Marketing	Yes	No	Yes
Insurance Control Central	No	No	Yes
My Preferences	Yes	Yes	Yes
Market Transaction Management	No	No	Yes
To Do	Yes	Yes	Yes

Menu Option	C1_BSERVICES	HCADMIN	ALL_SERVICES
Tools	Yes	Yes	Yes
Integration	Yes	Yes	Yes
Batch Scheduler	Yes	Yes	Yes
Relationship Manager Workbench	Yes	No	Yes

Refund Request

The following changes are made to the Refund Request feature:

- Now, the system maintain a log when you edit the person name or address in a refund request. On editing the person name in a refund request, a log is created in the following format:

  Person Name is changed; Old Value: <OLD NAME>; New Value: <NEW NAME>

- On editing the address in a refund request, a log is created in the following format:

  Address is changed; Old Value: <OLD ADDRESS>; New Value: <NEW ADDRESS>

Effective Pricing

Oracle Revenue Management and Billing enables you to extract the price assignments of a person or account in the Excel and PDF formats. A new button named **Extract** is added in the upper right corner of the **Effective Price Assignments for Person** and **Effective Price Assignments for Account** zones in the **Pricing (Person)** and **Pricing (Account)** screens, respectively.

On clicking the **Extract** button, the system enables you to extract the price assignments of the person or account in the Excel or PDF format. You can extract the price assignments in the Excel or PDF format only when the **Effective Pricing Excel Report Code** and **Effective Pricing PDF Report Code** option types of the **C1-PRICING** feature configuration are set to **EFPR_EXT_EXL** and **EFPR_EXT_PDF**, respectively.

Note: The **EFPR_EXT_EXL** and **EFPR_EXT_PDF** FOP based reports are shipped with the product. If required, you can also create a custom FOP based report for extraction.

Parameter

The following changes are made to the Parameter feature:

- Two new options named **Health Product** and **Health Plan** are added to the **Source Entity** list. It enables you to create parameters whose value is derived from a health product or health plan, respectively.

- A new parameter usage named **Business Rule Eligibility Criteria** is added in the **Parameter** screen. If you want to add a parameter in a business rule type, you must set the parameter usage of the parameter to **Business Rule Eligibility Criteria**. Note that the **Business Rule Eligibility Criteria** parameter usage appears when the source entity is set to **Health Product**, **Health Plan**, **Membership**, or **Membership Person**.

- While defining the eligibility criteria for a pricing rule, you can only use a parameter where the parameter usage is set to **Pricing Rule Eligibility Criteria**.

Transaction Feed Management

The following changes are made to the Transaction Feed Management feature:

- The **Search** zone in the **Feed Management Dashboard** screen is redesigned. Now, it enables you to search transactions using the feed level and transaction level details.

- The **Division Level Information** zone is removed from this screen.

- On clicking the To Do which is created using the **C1-TXNER** To Do type, you can view the transactions which are in the **Error** status in the **Feed Management Dashboard** screen. The transactions are grouped based on message category and message number and the count of error records is shown for each such group. A hyperlink appears on the error record count. On clicking the hyperlink, you can view the transactions in the **Feed Management Dashboard** screen.

Enhancements (Specific to Financial Services)

This section lists the enhancements made to the following features which can be used in the financial services domain:

- Menu Restructuring
- Deal Modelling and Simulation
- Accrual
- C1-Deal Feature Configuration
- C1-PRICING Feature Configuration

Menu Restructuring

The **Main Menu** structure is redesigned in Oracle Revenue Management and Billing Version 3.0.0.0.0. This is done with the objective to consolidate all sub-menus (of screens) related to a particular key business function under a logically designed business menu. This will help the business users to easily navigate to different screens in order to complete a business process.

The following table indicates the old and new menu options of the sub-menu options which are accessible from the **Main** menu:

Sub-Menu Option	Old Menu Option	New Menu Option
Write Off	Credit & Collection	Accounting and Receivable
Deferred Revenue Recognition	Deferred Revenue Recognition	Accounting and Receivable
Account Receivable Central, Accrual, Dispute Request, Financial Transaction Distribution, Financial Transaction, Hold Request, Multi-Cancel/Rebill, Offset Request, Refund/Write Off Request, Request	Financial	Accounting and Receivable
Approve Price Assignment, Modify Price Assignment, Resolve Price Assignment, Approval Transaction	Approval Workflow Management	Approval Workflow
DBMS Import/Export, Scheduler Chain, Scheduler Job, Scheduler Job Monitor, Scheduler Job Monitor Dashboard, Scheduler Program, Scheduler Schedule	Batch Scheduler	Batch Scheduler
Adjustment, Adjustment Upload Request, Bill, Bill Drill Down Details, Bill Segment, Bill Segment Summary, Billable Charge, Invoice Request, On Demand Billing, Statement, Trial Bill, Usage Data Processing	Financial	Billing Management

Sub-Menu Option	Old Menu Option	New Menu Option
Billing and Settlement Hierarchy, Construct	Invoice and Settlement Management	Billing Management
Statement Construct	Person Information	Billing Management
Customer 360	Customer 360	Customer Management
Account, Address, Contract, Customer Contact, Customer Registration, Earning Credit Rate Eligibility, Person	Person Information	Customer Management
Deal Approver Dashboard, Deal Dashboard, Mapping Terms and Conditions, Prospect	Deal Management	Deal Management
Delinquency Central, Overdue Process	Credit & Collection	Delinquency Management
Diagnostic Central	-	Diagnostic Central
Error Summary Portal	-	Error Summary Portal
Business Flag, Inbound Message, JMS Message Browser, Mobile Remote Message, Outbound Message, XAI Download Staging, XAI Dynamic Upload, XAI Staging Control, XAI Upload Staging	Integration	Integration
Data Extract Request Dashboard, File Upload Dashboard, Job Stream Details, Job Stream Summary	Tools	Integration
My Preference	My Preferences	My Preference
Deposit Control, Match Event, Payment, Payment Event, Payment Event Quick Add, Payment Event Summary, Payment Event Upload Staging, Payment Quick Add, Payment Request, Payment Upload, Payment Upload Staging, Tender Control	Financial	Payments
Payment Tender Search	Financial Query	Payments
Eligible Price List, Entity Hierarchy Relationship, Exchange Rate, Mass Pricing Update Request, Price Item, Pricing Simulation, Price List, Price List Simulation, Product, Product Enrollment, Product Services, Tiering Criteria	Pricing Management	Pricing Management
Rate Definition	Pricing Management	Rates

Sub-Menu Option	Old Menu Option	New Menu Option
BF Interval Values, BF Interval Values Query, BF Variance Parameter Values, Bill Factor, Bill Factor Value, Rate Check, Rate Component, Rate Schedule, Rate Schedule Merge, Rate Version, Rate Version Merge	Rates	Rates
Rate Schedule Summary	-	Rates
Relationship Manager Workbench	-	Relationship Manager Workbench
Account Bill/Payment History, Account Collection Summary, Account Financial History, Account Payment History, Financial Transaction On Payment, Financial Transaction On Bill, Payment History, Payment Tender History, Remittance Summary	Financial Query	Report and Inquiry
Campaign, Order	Sales & Marketing	Sales and Marketing
Supervisor To Do Assignment, Supervisor To Do Summary, Supervisor User Summary, To Do Entry, To Do List, To Do Management, To Do Search, To Do Summary	To Do	To Do
ILM Archival	ILM Archival	Tools
Batch Job Submission, Batch Run Tree, Health Check, Process Flow Query, Request, Report History, Report Submission, Sample and Submit Request, Upload Request	Tools	Tools
Audit Event	Financial	Transaction and Audit Event Management
Disaggregation Request, Feed Management Dashboard, Transaction Details	Transaction Feed Management	Transaction and Audit Event Management

Deal Modelling and Simulation

The following changes are made to the Deal Modelling and Simulation feature:

- Now, an **asterisk** (*****) sign appears corresponding to the mandatory fields while defining a deal. This helps you to quickly create a deal.

- A new section named **Product** is available while creating a deal. It enables you to manually recommend products for the deal. Here, you can only recommend those products which are associated with the deal's division. You can then enroll an account or customer in the deal for the manually recommended product, if required. The system also automatically derives recommended products for the deal when the questionnaire contains questions where the question applicability is set to **Package and Product Reference**. The system derives the recommended products from the reference deals. It only considers automatically recommended products of the reference deals and not manually recommended products of the reference deals. You can then enroll an account or customer in the deal for the automatically recommended product, if required.

- The **Delete** icon appears corresponding to a price list in the **Proposed Price Lists** section of the **Price List Assignment** screen. Note that the **Delete** icon appears corresponding to only those price lists which are newly assigned to the customer or account in the deal. You cannot delete the proposed price list assignments which are created using the original price list assignments. If you delete a proposed price list, the price item pricing inherited from the price list is also deleted from the **Pricing and Commitments** screen. But, if you have created the customer or account agreed pricing using the price list pricing, then such customer or account agreed pricing is not deleted from the **Pricing and Commitments** screen.

- Earlier, on assigning a new price list to a customer or account in a deal, all price assignments from the price list were by default inherited by the customer or account. Now, on assigning a price list to a customer or account in a deal, you need to select the price items whose pricing you want to inherit from the price list. Only price list pricing of the selected price items is listed in the **Pricing and Commitments** screen.

- Now, you can delete the proposed, seasonal, and recommended pricing of a price item. The **Delete** icon appears corresponding to the proposed pricing only when its price assignment level is different from the price assignment level of the original pricing. Otherwise, you cannot delete a proposed pricing. A recommended pricing of a price item can only be deleted by the approver who has recommended the new price for the price item.

- Now, if the price assignment has only one price component and the **Negotiability** flag of the price item is set to **Y**, you can edit the pricing of the price item directly from the **Pricing and Commitments** screen. You don't need to click the **Edit** icon in the **Pricing Information** column and then edit the rate of the price component in the **Pricing** section of the **Pricing and Commitments** screen.

- Now, if there is only one SQI in the commitment, you can edit the commitment directly from the **Pricing and Commitments** screen. You don't need to click the **Edit** icon in the **Volume** column and then edit the commitment of the SQI in the **Commitments** section of the **Pricing and Commitments** screen.

- Earlier, you were not able to delete the proposed products from the **Product Enrollment** screen. Now, you can delete the proposed products from the accounts in the customer hierarchy. The **Delete** icon appears corresponding to a proposed product in the **Proposed Products** section of the **Product Enrollment** screen.

- Earlier, while creating a deal, the system derived a list of deal types which can be used for an entity (i.e. customer, account, or prospect) using the OraSearch functionality. You were then able to select the required deal type from the list. It derived the deal types using either of the following approach:

    o **Exact Match** – The system considered those deal types which contain the deal approval profile for the entity's division, customer segment, and customer tier.

    o **Best Fit Match** - The system considered those deal types which contain the deal approval profile for either of the following:

        ▪ Entity's division and customer segment

        ▪ Entity's division and customer tier

        ▪ Entity's division

    While deriving the deal type, the system first considered the exact match and then the best fit match. Now, while defining a deal type, a new column named **Customer Characteristics** appears in the **Deal Approval Profiles** section. On clicking the **Add** icon in the **Customer Characteristics** column, you can define one or more characteristic criteria (which contains characteristic type and characteristic value) for a deal approval profile. Now, while deriving the deal types using the exact or best fit match, the system also checks whether the entity meets the characteristic criteria of the deal approval profile.

- Earlier, you were able to view different set of columns for the original, proposed, and recommended pricing in the **Pricing and Commitments** screen. Now, you can view the details of the original, proposed, recommended, and seasonal pricing in different rows in the **Pricing and Commitments** screen. By default, the system displays the rows for the proposed and recommended pricing of each price item. You can view the row for original pricing of a price item by clicking the **Expand/Collapse** icon corresponding to the **Pricing Information** column. The system enables you to view or hide the rows for original pricing of all price items at once by clicking the **Original Data** toggle button. You can view the row for seasonal pricing of a price item by clicking the **Expand/Collapse** icon corresponding to the **Start Date** column.

Accrual

The following changes are made to the Accrual feature:

- Earlier, you were able to define an effective dated accrual type for a division. As a result, all accounts belonging to the division referred the accrual type which is effective on the accrual date from the division during the accrual calculation. Now, in addition, you can define an accrual type which can be associated directly with one or more accounts. A new option named **Applicable for Account** is available while defining an accrual type. If you select the **Applicable for Account** option, it means you want to create an account level accrual type. You can associate an account level accrual type with any account of a division which is associated with the account level accrual type.

The system enables you to associate multiple account level accrual types with a division on the same effective date.

A new field named **Accrual Type** is available while creating or editing an account through the **Account** or **Customer Registration** screen. Here, you can specify the accrual type which you want to use for the account during accrual calculation. Note that you can only specify an account level accrual type which is associated with the division to which the account belongs.

If you do not select the **Applicable for Account** option, it means you want to create a division level accrual type. It is the traditional way in which you want to define an effective dated accrual type for a division. You cannot associate a division level accrual type with an account.

- Earlier, the system was able to prorate the accrual amount when the accrual criteria was set to **Actual** and accrual source was set to **Trial Bill** in the accrual type. Now, in addition, the system can prorate the accrual amount when the accrual criteria is set to **Historical** and posting method is set to **Bill Distribution Code Level**, **Bill Level**, **Price Item Distribution Code Level**, or **Price Item Level**. If the **Proration Required** option is selected, the system will prorate the accrual amount based on the accrual date.

- Now, while calculating the accrual for an account, the system will check whether an account level accrual type is specified for the account. If so, the system will calculate the accrual using the account level accrual type. However, if an account level accrual type is not specified for the account, the system will derive the accrual type which is effective for the division on the accrual date.

- Earlier, while creating a manual accrual for an account, the system derived the accrual cycle from the account. The system did not allow to create the manual accrual when the accrual creation date was not defined as the accrual date in the accrual cycle. To handle this issue, we have removed the coupling with accrual cycle during manual accrual creation. Now, you can create a manual accrual for an account on any date. However, while creating a manual accrual for an account, you need to specify the reversal start and end dates so that the reversal batch can derive the reversal dates while reversing the accrual of the account.

C1-Deal Feature Configuration

The following option types are added to the **C1-Deal** feature configuration:

- **Character to indicate T&C in Deal Extract** – Used to indicate the special character that you want to use for identifying the price item level terms and conditions in the deal extract report.
- **Deal Extract Logo File Name** – Used to indicate the logo which you want to use in the deal extract report.

C1-PRICING Feature Configuration

The following option types are added to the **C1-PRICING** feature configuration:

- **Effective Pricing Excel Report Code** – Used to indicate the FOP based report using which you want to extract the price assignments of a person or account in the Excel format.
- **Effective Pricing PDF Report Code** – Used to indicate the FOP based report using which you want to extract the price assignments of a person or account in the PDF format.

Enhancements (Specific to Insurance)

This section lists the enhancements made to the following features which can be used in the insurance domain:

- [Menu Restructuring](#)
- [C1-PUPSG Batch](#)
- [C1-ASOBLLNG Feature Configuration](#)
- [Field Mapping](#)
- [Inbound Message](#)
- [Membership Repricing Inbound Web Service](#)
- [Benefits](#)
- [Membership](#)
- [Repricing](#)
- [Geographic Rating Area](#)
- [Medicare Part D LIS and LEP Pricing](#)
- [Member Relationship Pricing Parameter](#)
- [Subscription Tier Pricing Parameter](#)

Menu Restructuring

The **Main Menu** structure is redesigned in Oracle Revenue Management and Billing Version 3.0.0.0.0. This is done with the objective to consolidate all sub-menus (of screens) related to a particular key business function under a logically designed business menu. This will help the business users to easily navigate to different screens in order to complete a business process.

The following table indicates the old and new menu options of the sub-menu options which are accessible from the **Main** menu:

Sub-Menu Option	Old Menu Option	New Menu Option
Write Off, Write Off Process	Credit & Collection	Accounting and Receivable
Deferred Revenue Recognition	Deferred Revenue Recognition	Accounting and Receivable
Account Receivable Central, Accrual, Discrepancy Report, Financial Transaction, Hold Request, Multi-Cancel/Rebill, Offset Request, Reconciliation, Refund/Write Off Request, Request	Financial	Accounting and Receivable
Approve Price Assignment, Modify Price Assignment, Resolve Price Assignment, Approval Transaction	Approval Workflow Management	Approval Workflow

Sub-Menu Option	Old Menu Option	New Menu Option
DBMS Import/Export, Scheduler Chain, Scheduler Job, Scheduler Job Monitor, Scheduler Job Monitor Dashboard, Scheduler Program, Scheduler Schedule	Batch Scheduler	Batch Scheduler
Job Stream Details, Job Stream Summary	Tools	Batch Scheduler
Adjustment, Adjustment Upload Request, Bill, Bill Drill Down Details, Bill Segment, Bill Segment Summary, Billable Charge, Invoice Request, Statement, Trial Bill	Financial	Billing Management
Statement Construct	Person Information	Billing Management
Customer 360	Customer 360	Customer Management
Account, Address, Auto Pay Instructions, Benefit, Contract, Customer Contact, Customer Registration, Membership, Person, Policy	Person Information	Customer Management
Delinquency Central, Overdue Process, Payment Arrangement, Payment Agreement Request, Promise To Pay	Credit & Collection	Delinquency Management
Business Flag, Inbound Message, JMS Message Browser, Mobile Remote Message, Outbound Message, XAI Download Staging, XAI Dynamic Upload, XAI Staging Control, XAI Upload Staging	Integration	Integration
Data Extract Request Dashboard, File Upload Dashboard	Tools	Integration
My Preference	My Preferences	My Preference
Deposit Control, Deposit Control Staging, Match Event, Payment, Payment Event, Payment Event Quick Add, Payment Event Summary, Payment Event Upload Staging, Payment Quick Add, Payment Request, Payment Upload, Payment Upload Staging, Tender Control, Auto Payment and Refund Clearing Staging	Financial	Payments

Sub-Menu Option	Old Menu Option	New Menu Option
Payment Tender Search	Financial Query	Payments
Eligible Price List, Entity Hierarchy Relationship, Exchange Rate, Mass Pricing Update Request, Price Item, Pricing Simulation, Price List, Repricing Request, Tiering Criteria	Pricing Management	Pricing Management
Rate Definition	Pricing Management	Rates
BF Interval Values, BF Interval Values Query, BF Variance Parameter Values, Bill Factor, Bill Factor Value, Rate Check, Rate Component, Rate Schedule, Rate Schedule Merge, Rate Version, Rate Version Merge	Rates	Rates
Rate Schedule Summary	-	Rates
Account Bill/Payment History, Account Collection Summary, Account Financial History, Account Payment History, Financial Transaction On Payment, Financial Transaction On Bill, Payment History, Payment Tender History, Remittance Summary	Financial Query	Report and Inquiry
Supervisor To Do Assignment, Supervisor To Do Summary, Supervisor User Summary, To Do Entry, To Do List, To Do Management, To Do Search, To Do Summary	To Do	To Do
ILM Archival	ILM Archival	Tools
Batch Job Submission, Batch Run Tree, Health Check, Process Flow Query, Request, Report History, Report Submission, Sample and Submit Request, Upload Request	Tools	Tools
Audit Event, Off-Process Request	Financial	Transaction and Audit Event Management
Accumulation Data	Financial Query	Transaction and Audit Event Management
Disaggregation Request, Feed Management Dashboard, Transaction Details	Transaction Feed Management	Transaction and Audit Event Management

C1-PUPSG Batch

The **C1-PUPSG** batch is enhanced to support the binder payment creation. This batch identifies the individual membership for which the binder payment is received using the values from the following:

- NM1 tag in the EDI 820 file
- Binder Payment Identification ID Type attribute of the binder payment preference

Once the individual membership is identified for which the binder payment is received, the system derives the account for the individual membership. While deriving the account for the individual membership, the system checks whether the characteristic types specified in the **Account Identifier Type Char Type** and **Account Identifier Value Char Type** option types of the **C1-ASOBLLNG** feature configuration are defined for the individual membership. If so, the system derives the account using these characteristics defined for the individual membership. If these characteristics are not defined for the individual membership, the system derives the account of financially responsible member person. Once the account is derived, the system derives the contract of a contract type which is specified in the **Binder Contract Type** attribute of the binder payment preference. If the contract of the specified contract type is not available for the account, the system creates a new contract of a contract type which is specified in the **Binder Contract Type** attribute. Once the binder contract is derived or created for the account, the system creates the binder payment staging record using the binder payment match type and binder payment contract. While creating the binder payment staging record, it extracts the data stored in the **NM1** tag and stores it as a payment staging characteristic in the **CI_PAY_ST_CHAR** table. While creating the payment staging characteristic, it considers the characteristic type which is specified in the **Binder Payment Identification Characteristics Type** attribute of the binder payment preference.

> **Note:** The system considers the binder payment preference which is specified in the **Binder Payment Field Mapping** option type of the **C1-ASOBLLNG** feature configuration.

If the bill ID is available in the EDI 820 file, the payment is made against the bill and not against the binder contract. However, while creating the binder payment staging record, it extracts the data stored in the **NM1** tag and stores it as a payment staging characteristic in the **CI_PAY_ST_CHAR** table.

C1-ASOBLLNG Feature Configuration

The following changes are made to the **C1-ASOBLLNG** feature configuration:

- The **Geographic Rating Area Field Mapping** option type is renamed to **Rating Area Field Mapping for Group**.
- The following new option types are added to the **C1-ASOBLLNG** feature configuration:
  - **Binder Payment Field Mapping** - Used to specify a binder payment preference. The system considers the various attributes of the binder payment preference while creating and monitoring binder payments for an individual membership.
  - **Sponsored Switch Characteristic for Billable Charge** – Used to specify the characteristic type which indicates whether the billable charge is a reverse charge for a benefit.

This characteristic type is defined while creating the reverse charge for a benefit. Here, you must specify a characteristic type where the characteristic entity is set to **Billable Charge**.

- o **Rating Area Field Mapping for Individual** - Used to specify a geographic rating area preference. The system considers the various attributes of the geographic rating area preference while deriving the geographic rating area for an individual membership.

- o **Medicare** - Used to specify a Medicare preference. The system considers the various attributes of the Medicare preference while creating charges for Medicare Part D Low Income Subsidy (LIS) and Late Enrollment Penalty (LEP).

- o **Membership Cancel Status** - Used to specify the status to which an individual membership should be transitioned when the status of its main subscriber is set to **Canceled**.

- o **Membership Person Cancel Status** - Used to specify the status to which the member persons must be transitioned when the membership is canceled.

- o **Status Reason Mapping** - Used to specify a membership status reason preference. The system considers the various attributes of the membership status reason preference while deriving the individual membership or member person status reason.

Field Mapping

Now, you can also create preferences of the following categories through the **Field Mapping** screen:

- **Binder Payment** – Enables you to set the attributes which are used during binder payment creation and monitoring.
- **Medicare** – Enables you to set the attributes which are used while creating charges for Medicare Part D Low Income Subsidy (LIS) and Late Enrollment Penalty (LEP).
- **Membership Status Reason** – Enables you to map a member person status and status reason with an individual membership status reason. This mapping is used during:
  - o Membership Status Transition (when the member person status and status reason are received through a health care inbound message or membership repricing inbound web service)
  - o Member Person Status Transition (when the binder payment is monitored for the individual membership)

In addition, one attribute named **Use Health Plan Details** is added to the **Geographic Rating Area** preference category. You must define separate geographic rating area preference for group and individual memberships. While defining a geographic rating area preference for group membership, you must define all attributes except **Use Health Plan Details**. However, while defining a geographic rating area preference for individual membership, you must define the following attributes – **Default Address Type**, **Default Geographic Rating Area**, **Geographic Rating Area Characteristic Type**, and **Use Health Plan Details**.

Inbound Message

The following changes are made to the Inbound Message feature:

- The **C1-HCInboundMessage** business object is enhanced to support the fully-insured individual customers. Through a health care inbound message, you can now create and edit the following entities for a fully-insured individual customer:

    o Individual Memberships

    o Accounts

    o Contracts

    o Billable Charges

- A new inbound message type business object named **C1-IndHCInboundMsgType** is introduced in this release. You can define an individual membership inbound message type using the **C1-IndHCInboundMsgType** business object through the **Inbound Message Type** screen. It encapsulates the following information:

    o A business object using which you want to create the main subscriber or dependent person when the health care inbound message is processed.

    o A business object using which you want to create the account for the financial responsible member person when the health care inbound message is processed.

    o A business object using which you want to create the individual membership when the health care inbound message is processed.

    o A business object using which you want to create the benefits for the individual membership when the health care inbound message is processed.

    o A business object using which you want to create the address for the main subscriber or dependent person when the health care inbound message is processed.

- On calling the **C1-HCInboundMessage** web service, you can create a health care inbound message using an individual membership inbound message type.

- The following tags are newly introduced in the health care inbound message schema:

Parent Tag	New Tags
<memberData>	<membershipPersonstatusReason></membershipPersonstatusReason> <autoRenew></autoRenew> <associatedMemberIdentifierType></associatedMemberIdentifierType> <associatedMemberIdentifier></associatedMemberIdentifier> <exchangeFlag></exchangeFlag> <exchangeId></exchangeId> <binderLiabilityAmount></binderLiabilityAmount> <binderPayApplicability></binderPayApplicability> <binderPayGraceDays></binderPayGraceDays> <binderPayThreshold></binderPayThreshold>

Parent Tag	New Tags
	\<holdBilling>\</holdBilling>
	\<membershipRenewalDate>\</membershipRenewalDate>
	\<contractPeriod>\</contractPeriod>
	\<membershipIdentifier>
	\<membershipIdentifierType>\</membershipIdentifierType>
	\<membershipIdentifierValue>\</membershipIdentifierValue>
	\</membershipIdentifier>
	\<healthPlanCode>\</healthPlanCode>

- If the system receives a request to inactivate the main subscriber or dependent person of the individual membership on a future date, the system creates a record for the respective person in the **CI_MEMBERSHIP_PROCESS** table while processing the health care inbound message.

- If the **Auto Renew** option for an individual membership is set to **Y**, the system creates a record for the main subscriber in the **CI_MEMBERSHIP_PROCESS** table while processing the health care inbound message.

- A new inbound message type business object named **C1-HCProdHlthPlnInboundTyp** is introduced in this release. You can define a health product and plan inbound message type using the **C1-HCProdHlthPlnInboundTyp** business object through the **Inbound Message Type** screen. It encapsulates the following information:
  - A business object using which you want to create the health product when the health product and plan inbound message is processed.
  - A business object using which you want to create the health plan when the health product and plan inbound message is processed.

- A new business object named **C1-HCProdHlthPlnInbound** is introduced in this release. It enables you to create and edit the following entities for a fully-insured individual customer through an inbound web service:
  - Health Product
  - Health Plan
  - Pricing Rules

- The following two inbound web services are introduced in this release:
  - **C1-HCProdHlthPlnInboundMes** – It is a RESTful service which helps to create and edit a health product, health plan, and pricing rule for a health plan through an inbound message.
  - **C1-HCProdHlthPlnInboundMessage** – It is a SOAP service which helps to create a health product, health plan, and pricing rule for a health plan through an inbound message.

- On calling the **C1-HCProdHlthPlnInboundMes** or **C1-HCProdHlthPlnInboundMessage** web service, you can create a health product and plan inbound message using an health product and plan inbound message type.

- A new batch named **C1-HCPHP** is introduced in this release. It checks whether there are any health product and plan inbound messages in the **Pending** status. If there is a health product and plan inbound message in the **Pending** status, the batch changes the status of the health product and plan inbound message to the default next status (i.e. **Validation**). Then, the algorithm attached to the **Validation** status is triggered. If the validation is successful, the system changes the status of the health product and plan inbound message to **Processing**. Then, the algorithm attached to the **Processing** status is triggered. If the processing is successful, the system creates or updates the entities, such as health product, health plan, pricing rules for the health plan, and then changes the status of the health product and plan inbound message to **Processed**.

  This batch is a multi-threaded batch. The multi-threading is based on inbound message ID and chunks for multi-threading are created based on numerical distribution of inbound message ID. However, we recommend you to execute this batch in the single-threaded mode. Otherwise, erroneous results might occur.

  For more information about the batch and its parameters, see *Oracle Revenue Management and Billing Batch Guide*.

Membership Repricing Inbound Web Service

The following changes are made to the Membership Repricing inbound web service:

- The **C1-MembRepricing** web service is enhanced to support the fully-insured individual business. It allows you to:
  - Create and edit a group or individual membership
  - Add a member person to a group or individual membership
  - Create a person (if it does not exist in ORMB) before adding the person to a group or individual membership
  - Create an account for a member person
  - Create a Medicare or other benefit for a group or individual membership
  - View the details of a group or individual membership along with its billable charges
  - Simulate the billable charge creation process for a group or individual membership
- The following tags are newly introduced in the membership repricing schema:

Parent Tag	New Tags
<personData>	<accountData> <accountType></accountType> <customerClass></customerClass> <billCycle></billCycle> <billLeadDays></billLeadDays> <division></division> <currency></currency> <setUpDate></setUpDate>

Parent Tag	New Tags

	`<acctUsageFlg></acctUsageFlg>`
	`<comments></comments>`
	`<deferAutoPayDt></deferAutoPayDt>`
	`<collectionClass></collectionClass>`
	`<billRouteType></billRouteType>`
	`<billAddressSource></billAddressSource>`
	`<accountIdentifiers>`
	  `<idType></idType>`
	  `<idValue></idValue>`
	  `<isPrimary></isPrimary>`
	`</accountIdentifiers>`
	`<characteristics>`
	  `<characteristicsList>`
	     `<characteristicType></characteristicType>`
	     `<characteristicValue></characteristicValue>`
	     `<effectiveDate></effectiveDate>`
	  `</characteristicsList>`
	`</characteristics>`
	`</accountData>`

`<membership>`	`<autoRenew></autoRenew>`
	`<associatedMemberIdentifierType></associatedMemberIdentifierType>`
	`<associatedMemberIdentifier></associatedMemberIdentifier>`
	`<exchangeFlag></exchangeFlag>`
	`<exchangeId></exchangeId>`
	`<binderLiabilityAmount></binderLiabilityAmount>`
	`<binderPayApplicability></binderPayApplicability>`
	`<binderPayGraceDays></binderPayGraceDays>`
	`<binderPayThreshold></binderPayThreshold>`
	`<holdBilling></holdBilling>`
	`<membershipRenewalDate></membershipRenewalDate>`
	`<contractPeriod></contractPeriod>`
	`<membershipIdentifierList>`
	  `<membershipIdentifier>`
	    `<membershipIdentifierType></membershipIdentifierType>`
	    `<membershipIdentifierValue></membershipIdentifierValue>`
	  `</membershipIdentifier>`
	`</membershipIdentifierList>`

Parent Tag	New Tags
<memberData>	<membershipPersonstatusReason></membershipPersonstatusReason>

Benefits

The following changes are made to the Benefits feature:

- Earlier, you were able to define a benefit for a member person of a membership. Now, you can define a benefit for a membership and not for a member person. This is because the system assumes the following:

  o There will be only one member person in the Medicare membership who will avail the Medicare benefit.

  o The other benefits would be availed by all member persons of an individual membership.

  Therefore, the system enables you define the benefit at the membership level and not at the member person level.

- Earlier, the benefit sub types were defined in the **BENEFIT_SUB_TYPE_FLG** lookup field. Now, a new screen named **Benefit Sub Type** is introduced in this release. It enables you to create, edit, delete, and copy a benefit sub type.

- Earlier, the Benefit feature was designed to create the Medicare benefits. Now, the Benefit feature is enhanced to create other benefits related to the fully-insured individual business. You can create various Medicare and other benefits using a different benefit sub type. While creating a benefit sub type, you need to specify the following details:

  o **Value Type** – Used to indicate whether the benefit amount should be a flat or calculated amount. The valid values are:

    ▪ **Flat** – Used when you want to specify the benefit amount while creating a benefit using the benefit sub type.

    ▪ **Not applicable** – Used when you to want the system to calculate the charges for the availed benefit.

  o **Externally Priced** – Used to indicate whether the benefit amount is calculated in the enrollment system.

  o **Validate External Price** – Used when you want to validate whether the externally calculated benefit amount is within the threshold range.

  o **Charge Negatively** – Used to indicate whether you want to create a negative charge for the benefit amount.

  o **Benefit SQI** – Used to specify the SQI using which you want to create an SQI based billable charge for the benefit.

    If you do not specify the value, the system will derive the SQI from the **Proration SQI** option type of the **C1-ASOBLLNG** feature configuration.

- o **Charge Benefit Sponsor** – Used to indicate whether you want to create a reverse charge for the benefit sponsor. The reverse charge can then be used by the health insurance payer for reconciliation.

- o **Benefit Sponsor Account** – Used to indicate the account of sponsor on which you want to create the reverse charge.

- o **Benefit Sponsor Price Item** - Used to indicate the price item using which you want to create the reverse charge.

- o **Benefit Sponsor SQI** - Used to specify the SQI using which you want to create an SQI based billable charge for the reverse charge. If you do not specify the value, the system will derive the SQI from the **Proration SQI** option type of the **C1-ASOBLLNG** feature configuration.

Membership

The following changes are made to the Membership screen:

- Earlier, you were able to search for a group membership using the membership, policy plan, or person details. Now, in addition, you can search for an individual membership using the membership, health plan, or person details. A new search option named **Health Plan Details** is added to the **Search By** list.

- You can search for an individual membership using the membership identifier type and membership identifier.

- Earlier, you were able to define and edit a group membership from this screen. Now, in addition, you can define and edit an individual membership from this screen. While defining a membership, you need to select the appropriate business object. The fields that appear while defining a membership vary depending on whether you want to create a group or individual membership.

> **Note:** The user interface for adding and editing individual memberships is not yet well-designed and should only be used by the presales and sales teams for learning and demo purposes and not by the customers.

- While defining an individual membership, you can specify the following information:
  - o Health Plan
  - o Renewal details for the individual membership
  - o Binder payment details
  - o Membership details of an add-on health insurance plan
  - o Membership Identifiers

- A new zone named **Member Person Log** is introduced in the **Main** tab of the **Membership (Used for Viewing)** screen. It enables you to view the log of the member person who is added to the group or individual membership.

Repricing

The following changes are made to the Repricing feature:

- The Entity Audit framework is configured for the **C1-IndMembership** business object.
- The **C1-FIAUDEV** algorithm is enhanced to support the fully-insured individual business. Now, it creates an audit event when:
  - A group membership is added to a policy plan
  - An individual membership is added to a health plan
  - A member person is added to a group or individual membership
  - A group or individual membership details are updated in the system
  - The details of the member person in a group or individual membership are updated in the system

However, note that the audit events are created in the update scenario only when the element listed for auditing in the age based or tier based pricing rule types is updated. It creates one or more audit events in the **Pending** status. The entity type and entity ID for which an audit event is created are added corresponding to the audit event in the **C1_AUDIT_EVENT** table. In addition, the effective date is stamped corresponding to the audit event.

> **Note:** The system creates an audit event whenever the group or individual membership start and end dates and member person's start and end dates are changed in the system irrespective of whether these fields are listed for auditing or not in the age based or tier based pricing rule types.

Before creating an audit event, the system checks whether an audit event for the entity ID with the same effective date already exists in the **Pending** or **Error** status for the respective action. If so, the system does not create a new audit event for the entity. Instead, the system adds a new log entry in the existing audit event.

When an audit event is created for a group membership or its member person, the system derives the policy plan for which the group membership is enrolled. However, when an audit event is created for an individual membership or its member person, the system derives the health plan for which the individual membership is enrolled. Once a policy or health plan is derived, the system derives the pricing rule types which are associated with the policy or health plan. The system considers only those pricing rule types whose pricing rules are effective during the respective entity (i.e. membership or member person whichever is updated) date range.

The system then creates a repricing entity detail record for each membership, pricing rule type, and effective date combination in the **CI_REPRC_ENTITY_DTL** table. The status of the repricing entity detail record is set to **Pending**. Once the repricing entity detail records are created successfully, the status of the audit event is changed to **Complete**.

The system also creates the audit event whenever a benefit is added or updated for a group or individual membership. The system derives the policy or health plan of the group or individual membership for which the benefit is created or updated. It then checks whether a benefit pricing rule type is associated with the policy or health plan.

If so, it creates a repricing entity detail record for each membership, pricing rule type, and effective date combination in the **CI_REPRC_ENTITY_DTL** table.

- The **C1-REPC1**, **C1-REPC2**, and **C1-FIBCR** batches are enhanced to support the fully-insured individual business.

- If the reverse charge should be created for a benefit, the system does the following during the respective batch execution:

  - **C1-REPC1** - Creates two repricing requests – one for benefit price item and another for benefit sponsored price item

  - **C1-REPC2 -** Derives the amount for the benefit repricing request and benefit sponsored repricing request from the **C1_BENEFITS** table

  - **C1-FIBCR** - Creates the billable charges for benefit price item as well as benefit sponsored price item

Geographic Rating Area

The following changes are made to the Geographic Rating Area feature:

- This feature is enhanced to support the fully-insured individual business. You can use the geographic rating area as a pricing parameter while defining the age based, tier based, and additional charge pricing rules for a health plan.

- The **Geographic Rating Area Field Mapping** option type of the **C1-ASOBLLNG** feature configuration is renamed to **Rating Area Field Mapping for Group**. You must set the geographic rating area preference for a group membership in the **Rating Area Field Mapping for Group** option type of the **C1-ASOBLLNG** feature configuration.

- A new option type named **Rating Area Field Mapping for Individual** is added to the **C1-ASOBLLNG** feature configuration.

- While maintaining a geographic rating area in the system, you can also list the health plans available in the geographic rating area. You can add the health plan information for a geographic rating area from the user interface or through the **File Upload Interface** utility. But, you cannot edit the health plan information of a geographic rating area through the **File Upload Interface** utility.

- Once you define a geographic rating area, the system can derive the geographic rating area for an individual membership using the address type of the main subscriber which is specified in the **Default Address Type** attribute of a geographic rating area preference. At present, the system supports three address types named **Person Mailing**, **Person Seasonal**, and **Account Override**. The system considers the geographic rating area preference for an individual membership which is specified in the **Rating Area Field Mapping for Individual** option type of the **C1-ASOBLLNG** feature configuration.

  The system then fetches the state and zip code from the address of the main subscriber. Once the state and zip code are fetched from the address, the system checks whether the zip code is a 9-digit code. If not, the system appends zeros to make it a 9-digit zip code. The system then derives the value of the **Use Health Plan Details** attribute from the geographic rating area preference. If the attribute is set to **Yes**, the system derives a geographic rating area for the state, zip code, and health plan combination. However, if the attribute is set to **No**, the system derives a geographic rating area for the state and zip code combination.

If the system could not derive the geographic rating area, the system derives the default geographic rating area from the geographic rating area preference. Once the geographic rating area is derived, the system stores the geographic rating area for the individual membership. The characteristic type specified in the **Geographic Rating Area Characteristic Type** attribute of the geographic rating area preference is used to store geographic rating area for the individual membership. The effective date of the characteristic is set to effective date of the address.

- The geographic rating area of an individual membership must be changed when the address of the main subscriber is updated. Therefore, when an address of the person is change, the system identifies the following:
    - o   Individual memberships where the person is the main subscriber

For each individual membership, the system derives the address of the main subscriber. Once the state and zip code are fetched from the address, the system checks whether the zip code is a 9-digit code. If not, the system appends zeros to make it a 9-digit zip code. The system then derives the value of the **Use Health Plan Details** attribute from the geographic rating area preference. If the attribute is set to **Yes**, the system derives a geographic rating area for the state, zip code, and health plan combination. However, if the attribute is set to **No**, the system derives a geographic rating area for the state and zip code combination. If the system could not derive the geographic rating area, the system derives the default geographic rating area from the geographic rating area preference. Once the geographic rating area is derived, the system stores the geographic rating area for the individual membership. The characteristic type specified in the **Geographic Rating Area Characteristic Type** attribute of the geographic rating area preference is used to store geographic rating area for the individual membership. The effective date of the characteristic is set to effective date of the address.

- To use the geographic rating area as a pricing parameter, you need to define the Geographic Rating Area parameter where:
    - o   **Value Type** is to **Adhoc**
    - o   **Source Entity** is set to **Membership**
    - o   **Source Type** is set to **Characteristic**
    - o   **Source Type Code** is set to a characteristic type which is specified in the **Geographic Rating Area Characteristic Type** attribute of the geographic rating area preference
    - o   **Parameter Usage** is set to **Price Item** and **Pricing Eligibility Criteria**

Once the Geographic Rating Area parameter is defined, you need to associate the parameter with the price items for which you want to define different rates in a pricing rule using the parameter. This helps to offer different base fee for a price item based on geographic rating area of the individual membership.

Medicare Part D LIS and LEP Pricing

The following changes are made to the Medicare Part D LIS and LEP Pricing feature:

- Earlier, the LIS and LEP benefit sub types were added in the **BENEFIT_SUB_TYPE_FLG** lookup field. Now, you need to define a benefit sub type for Low Income Subsidy (LIS) and Late Enrollment Penalty (LEP) using the **Benefit Sub Type** screen.

- If the value type of a benefit sub type is set to **Flat**, the **Benefit Amount** field appears when you define a benefit using the benefit sub type. However, if the value type of a benefit sub type is set to **Not applicable**, the **Medicare Plan Benefit Package** field appears when you define a benefit using the benefit sub type.

- A new preference category named **Medicare** is introduced in the **Field Mapping** screen. To derive Medicare Part D LIS and LEP pricing, you must do the following:

  - Define a Medicare preference through the **Field Mapping** screen. Here, you must set the following attributes in a Medicare preference:

    - **Late Enrollment Penalty** – Used to indicate the benefit sub type for LEP.

    - **Low Income Subsidy** - Used to indicate the benefit sub type for LIS.

    - **Medicare Prescription Drug Coverage** - Used to indicate the benefit sub type for Medicare Part D.

  - Set the Medicare preference in the **Medicare** option type of the **C1-ASOBLLNG** feature configuration.

  This preference is used while creating charges for Medicare Part D LIS and LEP.

Member Relationship Pricing Parameter

The following changes are made to the Member Relationship Pricing Parameter feature:

- This feature is enhanced to support the fully-insured individual business. You can use the member relationship as a pricing parameter while defining the age based, tier based, and additional charge pricing rules for a health plan.

- Except the following two differences, the member relationship derivation process for fully-insured group and fully-insured individual business is identical:

  - You must define a member relationship structure through a characteristic on the health plan. While defining a member relationship structure for a health plan, you must use the characteristic type specified in the **Member Relationship Structure Characteristic Type** attribute of a member relationship and subscription tier preference. The system considers the member relationship and subscription tier preference which is specified in the **Relation Structure Code Field Mapping** option type of the **C1-ASOBLLNG** feature configuration.

  - The system derives the following information from the fully-insured pricing and new born business rules of the individual membership:

    - Maximum Number of Dependents

    - Maximum Age Limit of Dependents

    - Dependent Order Priority

    - Age Calculation Date

    - Age Recalculation Date

    - Young Adult Applicability

    - Young Adult Max Age Limit

- Member Relationship Derivation Date
- Gift Days Applicability
- New Born Gift Days

Subscription Tier Pricing Parameter

The following changes are made to the Subscription Tier Pricing Parameter feature:

- This feature is enhanced to support the fully-insured individual business. You can use the membership subscription tier as a pricing parameter while defining the tier based pricing rules for a health plan.

- Except the following three differences, the subscription tier derivation process for fully-insured group and fully-insured individual business is identical:
  - While deriving the subscription tier of an individual membership for a bill period timeline, the system refers the daily proration rule and accordingly derives the subscription tier for the individual membership.
  - You must define a subscription tier structure through a characteristic on the health plan. While defining a subscription tier structure for a health plan, you must use the characteristic type specified in the **Subscription Tier Structure Characteristic Type** attribute of a member relationship and subscription tier preference. The system considers the member relationship and subscription tier preference which is specified in the **Relation Structure Code Field Mapping** option type of the **C1-ASOBLLNG** feature configuration.
  - The system derives the following information from the fully-insured pricing and new born business rules of the individual membership:
    - Maximum Number of Dependents
    - Maximum Age Limit of Dependents
    - Dependent Order Priority
    - Age Calculation Date
    - Age Recalculation Date
    - Young Adult Applicability
    - Young Adult Max Age Limit
    - Gift Days Applicability
    - New Born Gift Days

User Interface (UI) Level Changes

The following table lists changes made to the existing screens in Oracle Revenue Management and Billing:

Screen Name (in 2.9.0.1.0)	Changes
Benefit (Used for Viewing)	The following change is made to this screen: • The **Member Person Information** field is removed from the **Benefit** zone.
Benefit (Used for Adding)	The following change is made to this screen: • The **Member Person** field is removed from the **Main** section.
Extract Template	The following changes are made to this screen: • The **Do Not Extract** column is added in the **Extract File Format** section. • The **New File**, **New Record**, and **Identifier** columns are added in the **Extract Record List Details** section. • The **Attribute** column is added in the **Field Mapping** section.
Extract Template (Used for Adding)	The following changes are made to this screen: • The **Do Not Extract** column is added in the **Extract File Format** section. • The **New File**, **New Record**, and **Identifier** columns are added in the **Extract Record List Details** section. • The **Attribute** column is added in the **Field Mapping** section.
Membership (Used for Searching)	The following changes are made to this screen: • The **Membership Identifier Type** and **Membership Identifier** fields are added to the **Search Criteria** section when you search for a membership using the membership details. • The **Health Plan Details** option is added to the **Search By** list in the **Search Membership** zone. • The **Health Plan** column is added to the **Search Results** section when you search for a membership using the membership, person, or health plan details.
Membership (Used for Adding)	The following changes are made to this screen: • On defining a membership, the **Select Business Object** screen appears. It enables you to specify the group membership or individual membership business object using which you can to create the respective membership.

Screen Name (in 2.9.0.1.0)	Changes
	• On defining an individual membership, the following new fields appear in the **Main** section - **Health Plan**, **Automatic Renewal**, **Exchange**, **Exchange ID**, **Renewal Date**, and **Renewal Period**. • On defining an individual membership, the following new sections appear in this screen - **Associated Membership**, **Binder Payment Details**, and **Membership Identifiers**.
Membership (Used for Viewing)	The following changes are made to this screen: • The **Health Plan**, **Status Reason**, **Automatic Renewal**, **Exchange**, **Exchange ID**, **Renewal Date**, and **Renewal Period** fields appear in the **Main** section of the **Membership** zone when you are viewing the details of an individual membership. • The **Associated Membership**, **Binder Payment Details**, and **Membership Identifiers** sections appear in the **Main** section of the **Membership** zone when you are viewing the details of an individual membership. • The **Status Reason** column is added to the **Member Persons** zone in the **Main** tab. • A new zone named **Member Person Log** is added in the **Main** tab.
Deal Information	The following changes are made to this screen: • The **Asterisk** (*****) sign is added corresponding to the mandatory fields in the **Main** section of the **Deal** zone. • The **Contracted Deal** and **Include Hierarchy** options are added in the **Main** section of the **Deal** zone. • The **Product** section is added to the **Deal** zone. • The **Price Item Group Selection** column is added in the customer hierarchy section of the **Simulation Details** zone.
Pricing and Commitments	The following changes are made to this screen: • The **Select Price Item Group** button is added in the **Pricing and Commitments** screen. • A toggle button named **Original Data** is added in the **Pricing and Commitments** section. • The **Start Date** and **End Date** columns are added in the **Pricing and Commitments** section to view the effective dates of price assignments. These columns appear when the seasonal pricing is defined for a price item in a deal. • The **Parameters** column is added in the **Pricing and Commitments** section.

Screen Name (in 2.9.0.1.0)	Changes
	• The **Delete** icon appears corresponding to the proposed and seasonal pricing of a price item in the **Pricing and Commitments** section. • The **Expand/Collapse** icon appears corresponding to the **Start Date** and **Pricing Information** columns.
Price List Assignment	The following changes are made to this screen: • The **Save and Select Price Item Group** button is added to this screen. • The **Delete** icon appears corresponding to a price list in the **Proposed Price Lists** section. It appears corresponding to only those price lists which are newly assigned to the customer or account in the deal.
Product Enrollment	The following change is made to this screen: • The **Delete** icon appears corresponding to a product in the **Proposed Products** section.
Deal Pricing and Commitments	The following change is made to this screen: • The **Price Item Group** option is added to the **Search By** list in the **Search Pricing and Commitments** section.
Pricing (Person)	The following change is made to this screen: • The **Extract** button is added in the upper right corner of the **Effective Price Assignments for Person** zone.
Pricing (Account)	The following change is made to this screen: • The **Extract** button is added in the upper right corner of the **Effective Price Assignments for Account** zone.
Parameter (Used for Searching)	The following changes are made to this screen: • The **Health Product** and **Health Plan** options are added to the **Source Entity** list.
Parameter (Used for Adding)	The following changes are made to this screen: • The **Health Product** and **Health Plan** options are added to the **Source Entity** list. • The **Business Rule Eligibility Criteria** option is added in the **Parameter Usage** section. It appears when the source entity is set to **Health Product**, **Health Plan**, **Membership**, or **Membership Person**.
Field Mapping (Used for Searching)	The following changes are made to this screen: • The **Binder Payment**, **Medicare** and **Membership Status Reason** options are added to the **Preference Category** list in the **Search Field Mapping** zone.

Screen Name (in 2.9.0.1.0)	Changes
Field Mapping (Used for Adding)	The following changes are made to this screen: • The **Membership Status Reason Mapping** option is added to the **Field Mapping Business Object** list in the **Select Business Object** screen. • The **Binder Payment**, **Medicare** and **Membership Status Reason** options are added to the **Preference Category** list in the respective section. • The **Membership** and **Payment** options are added to the **Entity Type** list in the **Preference Settings** section.
Geographic Rating Area (Used for Searching)	The following changes are made to this screen: • The **Health Plan Details** option is added to the **Search By** list in the **Search Geographic Rating Area** zone. • The **Health Plan** column is added to the **Plan Details** section in the **Geographic Rating Area** zone.
Geographic Rating Area (Used for Adding)	The following change is made to this screen: • The **Health Plan** field is added to the **Plan Details** section.
Accrual Type (Used for Adding)	The following changes are made to this screen: • The **Applicable for Account** field is added to the **Main** section. • The **Proration** field also appears when the **Historical** option is selected from the **Accrual Criteria** list and the posting method is set to **Bill Distribution Code Level**, **Bill Level**, **Price Item Distribution Code Level**, or **Price Item Level**.
Accrual Type (Used for Viewing)	The following change is made to this screen: • The **Applicable for Account** field is added to the **Main** section in the **Accrual Type** zone.
Account	The following change is made to this screen: • The **Accrual Type** field is added in the **Main** tab.
Accrual (Used for Adding)	The following changes are made to this screen: • The **Accrual Cycle** field is removed from the **Main** section. • The **Reversal Start Date** and **Reversal End Date** fields are added to the **Main** section.
Customer Registration (Used for Adding)	The following change is made to this screen: • The **Accrual Type** field is added in the **Main** tab of the **Add/Edit Account** page.
Deal Type (Used for Adding)	The following change is made to this screen:

Screen Name (in 2.9.0.1.0)	Changes
	• The **Customer Characteristics** column is added to the **Deal Approval Profiles** section.
Deal Type	The following change is made to this screen: • The **Customer Characteristics** section is added to the **Deal Type** zone. It appears when you click the **Broadcast** icon corresponding to a record in the **Deal Approval Profiles** section.
Price Item (Used for Adding)	The following change is made to this screen: • The **Variable Price** option is added in the **Main** section.
Price Item (Used for Viewing)	The following change is made to this screen: • The **Variable Price** option is added in the **Main** section of the **Price Item** zone.
File Request Type (Used for Adding)	The following change is made to this screen: • The **Error To Do Type** field is added in the **Main** section.
File Request Type	The following change is made to this screen: • The **Error To Do Type** field is added in the **Main** section of the **File Request Type** zone.
Feed Management Dashboard	The following change is made to this screen: • The **Search Transaction** zone is redesigned. • The **Division Level Information** zone is removed from this screen.

Database Level Changes

To view the list of objects (such as tables, columns, algorithm types, business objects, and so on) which are newly added in Oracle Revenue Management and Billing Version 3.0.0.0.0, refer to the Appendix A: New Objects in the Oracle Revenue Management and Billing V3.0.0.0.0 Database in *Oracle Revenue Management and Billing Database Administrator's Guide*.

Supported Platforms

The following table lists the operating system and application server combinations on which Oracle Revenue Management and Billing Version 3.0.0.0.0 is supported:

Operating System and Web Browser (Client)	Operating System (Server)	Chipset	Application Server	Database Server
Windows 10 (64-bit) with Microsoft Edge (Chromium) v83, Firefox ESR 68.x[1], or Google Chrome Enterprise Version 81 or higher	AIX 7.2 TL0+[2] (64-bit)	POWER 64-bit	WebLogic 12.2.1.3 (64-bit) WebLogic 12.2.1.4 (64-bit)	Oracle Database Server 18c (12.2.0.2) SP1+ Oracle Database Server 19c
	Oracle Linux 7.x (64-bit)	x86_64	WebLogic 12.2.1.3 (64-bit) WebLogic 12.2.1.4 (64-bit) IBM WebSphere 9.0.5.2	Oracle Database Server 18c (12.2.0.2) SP1+ Oracle Database Server 19c
	Oracle Solaris 11.3+	SPARC 64-bit	WebLogic 12.2.1.3 (64-bit) WebLogic 12.2.1.4 (64-bit)	Oracle Database Server 18c (12.2.0.2) SP1+ Oracle Database Server 19c
	Red Hat Enterprise Linux[3] 7.x (64-bit)	x86_64	WebLogic 12.2.1.3 (64-bit) WebLogic 12.2.1.4 (64-bit) IBM WebSphere 9.0.5.2	Oracle Database Server 18c (12.2.0.2) SP1+ Oracle Database Server 19c
	Windows Server 2012 R2 (64-bit)	x86_64	WebLogic 12.2.1.3 (64-bit) WebLogic 12.2.1.4 (64-bit)	Oracle Database Server 18c (12.2.0.2) SP1+ Oracle Database Server 19c

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[1] Here, x represents the vendor supported version.

[2] Version numbers suffixed with "+" are the MINIMUM version supported. That version and all future 4th digit updates will be supported.

[3] Oracle Revenue Management and Billing is tested and certified on Oracle Linux 7.x. Oracle Linux is 100% userspace-compatible with Red Hat Enterprise Linux, and therefore Oracle Revenue Management and Billing is supported on Red Hat Enterprise Linux.

Note: We strongly recommend you to install Oracle Revenue Management and Billing (ORMB) on Windows platform only for non-production activities, such as User Acceptance Testing (UAT), development setup, and so on.

Technical Recommendations

To improve the overall batch performance on Windows and Linux platforms, we recommend you to make changes in the following files:

File Name	Change From	Change To
hibernate.properties	hibernate.c3p0.timeout = 300	hibernate.c3p0.timeout = 600
threadpoolworker.sh	MEM_ARGS="-Xms512m -Xmx1024m -XX:MaxPermSize=768m"	MEM_ARGS="-Xms512m -Xmx4096m -XX:MaxPermSize=768m"

Supported Upgrades

At present, we support upgrade from Oracle Revenue Management and Billing Version 2.9.0.1.0 to 3.0.0.0.0. For more information on how to upgrade, refer to the following documents which are available on OTN:

- Oracle Revenue Management and Billing Version *3.0.0.0.0* Upgrade Guide

- Oracle Revenue Management and Billing Version *3.0.0.0.0* Upgrade Path Guide

For upgrading from any other version of Oracle Revenue Management and Billing other than 3.0.0.0.0, consult with Oracle Support, Oracle Partner, or Oracle Consulting that may be supporting your implementation and upgrade process.

Unsupported Integrations

We are not supporting Oracle Documaker Integration with ORMB 3.0.0.0.0. Alternatively, you can configure the bill and letter reporting feature so that you can generate bills and letters of a customer in the PDF format from ORMB. This reporting feature is built using native capabilities available in ORMB. For more information about the reporting feature, refer to the following documents which are available on OTN:

- Reporting User Guide
- Reporting Installation Guide
- Bill and Letter Reports Configuration Guide
- Reporting SDK Guide

Deprecation Notices for ORMB Version 3.0.0.0.0

This section describes features and system data that are deprecated in this release and planned for deprecation in the future release of Oracle Revenue Management and Billing. It contains the following topics:

- [Deprecated Features in This Release](#)
- [Deprecation Planned for Future Releases](#)

Deprecated Features in This Release

The following features are deprecated in Oracle Revenue Management and Billing Version 3.0.0.0.0:

- **Customer, Membership, and ASO Inbound Messages –** These inbound messages for the fully-insured group and self-funded business will not be supported from this release. Instead, we recommend you to use the Health Care inbound message. This is because, henceforth, all entities (such as person, account, policy, and policy plan) for the fully-insured group and self-funded business should be created through a customer registration object.

Deprecation Planned for Future Releases

The following table lists the objects which will be deprecated in the next release of Oracle Revenue Management and Billing:

Object Type	Object Name
Algorithm Type	C1_CURALG, C1-MDOV-BILL, C1-MDOV-BSEG, C1-MDOV-ONSA, SA_DERV_POPC
Feature Configuration	C1_EX_ROUND
Option Types	Currency Conversion Algorithm and Payment Distribution To-Do (from the **C1_MLTCURACC** feature configuration)
Table Columns	The following table lists the columns which will be deprecated in the next release: <table><tr><th>Table Name</th><th>Column Name</th></tr><tr><td>CI_ACCT_PER</td><td>BILL_RTE_TYPE_CD, RECEIVE_COPY_SW, BILL_FORMAT_FLG, NBR_BILL_COPIES, CUST_PO_ID, NOTIFY_SW, and BILL_ADDR_SRCE_FLG</td></tr><tr><td>C1_BENEFITS</td><td>BENEFIT_SUB_TYPE_FLG</td></tr></table>
Batch Control	GLASSIGN, C1-IAENT, C1-DARSU
View	CI_EFF_ACCT_PRICING_VW, CI_EFF_PER_PRICING_VW

Object Type	Object Name
Business Service	C1-EffectivePricing, C1_PriceParmBS
	Note: Instead of using the **C1-EffectivePricing** business service, use the **C1-GetEffectivePricing** business service to view the data on the **Pricing (Account)** and **Pricing (Person)** screens. Similarly, instead of using the **C1_PriceParmBS** business service, use the **C1_PRICE_PARM** business object to add, edit, copy, and delete a parameter.
Service Program	EFFPRCSERVICE, C1_PRICEPARM
Column	ADDRESS1 , ADDRESS2 , ADDRESS3, ADDRESS4 , CITY, NUM1, NUM2, COUNTY, POSTAL, HOUSE_TYPE, GEO_CODE, IN_CITY_LIMIT, STATE, and COUNTRY from the CI_PER table
Table	CI_PER_ADDR_SEAS
Screen	Rate Check, Policy (P&C), Insurance Control Central, Collection Control Central, Account Current, MDT, MDT Type, Variance Parameter

Therefore, henceforth, we strongly recommend you not to use these objects in any custom implementation.

Product Documentation

User manuals and other technical documents are available in the Portable Document Format (PDF). You can download Oracle Revenue Management and Billing release-specific documentation library (for example, Oracle Revenue Management and Billing Version 3.X.X.X.X Documentation Library) using the following URL:

http://www.oracle.com/technetwork/indexes/documentation/fsgbu-1364781.html

Documentation Updates

The following restructuring is done in Oracle Revenue Management and Billing Version 3.0.0.0.0 Documentation:

Document Name	Changes…
Insurance User Guide	The **Health Insurance Policy** chapter is removed. Now, its content is split into the following three newly introduced chapters: • Health Insurance Business Management • Fully-Insured Group Health Insurance • Self-Funded Group Health Insurance

Media Pack Download

Oracle Financial Services Revenue Management and Billing Version 3.0.0.0.0 and Oracle Insurance Revenue Management and Billing Version 3.0.0.0.0 media packs can be installed on the following supported platforms:

- AIX (64-bit)
- Microsoft Windows (64-bit)
- Linux (64-bit)
- Oracle Solaris (64-bit)

The media pack includes multiple packages. For more information, refer to the **Media Pack Contents** section in the *Oracle Revenue Management and Billing Version 3.0.0.0.0 Quick Installation Guide*.

To download a package from a media pack:

1. Login to [Oracle Software Delivery Cloud](#).
2. Select the **Release** option from the **All Categories** list.
3. Type **Oracle Financial Services Revenue Management and Billing** or **Oracle Insurance Revenue Management and Billing** in the corresponding text box.
4. Click **Search**. A list of media packs appears in the search results.
5. Click **Add to Cart** corresponding to the **Oracle Financial Services Revenue Management and Billing 3.0.0.0.0** or **Oracle Insurance Revenue Management and Billing 3.0.0.0.0** option.
6. If required, you can verify the media pack which is added to the cart by clicking the **View Cart** link.
7. Click the **Checkout** link. A page appears.
8. Select the required platform from the **Platforms/Languages** list.
9. Click **Continue**. A page appears with the license agreement.
10. Scroll and read the full license agreement and then click the, **I reviewed and accept the Oracle License Agreement** option.
11. Click **Continue**. The **File Download** page appears.
12. Select the required package that you want to download from the media pack and then click **Download**. The **View Downloads** window appears.
13. Select the **Save as** option from the **Save** list corresponding to the download you want to save. The **Save As** dialog box appears.
14. Browse to the location where you want to download the package and then click **Save**. The package is downloaded on your local machine.

Bug Fixes

The following table lists the bugs that are fixed in this release:

Bug Number	Copy of (Base Bug)	Description
32450521	*32434666*	APPROVE SUBMIT BUTTON ARE ENABLED FOR APPROVED TRANSACTION ID FOR EXISTING DATA OF WESTPAC
32447265	*32418068*	ENTITY HIERARCHY RELATIONSHIP SCREEN DROPDOWN ISSUE
32304244	*32248454*	WESTPAC_FRT-USER CONVERSION-INCORRECT BATCH STATUS AND ERROR MESSAGES ARE SHOWN ON BATCH RUN TREE AND FILE UPLOAD DASHBOARD
32282569	*32257838*	WESTPAC_USAGE ACCOUNTS MISSING IN SETTLEMENT CONSTRUCT REPORT TESTING
32282533	*32257829*	WESTPAC_REPORT_STANDARD_PRICELIST REVIEW REPORT_SERVER ENCOUNTERED ERROR IS COMING
32282517	*32257814*	WESTPAC_ACCOUNT EXTRACT BATCH_CISKEY IS NOT GETTING POPULATED IN THE EXTRACT
32281656	*32257794*	WESTPAC_BILLING EXTRACT_CISKEY IS NOT COMING IN THE EXTRACT.
32281600	*32257752*	WESTPAC_USAGE ACCOUNTS MISSING IN INVOICE CONSTRUCT REPORT TESTING
32261132	*32208349*	WESTPAC_REPORTS_CUSTOMER INVOICE MANUAL PAYMENT REPORT -GETTING "PAGE UNRESPONSIVE ERROR"
32797535	*32187348*	UNABLE TO SEARCH BILLS THROUGH BILL DRILL DOWN SCREEN
32797478	*32321789*	PAYMENT HISTORY - PAYMENT INFO SLOW RESPONSE TIME
32797289	*32409748*	UPLOAD REQUEST TYPE - CMA DOESN'T EXTRACT THE MAPPING FOR UPLOAD REQUEST TYPE.
32755256	*32439584*	FREE TEXT(Y/N) ISSUE ON ENTITY HIERARCHY CHAR ISSUE OF EXISTING DATA
32755250	*32482143*	INCORRECT DETAILS ARE SHOWN AT TRANSACTION LEVEL INFORMATION AND TRANSACTION LEG INFORMATION
32755217	*32613185*	USAGE ACCOUNTS MISSING IN SETTLEMENT CONSTRUCT REPORT - MISSING COLUMN
32755216	*32614564*	USAGE ACCOUNTS MISSING IN INVOICE CONSTRUCT REPORT - MISSING COLUMNS

Bug Number	Copy of (Base Bug)	Description
32755189	32469105	#IAT#PRICE ITEM PARAMETER DESCRIPTION IS SAME FOR TWO PARAMETER
32755172	32517762	#IAT#BATCH C2NZPYEX: DISCREPANCY BETWEEN NUMBER OF RECORDS GENERATED IN PAYMENT FILE.
32755170	32598698	C2DMEXT HOTFILE OUTBOUND EXTRACT - DELIMITER DISCREPANCY
32755166	32700306	#IAT#BATCH C2APEXT : DISCREPANCY BETWEEN NUMBER OF RECORDS GENERATED IN PAYMENT FILE.
32752400	32599315	POST PROCESSING ITEM NOT GETTING INCLUDED IN DEAL SIMULATION
32752383	32624726	'WEB SERVER DID NOT RESPOND CORRECTLY' IS GETTING DISPLAYED ON CLICK OF PRICING & COMMITMENTS- DM
32567468	32478207	FOWARD PORT - DEAL REFERENCE USING EXISTING DEAL ID OR CUSTOMER IS FAILING
32497269	32288928	ISSUE WHILE SEARCHING APPROVAL TRANSACTION ID USING SUBMITTER ID IN LOWER CASE
32479427	32423193	PAGINATION ISSUE ON CUSTOMER 360 - POLICY PLAN INFORMATION ZONE
32479299	32297677	AMPERSAND CHARACTER NOT ALLOWED IN SORT ID UPLOAD
32462839	32440172	FORWARD PORT : TO DO SEARCH ON DEAL APPROVER DASHBOARD NOT WORKING USING DATE FILTER
32268843	32268814	WESTPAC_FRT-INTEREST RATE FEED INBOUND- INBOUND FILE IS NOT GETTING PROCESSED
32268841	32268826	WESTPAC_FRT-INVOICE CONVERSION- INVOICE ACCOUNT IS SHOWING BLANK ADDRESS DETAILS WHEN CREATED THROUGH FRT
32222706	31885404	PERFORMANCE ISSUE ON CUSTOMER 360 DEGREE VIEW

Known Issues

This section lists the known issues in Oracle Revenue Management and Billing Version 3.0.0.0.0 along with workarounds available to handle these issues. The known issues are grouped into the following categories:

- Banking
- Insurance
- Documentation

Banking

Issue	SEARCH RESULT FOR EXCHANGE RATE NOT DISPLAYED CORRECTLY
Description	Searching for the lowest precision rate (0.000000000000000001 /0.000000000000000011/0.000000000000000023) from the **Search Exchange Rate** zone results in displaying the rate in exponential format "IE -18".
Workaround	None

Issue	VALIDATION RULES FOR ADHOC CHARACTERISTIC TYPES ARE NOT TRIGGERED IN THE MANAGE PRODUCTS, MANAGE PRICE LISTS, ADD PRODUCT PRICING, OVERRIDE PRODUCT PRICING, AND EDIT ASSIGNED PRICING SCREENS
Description	When you associate adhoc characteristic types with a product, price list, and a price assignment, validations defined for adhoc characteristic types are not triggered in the **Manage Products**, **Manage Price Lists**, **Add Product Pricing**, **Override Product Pricing**, and the **Edit Assigned Pricing** screens.
Workaround	None

Issue	UNABLE TO CHANGE THE DIVISION STATUS FROM ACTIVE TO RETIRED
Description	When the approval workflow functionality is enabled, the status of a division will not get changed from **Active** to **Retired**.
Workaround	None

Issue	**LOCALIZATION ISSUE WHEN MAKER AND CHECKER CHOOSE DIFFERENT LANGUAGES**
Description	When a maker and checker operate in different languages, a maker cannot see the approved transactions.
Workaround	Maker should login with a language that checker is using to see the approved transactions.

Issue	**PRE-VALIDATION ERROR MSG FOR INVOICING GROUP EVEN IF PRE-VALIDATION IS OFF**
Description	If you set the **Pre-validation** flag for both the groups (that is, **C1IGADD** and **C1IGUPD**) to **N**, the validation will still be triggered before the approval workflow request is created.
Workaround	None

Issue	**FOREIGN KEY AND FILE LOCATION CHARACTERISTIC TYPE NOT SUPPORTED IN UI MAPS**
Description	The screens created using the UI map do not support the **Foreign Key Value** and **File Location Value** characteristic types. These screens only support the **Adhoc Value** and **Predefined Value** characteristic types.
Workaround	None

Issue	**MESSAGE DOES NOT APPEAR ON CLICKING BUTTONS IN LIST OF PRICE ASSIGNMENTS ZONE**
Description	On approving, rejecting, or canceling one or more price assignment requests (at once) from the **List of Price Assignments** zone, the appropriate message does not appear when you click the **Accept Changes**, **Return to Submitter**, or the **Revert to Original** button.
Workaround	None

Issue	VIEW RULE TYPE SCREEN - PERFORMANCE ISSUE
Description	If you define a transaction record type with the maximum accounts to be charged set to 5, maximum products to be mapped set to 10, and the maximum product parameters set to 15 and view the details of the rule type, you might experience delay in loading the **View Rule Type** screen.
Workaround	None

Issue	C1-TXCNC BATCH GETS EXECUTED SUCCESSFULLY EVEN IF C1-TXNCU BATCH FAILS
Description	When you execute the C1-TXNCU batch with either of the following parameters during the cancellation process, an error occurs: • Transaction Source • Division If you further execute the C1-TXCNC batch during the cancellation process, the status of all transactions in the feed is changed to Cancelled (CNCL). But, in this case, the SQIs on the billable charges are not accurate.
Workaround	None

Issue	ERRONEOUS RESULTS WHEN BILLABLE CHARGES ARE VOLUMINOUS & SESSION TIMEOUT IS LOW
Description	While billing, you may notice erroneous results when the default session timeout is low and the number of billable charges of an account are high.
Workaround	In such case, we recommend you to generate the bill through a batch process instead of generating the bill through the **Bill** screen.

Issue	**CONDITIONAL APPROVAL WORKFLOW CANNOT BE USED WHILE COPYING A PRICE LIST**
Description	The system allows you to define conditional approval workflow for business objects. However, at present the conditional approval workflow cannot be used while copying a price list.
Workaround	None

Issue	**BILLS GENERATED FOR THE MEMBER ACCOUNT AND NOT FOR THE MASTER ACCOUNT**
Description	If you add a contract to a member account after the account is added to the master account, the system will not duplicate the newly added contract at the master level. Therefore, in such scenarios, billable charges related to the newly added contract will be billed to the member account and not to the master account.
Workaround	You need to ensure that no new contracts are added to the member account after the account is added to the master account.

Issue	**INCORRECT RESULTS IF DISAGGREGATION BATCHES NOT EXECUTED IN SEQUENCE**
Description	During the transaction disaggregation process, you must execute the following batches in the specified order: 1. Identify Affected Transactions (C1-IAENT) 2. Process Non Aggregated Transactions (C1-PDTXN) 3. Clean Up (C1-TXNCU) 4. Update Disaggregation Request Status (C1-DARSU) Otherwise, erroneous results might occur.
Workaround	None

Issue	PERFORMANCE ISSUE WHILE EXECUTING THE C1-DARSU BATCH WHEN REQUEST_TYPE_FLG=PERS
Description	The system takes long time to change the disaggregation request status when the disaggregation request is created for a person.
Workaround	None

Issue	AGGREGATION DOESN'T WORK IF DISAGG, ROLLBACK, & CANCELLATION EXECUTED IN BETWEEN
Description	If you execute the disaggregation, cancellation, and rollback process in between the aggregation process, the system will not allow you start the aggregation process once again.
Workaround	None

Issue	POST PROCESSING SEGMENT NOT GENERATED IF THE PP MAX VALUE IS SET TO ZERO (0)
Description	If the maximum value is set to zero (0) while defining pricing for a product have price assignment type as post processing, the system does not generate the post processing segments for such products.
Workaround	None

Issue	TWO CONCURRENT RUNS WHICH DERIVE SAME DIVISION FOR TRANSACTIONS DOES NOT WORK
Description	If you execute a batch concurrently with two different divisions (for example, D1 and D2), the erroneous results might occur when transactions in both the runs derive the same division, account, and/or product combination.
Workaround	None

Issue	**ERROR OCCURS WHEN YOU DISPLAY BILL FOR A PRODUCT THAT BELONGS TWO RELATIONSHIPS**
Description	If a product is added to two or more product to product relationships using the relationship type as Service, the system error occurs when you display bill for the product using Documaker. For example, if P3 is added in the P1 and P2 product relationship using the relationship type as Service, an error occurs when you display bill for P3 using Documaker.
Workaround	None

Issue	**ERROR OCCURS IN CASE OF AN IGA SCENARIO WHILE EXECUTING THE C1-PNDBL BATCH**
Description	There might be situations when you add an account to an invoicing group after a bill is generated for the account using the new billing batches (i.e. C1-PNDBL, C1-BSGEN, and C1-BLPPR). In such scenario, an error occurs when you execute the C1-PNDBL batch once again to bill charges of the member account on the master account. Similarly, an error occurs when you generate the bill for the account which was earlier billed through the master account using these billing batches.
Workaround	None

Issue	**ACTIVE CONSTRUCTS DETERMINED ON CUT-OFF DATE INSTEAD OF CHARGES START & END DATE**
Description	The system determines the active construct based on the cut-off date and bills the usage accounts' charges through an invoice account which is defined in the active construct. It does not determine the active construct based on the billable charge's start and end dates.
Workaround	None

Issue	**BILL SEGMENTS CREATED BUT FTS NOT CREATED WHEN ACCOUNTING CALENDAR NOT DEFINED**
Description	There might be situations when you generate bill segments for a pending bill which is created for a bill cycle whose accounting date either falls within the closed accounting calendar or does not fall within any accounting calendar. In such scenarios, the bill segments are generated, but the financial transactions are not created for the bill segments. An error occurs when you view such bills, whose financial transactions are not created, through the **Bill** screen.
Workaround	None

Issue	**STATUS OF ALL LEGS CHANGED TO ERROR IF EXCHANGE RATE NOT AVAILABLE FOR ONE LEG**
Description	If a transaction has multiple legs and the system could not find exchange rate for one of the leg while executing the C1-TXNSQ batch, the status of the transaction and all its transaction legs is changed to **Error**.
Workaround	None

Issue	**INCORRECT RESULTS APPEAR WHEN UNDERSCORE CHARACTER IS USED IN SEARCH CRITERIA**
Description	If you use the underscore (_) character in the search criteria, the system does not search strings with the underscore character. Instead, the system interprets the underscore (_) character as a wildcard character.
Workaround	None

Issue	**MULTIPLE ISSUES ON SCREENS AND ZONES WHERE PAGINATION IS USED**
Description	There are various issues on the screens and zones where pagination is used. For example, the buttons and icons do not appear in the F1-DE-MULQRY zones, paging keys are trimmed, and so on.
Workaround	To resolve these pagination related issues, you need to apply framework single fixes which are available for the following bugs: • 20302717 - PAGINATION PANEL SHOWING INCORRECT VALUE FOR TOTAL PAGES AND CUSTOM ICONS DO NOT • 20261532 - PAGINATION PANEL IS BEING DISPLAYED ON ORASEARCH OPERATION • 20113520 - BUTTON AND ICON DOESN'T APPEAR FOR PAGINATION IN F1-DE-MULQRY ZONES • 19941127 - PAGINATION FEATURE NOT WORKING FOR SUBQUERIES USED IN ZONE SQL • 19163528 - PAGINATION : PAGING KEY GETS TRIMMED AND RETURNS NO RESULTS • 18965501 - PAGINATION : ALL THE PAGES DISPLAY SAME SET RECORDS WHEN EQUAL OPERATOR IS USED • 18953690 - PAGINATION: ROW SERIAL NUMBERS RESET WHEN WE SORT COLUMN, AFTER "NEXT" CLICK • 18887503 - PAGINATION DOCUMENTATION NEEDS MORE DETAIL • 18639253 - PAGINATION - MISSING ICON, PAGE LABEL AND PAGE SIZE • 18491431 - DATA EXPLORER PAGINATION IS NOT CONSIDERING THE SQL COUNT LIMIT ZONE PARAMETER • 18399979 - PAGINATION - CRASHING IF PAGING COLUMN IS NOT DISPLAYED • 18399934 - PAGINATION - NOT WORKING FOR DESCENDING SORT • 20864137 - PAGINATION DOES NOT WORK PROPERLY WHEN PORTAL HAS MULTIPLE BROADCAST ZONES

Issue	**PAYMENT AMOUNT IS INCORRECT WHEN PAYMENTS HAVE FROZEN & OVERPAYMENT PAY SEGMENTS**
Description	If the payments have both frozen and overpayment pay segments, the payment amount displayed corresponding to the overpayment and frozen payment in the **Payments** zone of the **Remittance Summary** screen is incorrect. The system displays the total payment amount instead of displaying the overpayment and frozen pay segment amount.
Workaround	None

Issue	**ERROR OCCURS WHEN BIND VARIABLES USED IN IN AND NOT IN CLAUSES WITHOUT BRACKETS**
Description	If a template is used in a construct for selecting usage accounts, billable charges, or adjustments where bind variables are used in the IN and NOT IN clauses without brackets, an error occurs when you bill an account through such construct.
Workaround	We recommend you to use bind variables within brackets in the IN and NOT IN clauses while defining a template.

Issue	**C1-ADUP1 BATCH DOES NOT SUPPORT MULTI-CURRENCY ACCOUNTS FEATURE**
Description	An error occurs while executing the C1-ADUP1 batch when the adjustment currency is different from the account's invoice currency. This is because, at present, the C1-ADUP1 batch does not support the Multi-Currency Accounts feature.
Workaround	None

Issue	**ABLE TO CREATE BILLABLE CHARGES FOR AN INVOICE ACCOUNT**
Description	Ideally, the system should not allow you to create billable charges for an invoice account. At present, there is no restriction, and therefore you can create billable charges for an invoice account which are billed through the invoice account.
Workaround	None

Issue	**PARTIAL DATA UPLOADED WHEN USAGE RECORD HAS MORE THAN FIVE PASS THROUGH CHARGES**
Description	If you upload a usage record which has more than five pass through charges (for example, Bill Line 1, Bill Line 2, …., Bill Line 8), at present, the system uploads the details of only five pass through charges (i.e. till Bill Line 5). The details of Bill Line 6, Bill Line 7, …., and Bill Line 8 are not uploaded.
Workaround	None

Issue	**LENGTH OF UDF_CHAR_X IS 50 IN THE TFM ODI PACKAGE AND 60 IN THE DATABASE**
Description	In the ORMB database, the maximum size of the UDF_CHAR_1, UDF_CHAR_2, …., UDF_CHAR_50 columns is set to 60 characters. However, while uploading the transaction data via ODI, you can specify maximum 50 and not 60 characters in the CSV file.
Workaround	None

Issue	**ADJUSTMENT CREATED WHEN CONTRACT ID IS VALID, BUT ACCOUNT IDENTIFIER IS INVALID**
Description	If you upload an adjustment data file with a record where the contract ID is valid, but the account ID or account identifier is invalid, the system creates the adjustment against the contract. Ideally, the system should not create the adjustment until and unless the contract ID, account ID, account identifier type, and account identifier are valid.
Workaround	None

Issue	**ABLE TO GENERATE A BILL FOR A SETTLEMENT ACCOUNT FROM THE BILL SCREEN**
Description	Ideally, the system should not allow you to generate a bill for a settlement account. However, at present, you can generate a bill for a settlement account from the **Bill** screen.
Workaround	None

Issue	**ADJUSTMENT CREATED AGAINST PREVIOUS BILL IS NOT CONSIDERED DURING TRIAL BILLING**
Description	If you create an adjustment against the previous completed bill, the adjustment is not presented on the next bill during trial billing. This open item accounting feature is not supported during trial billing.
Workaround	None

Issue	**REOPEN BUTTON DISABLED WHEN C1-BILLSETT ALGORITHM ATTACHED ON CUSTOMER CLASS**
Description	If you attach an algorithm of the C1-BILLSETT algorithm type on the **Bill Completion** system event of the account's customer class, at present, you will not be able to reopen a bill.
Workaround	None

Issue	**THE PAYMENT REQUEST SCREEN DOES NOT SUPPORT MULTIPLE TENDERS**
Description	At present, the system does not support multiple tenders when you create a payment from the **Payment Request** screen.
Workaround	None

Issue	**UNABLE TO SAVE MULTIPLE CHARACTERISTICS FOR A PRICE ASSIGNMENT**
Description	While defining characteristics for a price assignment, you can specify multiple characteristics in the screen, but only one characteristic is saved in the application.
Workaround	None

Issue	**UNABLE TO SCROLL LEFT TO VIEW TABS ON THE LEFT IN THE DIVISION SCREEN**
Description	The **Scroll Left** icon is not available in the **Division** screen. Therefore, you will not be able to scroll left if you are on the extreme right tab in the screen.
Workaround	None

Issue	**POP-UP WINDOW NOT DISPLAYED PROPERLY WHEN YOU MOUSE OVER DETAILED DESCRIPTION**
Description	In the **Batch Control** screen, a pop-up window appears when you move the mouse over the **Detailed Description** field. At present, the data is not properly displayed in the pop-up window.
Workaround	None

Issue	**QUERY ZONE - HORIZONTAL SCROLL BAR SCROLLS THE SEARCH CRITERIA FIELDS**
Description	The Query zone allows you to search for an object. At present, whenever you search in the Query zone and use the Horizontal Scroll Bar, the search criteria fields are also scrolled to the left along with the search results.
Workaround	None

Issue	PERFORMANCE ISSUE ON CHANGING THE SEARCH BY FILTER OPTION
Description	If you change the filter option from the **Search By** list, the system takes long time to load the respective query zone. You may observe this issue in many screens where the multi-query zone is used.
Workaround	None

Issue	EFFECTIVE PRICING NOT VISIBLE IF C1_PER_REL HAS INVALID PERSON RELATIONSHIP TYPE
Description	If you set the **Check on Feature Configuration** parameter in an algorithm which is created using the **C1-CUSRLALGT** algorithm type to **A** and add an invalid person relationship type in the **C1_PER_REL** feature configuration, the effective pricing is not inherited properly as expected.
Workaround	None

Issue	RECORDS IN THE ADJUSTMENT DATA FILE NOT UPLOADED IN THE SPECIFIED SEQUENCE
Description	When you upload the records of an adjustment data file, the records are not uploaded in the sequence in which they are listed in the CSV file.
Workaround	None

Issue	PAYMENT/TENDER SEARCH- COLUMN HEADERS INCORRECT WHEN SEARCH FILTER IS CHANGED
Description	If you search using a particular filter option in the **Payment/Tender Search** screen, the search results are displayed accordingly. Then, if you change the search filter and criteria, the search results are displayed accordingly, but the column headers are not updated.
Workaround	None

Issue	**ERROR LOG FILES GENERATED ON EXECUTING BILLING AND C1-BLPPR BATCHES**
Description	In ORMB, the error log file is generated even when the following batches are executed successfully and bills are completed: • BILLING • C1-BLPPR
Workaround	None

Issue	**FIELD ALIGNMENT ISSUE ON BUSINESS OBJECT BASED GENERATED UI MAPS**
Description	You may observe that the algorithm description is not properly aligned corresponding to the **Algorithm** field in the following screens: • Upload Request Type • Upload Adjustment Data File
Workaround	None

Issue	**MANUAL DISTRIBUTION NOT WORKING IN THE PAYMENT SCREEN**
Description	On saving, the distributed amount is reset to zero when you manually distribute the tender amount among the unpaid bills in the **Payment** screen.
Workaround	None

Issue	**ERROR OCCURS ON EXECUTING BILLOPEN IF IN CLAUSE CONTAINS MULTIPLE BIND VARIABLES**
Description	If you have used template in a construct where IN clause has multiple bind variables, an error occurs while executing the **Construct Based - Pending Bill Generation (BILLOPEN)** batch.
Workaround	None

Issue	**ELIGIBLITY CRITERIA ROW IS SKIPPED IF LEFT HAND SIDE PARAMETER IS NOT SPECIFIED**
Description	If the left hand side parameter is not specified in an eligibility criteria row while defining or editing a price item pricing, the eligibility criteria row is skipped and not saved in the system.
Workaround	None

Issue	**POST-PROCESSING BILL SEGMENT NOT REGENERATED WHEN YOU CLICK THE GENERATE BUTTON**
Description	An error occurs when you click the **Generate** button in the **Bill Segment** screen while regenerating the post-processing bill segment which is present on the pending bill.
Workaround	None

Issue	**WRONG CURRENCY CONVERSION ALGORITHM IS USED WHILE EXECUTING THE C1-REPC2 BATCH**
Description	While executing the **C1-REPC2** batch, the system should use the currency conversion algorithm attached to the **Currency Conversion For Bill Segments** algorithm spot of the division. Instead, the system uses the currency conversion algorithm attached to the **Currency Conversion For Adjustments** algorithm spot of the division.
Workaround	None

Issue	RATE CALCULATED INCORRECTLY WHEN EXCHANGE RATE IS CHANGED DURING PRICING PERIOD
Description	At present, the rate is calculated and persisted using the exchange rate which is effective on the price item pricing effective start date. Therefore, the persisted rate shown on the **Pricing (Account)** screen might be incorrect when the exchange rate is different on the date when the results are fetched on the **Pricing (Account)** screen.
Workaround	None

Issue	ENTRY NOT CREATED IN THE CI_REPRC_ENTITY_DTL TABLE ON EDITING A PRICE LIST
Description	If you edit the details of a price list which is assigned to an account or a person, an entry is not created in the CI_REPRC_ENTITY_DTL table. In other words, the repricing is not triggered on editing the details of a price list which is already assigned to an account or a person.
Workaround	None

Issue	UNABLE TO DEFINE PARAMETER FOR FIELDS WHICH BELONG TO CHILD TABLES
Description	At present, the system does not list the fields of child tables in the **Source Type Code** field when you select the source entity as Account, Person, or Product while defining a parameter. Therefore, you cannot define a parameter for child table' fields and as a result, repricing is not triggered when you change the value of any child table' field. For example, when you change the main customer of an account, repricing is not triggered because the MAIN_CUST_SW field belongs to the child table named CI_ACCT_PER table for which you cannot define a parameter in the system.
Workaround	None

Issue	**RATE NOT PERSISTED ON PRICE ASSIGNMENT DATE WHEN C1-PRICEACCOUNT INVOKED MANUALLY**
Description	When you manually execute the C1-PriceAccount business service for an account, rate is calculated and persisted for the price item pricing available on the default and global price list on the date when the C1-PriceAccount business service is invoked. Ideally, the rate must be calculated and persisted on the price item pricing effective start date.
Workaround	None

Issue	**PERSISTED DATA NOT GETTING REFRESHED ON EDITING PRICE ASSIGNMENT**
Description	On editing a price item pricing, the rate is not properly recalculated and persisted when the details of a price component, such as rate, eligibility criteria, and so on are changed.
Workaround	None

Issue	**CALENDAR (START DATE AND END DATE) POP-UP NOT ALIGNED PROPERLY**
Description	Calendar pop-up for start date and end date of Hold Request screen is displayed partially outside the screen.
Workaround	None

Issue	**PRICELIST EDIT VALIDATIONS NOT DEPENDENT ON ASSIGNMENT DATE OR ASSIGNMENT STATUS**
Description	Available and Eligible dates can be edited in Price List though Assignment Date or Assignment Status is added for price list.
Workaround	None

Issue	**STACKING IS NOT SUPPORTED FOR PRICE SIMULATION**
Description	Stacking is supported for bill generated through an Account. Pricing Simulation does not support stacking.
Workaround	None

Issue	**ADJUSTMENT AMOUNT IS NOT PICKED UP FOR PAYMENT IN NEXT BILL**
Description	When you generate an Adjustment after a successful payment, the Adjustment amount is not picked up in the next bill that is generated and hence, payment is not created for the adjustment amount.
Workaround	None.

Issue	**IF USAGE ACCOUNT IS NOT PART OF ANY INVOICE CONSTRUCT, BILL IS NOT GENERATED.**
Description	At present system does not allow user to generate a bill on usage account which is not part of any invoice construct. System should allow user to generate a bill on usage account which is not part of any invoice construct.
Workaround	None

Issue	**SPLIT AUTO PAY NOT AVAILABLE ON SETTLEMENT CONSTRUCT ACCOUNT CREATION SCREEN.**
Description	At present split auto pay is not supported on Settlement construct because Percentage field has to be added in Auto Pay Instructions section while creating a new account.
Workaround	None

Issue	SQL ERROR ON PRICE ASSIGNMENT SCREEN WITH ADHOC VALUE PASSED IN QUOTES.
Description	At present SQL error is displayed in Price Assignment screen for parameter when adhoc value is added in quotes. Price Assignment should be successful though value added is in single quotes.
Workaround	None

Issue	BS ARE NOT GETTING PICKED FOR BATCH DATE AFTER BILLABLE CHARGE END DATE
Description	At present, batch business date is later then billable charge date and C1_BILLGEN is not creating any BS, hence bill is not generated.
Workaround	None

Issue	RSDETAILS UPDATED INCORRECTLY WHEN PRICE COMPONENT FEES/RATE) PERSISTENCE EDITED
Description	At present, rate schedule details after modification are displayed and not the details before editing.
Workaround	None

Issue	FEES RATE CALCULATION PRE-PROCESSING ALGORITHM ISSUE
Description	Algorithm only considers the latest Service Quantity Identifier, it has to consider both Parameter and Service Quantity Identifier when calculating FEES and RATE.
Workaround	None

Issue	**C1-ACFEES BATCH RUN WITH PRICE ITEM CODE AS THE ONLY PARAMETER.**
Description	C1-ACFEES batch should consider records of price assignment where FEES for same should persist.
Workaround	None

Issue	**PRICE ASSIGNMENT TYPE - POST PROCESSING ISSUE IN FEES CALCULATION BATCH.**
Description	New value to be added in Price Assignment Type for post processing issue in FEES calculation batch.
Workaround	None

Issue	**C1-ACCOUNTFEES SERVICE ISSUE**
Description	At present FEES for price assignments are not persisted if any one price assignment eligibility rule results false and if no RATE found for same.
Workaround	None

Issue	**PAYMENT STATUS REMAINS INCOMPLETE AND NO PAYMENT SEGMENT IS GENERATED EVEN WHEN TENDER CONTROL ID IS GENERATED**
Description	For `On Extract Date', if one of the split auto payments goes in to error state, BALAPY batch generates Tender Control Id and Payment Status remains Incomplete and no Payment segment is generated.
Workaround	None

Issue	**CHANGES MADE TO ACCOUNT ARE NOT UPDATED WHEN APPROVAL WORKFLOW IS ACTIVE FOR ACC**
Description	At present columns are not properly aligned and changes are not updated when Approval Workflow is Active. Changes done to account should be updated when approval workflow is active.
Workaround	None

Issue	**INBOUND WEB SERVICE DOES NOT TRIM LEADING & TRAILING SPACES FROM INPUT PARAMETER**
Description	If you pass input parameters with leading and trailing spaces to an inbound web service, the inbound web service does not trim the leading and trailing spaces from the input parameters.
Workaround	None

Issue	**IF USER ADDED DEFER AUTO PAY DATE ON ACCOUNT THEN AUTO PAY WILL NOT WORK**
Description	If you manually add the date in the **Defer Auto Pay Date** field, the automatic payment functionality will not work for the account.
Workaround	None

Issue	**TOTAL OVERDUE AMOUNT IN ACCOUNT & PERSON DETAILS SECTIONS SHOW INCORRECT VALUE**
Description	If you manually include a bill in more than one active overdue process through the user interface, the amount shown in the **Total Overdue Amount** field is incorrect when you search for an overdue process using the Person or Account details in the **Delinquency Central** screen.
Workaround	None

Issue	**SEASONAL ADDRESS ID DOES NOT APPEAR IN THE BILL ROUTINGS TAB OF THE BILL SCREEN**
Description	At present, the seasonal address which is effective at the time of billing is considered for bill routing. You can view the seasonal address details in the **Bill Routings** tab of the **Bill** screen. However, the seasonal address ID does not appear corresponding to the **Address ID** field.
Workaround	None

Issue	**ACCOUNT OVERRIDE ADDRESS IS NOT DELETED WHEN THE BILL ROUTING RECORD IS DELETED**
Description	Once you delete a bill routing record for a person from the **Account** screen where the **Address Source** field is set to **Account Override**, the corresponding account override address is not deleted from the system. You can still view the account override address on the screen.
Workaround	None

Issue	**ERROR OCCURS ON USING A VALUE WITH HYPHEN FOR A CHARACTERISTIC TYPE**
Description	At present, an error occurs on a screen where a characteristic value with hyphen (-) is defined for a characteristic type.
Workaround	None

Issue	**AN ERROR OCCURS ON THE TEMPLATE SEARCH WINDOW**
Description	If you do not specify at least one account selection template while defining a construct, an error occurs indicating that at least one account selection template must be specified. Now, when you search for an account selection template using the **Search** icon corresponding to the respective field, the **Template Search** window appears with the same error (indicating that at least one account selection template must be specified). The system should not display any error in the **Template Search** window.
Workaround	None

Issue	**DISPUTE AMT AT BILL LEVEL INCORRECT WHEN BILL SEGMENT OF PREVIOUS BILL CANCELED**
Description	If a bill segment of the previous bill is canceled and you create a dispute request against an account for the corresponding next bill, the dispute amount displayed against the bill in the **Dispute Details** zone is incorrect.
Workaround	None

Issue	**SAVE BUTTON IS ENABLED WHEN A BILL IS IN THE COMPLETE OR CANCELED STATUS**
Description	The **Save** button in the **Page Title** area on the **Bill** screen should be disabled when a bill is in the **Complete** or **Canceled** status. However, at present, the **Save** button is enabled when a bill is in the **Complete** or **Canceled** status.
Workaround	None

Issue	**APAYCRET BATCH DOES NOT CONSIDER ECR ADJUSTMENTS CREATED ON PENDING BILL**
Description	You can only use an adjustment type where the **Print by Default** and **Impact Next Bill Balance** check boxes are not selected to create transfer adjustment while distributing earnings credit rate. Therefore, an ECR adjustment created against a pending bill is not stamped on the bill. As a result, the **Automatic Payment Creation (APAYCRET)** batch creates automatic payment for the bill without considering the ECR adjustment.
Workaround	None

Issue	**PERCENTAGE (%) WILDCARD NOT ALLOWED IN PERSON NAME WHILE SEARCHING FOR AN ENTITY**
Description	The system does not allow you to specify the Percentage (%) wildcard in the **Person Name** field while searching for any entity across application. At present, the system automatically appends the criteria in the **Person Name** field with the Percentage (%) wildcard and accordingly searches for the entity.
Workaround	None

Issue	**SINGLE MATCH EVENT CREATED WHEN MULTIPLE BILL SEGMENTS OF A CONTRACT ARE NETTED**
Description	At present, the system creates single match event for all bill segments of a contract which are netted. For example, there are two bill segments – BS1 (50$) and BS2 (-50$) of the C1 contract on a bill. In this case, the system nets the BS1 and BS2 because it results in zero contract balance, and then creates single match event for BS1 and BS2.
Workaround	None

Issue	RECOGNITION SCHEDULE NOT GENERATED FOR BX/AX WHEN DRR FOR BS/AD DOES NOT EXIST
Description	There might be situations when you have attached the **C1-REVRECSCH** algorithm to a contract's contract type for which bill segments and adjustments are already generated. Now, if already generated bill segments or adjustments are canceled, the system will generate the deferred revenue recognition for BX and AX even if the deferred revenue recognition does not exist for the corresponding BS and AD. But, the recognition schedule is not generated. You cannot even edit the recognition schedule of a deferred revenue recognition which is created for BX and AX.
Workaround	None

Issue	AUTO PAY ID IS NOT UPDATED WHEN A REOPENED BILL IS COMPLETED
Description	When you reopen and complete a bill, the bill's due date is recalculated. On completing a reopened bill, the system does not check whether there are rule based auto pay instructions for the account which are effective on the latest bill due date. In other words, the system does not update the auto pay ID against the financial transactions in the **C1_FT_EXT** table. In addition, the entries in the **CI_BILL_ACH** table are not updated.
Workaround	None

Issue	CUSTOMER SIMULATION NOT WORKING FOR CUSTOMER HAVING LARGE DATA
Description	If a customer has large number of accounts in its hierarchy or if there are large number of billable charges for distinct price items, the corresponding prospect hierarchy will not be created successfully when you create a deal for the customer using the simulation type as **Customer**.
Workaround	Create a deal for such customers using the simulation type as **Deal**

Issue	**INCORRECT AVG PRICE AND COST CALCULATION WHEN VOLUME/COMMITEMENT HAVE MULTIPLE SQIS**
Description	The system calculates the average price and cost incorrectly when there are multiple SQIs in the SQI-based billable charges.
Workaround	None

Issue	**HIERARCHY UI-APPROVED PRICE ITEMS GETTING UNAPPROVED AGAIN IF RM CHANGES THE PRICING AND DOES THE SIMULATION AGAIN**
Description	If an approver request the submitter to resubmit the deal for approval and if the submitter makes any changes in the pricing for a price item, the system should only change the status of the price item to **Pending for Approval** while simulating the deal. But, the system changes the status of all price items in the deal to **Pending for Approval**.
Workaround	None

Issue	**DEAL END DATE IS NOT CONSIDERED FOR PRICE ASSIGNMENT PRICELIST ASSIGNMENT AND PRODUCT ENROLLMENT**
Description	In the **Apply Back** feature, the system does not use the deal end date while creating price assignments, price list assignments, and product enrollments.
Workaround	None

Issue	**SAME ORASEARCH ZONE APPEARS FOR MULTIPLE BIND VARIABLES WHILE DEFINING CONSTRUCT**
Description	If a template has multiple bind variables and zone is specified for two or more bind variables, the system displays the same OraSearch window for all bind variables when you define a criteria in a construct. It shows the OraSearch zone of the bind variable which is added first in the template.
Workaround	None

Issue	INCONSISTENT DATA LENGTH FOR SRCH_CHAR_VAL AND ADHOC_CHAR_VAL
Description	At present, the **ADHOC_CHAR_VAL** and **SRCH_CHAR_VAL** columns have different column length. The **SRCH_CHAR_VAL** column can only store 50 characters. Therefore, an adhoc characteristic value above 50 characters is truncated and then stored in the **SRCH_CHAR_VAL** column. As a result, erroneous results appear when you search for an entity using a string from an adhoc characteristic value which is beyond 50 characters.
Workaround	None

Issue	ORASEARCH ICON FOR FK REF CHAR TYPE IS DISABLED IN AWB SCREENS
Description	At present, the **Search** icon in the **Characteristic Value** column is disabled when you select a foreign key value characteristic type in the screens which are designed using the Application Workbench (AWB).
Workaround	None

Issue	REST SERVICES DO NOT WORK ON WEBSPHERE
Description	At present, calls to RESTful web service do not work as expected on the WebSphere application server.
Workaround	Use Inbound Web Service (IWS)

Issue	Original and Proposed Revenue Not Calculated Correctly
Description	At present, the original and proposed revenue of a price item are not calculated properly due to some rounding issue in the rate schedule API. Therefore, the average price of each price item, revenue of each account and customer, revenue from each product, division, and deal, and revenue variation calculated in a deal are not accurate.
Workaround	None

Insurance

Issue	**OLD INSURANCE FEATURES ARE NOT TESTED AND VERIFIED IN ORMB VERSION 3.0.0.0.0**
Description	In this release, the new policy data model is introduced. The old policy data model which is accessible to the INADMIN user group is no longer operational. The old insurance features, such as Insurance Control Central, Deferred Revenue Recognition, Account Current, Pay Plan, Group Billing, and List Bill Reconciliation are not tested and verified with the new policy data model.
Workaround	None

Issue	**PERFORMANCE ISSUE WHILE CREATING DEFERRED REVENUE RECOGNITION SCHEDULE**
Description	If there are large number of bill segments and adjustments for which deferred revenue recognition schedule must be generated, the system takes long time to generate deferred revenue recognition schedules.
Workaround	None

Issue	**VALIDATION FOR FIDUCIARY CONTRACT MISSING DURING RECONCILIATION**
Description	While changing the status of the reconciliation object to Ready To Pay, the system does not validate whether fiduciary contract exists for the group account.
Workaround	You need to ensure that group customer has fiduciary contract associated with the account through which payments can be made for the list bills.

Issue	**TWO BILL SEGMENTS GENERATED WHEN REASON CODE EFFECTIVE DATE IS SAME AS BILL SEGMENT START DATE**
Description	When you select the Update option from the Reason Code list and specify the reason code effective date same as the bill segment start date, the system creates two bill segments – one with prorated billed amount and another with prorated reported amount. Ideally, the system should only create one bill segment with prorated reported amount.
Workaround	None

Issue	**UNABLE TO DISTRIBUTE THE REMAINING PAYMENT MANUALLY**
Description	If you have distributed partial payment automatically through the **Payment by Transaction** screen, the system does not allow you to distribute the remaining payment manually.
Workaround	None

Issue	**FOREIGN KEY AND FILE LOCATION CHARACTERISTIC TYPE NOT SUPPORTED IN UI MAPS**
Description	The screens created using the UI map do not support the **Foreign Key Value** and **File Location Value** characteristic types. These screens only support the **Adhoc Value** and **Predefined Value** characteristic types.
Workaround	None

Issue	**CHARACTERISTIC TYPES ARE NOT FILTERED BASED ON THE REASON CODE**
Description	While editing the reconciliation object line, the characteristic types are not filtered based on the reason code that you have selected. Currently, it lists all characteristic types where the characteristic entity is set to **Reason Code**.
Workaround	None

Issue	RECONCILIATION DOESN'T WORK PROPERLY FOR PASS THROUGH BILLABLE CHARGES
Description	In the sample case workflow, the system checks whether the difference between the reported and billed amounts is within the tolerance limit. If so, the system must change the status of the reconciliation object line to **WD-Match**. However, at present, in case of pass through billable charges, the system changes the status of the reconciliation object line to **Manual** instead of **WD-Match**.
Workaround	None

Issue	ERROR OCCURS WHEN YOU RESOLVE A RECONCILIATION OBJECT LINE FROM THE CASE SCREEN
Description	The system allows you to manually resolve a reconciliation object line from the **Case** screen and change the status of the reconciliation object line to **Manual Match**. At present, an error occurs when you click the **Manual Match** button in the **Case** screen.
Workaround	None

Issue	OVERRIDE DESCRIPTION APPEARS INSTEAD OF DESCRIPTION IN THE SOURCE SYSTEM LIST
Description	At present, the override description of the source system appears in the **Source System** list instead of the description when you select the **Policy** option from the **Search By** list in the **Customer 360-Degree View** screen.
Workaround	None

Issue	**UNABLE TO SELECT AUDIT EVENT TYPE IN PRT WHEN UPDATE ALL IS CONFIGURED IN AET**
Description	At present, you cannot use an audit event type of the C1-Membership and C1_PERSON_BO business objects in the Age Based and Tier Based pricing rule types when the **Update All** option is selected in the audit event type.
Workaround	Therefore, we recommend you to select an audit event type of the C1-Membership and C1_PERSON_BO business objects where the **Update All** option is not selected.

Documentation

Issue	**"ERROR 500--INTERNAL SERVER ERROR" - ONLINE HELP IS NOT WORKING**
Description	At present, an error occurs when you access online help for the following screens: • Account Collection Summary • Account Current • COBOL Program • Collection Control Central • Contract Type - Charge Type Mapping • Contract Type - Pay Plan Template Mapping • External Statement • FK Validation Summary • Pay Plan Template • Policy (P&C) • Reason Code • Reconciliation Object • Reconciliation Object Line Status • Unit of Measure
Workaround	None

Issue	ONLINE HELP NOT AVAILABLE FOR SOME SCREENS OR TABS
Description	At present, the online help is not available for the following screens: • Collection Type • Loan • Request In addition, the online help is not available for the following tabs: • Rate Schedule – SQ Rule Tab
Workaround	None

Issue	INDEX ENTRIES NOT DEFINED FOR THE BANKING AND INSURANCE MODULES
Description	At present, index entries are not defined for all topics in the Banking and Insurance modules.
Workaround	None

Issue	CONTENT ADDED IN STEPRESULT AND INFO TAGS IS DISPLAYED IN BOLD
Description	At present, the content added within the STEPRESULT and INFO tags is displayed in bold in the online help. This behavior is observed in Oracle Help and not in SPLHelp.
Workaround	None

Issue	COMMENTS NOT COPIED IN MAIL WHILE SUBMITTING FEEDBACK TO THE DOCUMENTATION TEAM
Description	The feedback entered in the **Comments** text box is not copied to the mail while submitting the feedback form in Oracle Help.
Workaround	You will have to manually add the comments in the e-mail before sending the feedback to the documentation team.

Technical Support

For any technical support, consult with Oracle Support, Oracle Partner, or Oracle Consulting that may be supporting your implementation and upgrade process.