Claim rejection prevention checklist

Print them, pin them up, or share them with your rooms. No sign-up needed.

Claim rejection prevention checklist

- [ ] Membership number, option and dependant code checked at booking
- [ ] Authorisation obtained before admission, with the number on the account
- [ ] Authorisation updated if the procedure changed in theatre
- [ ] Each procedure linked to an ICD-10 code that supports it
- [ ] ICD-10 coded to full detail, with external cause codes for injuries
- [ ] Modifiers checked for multiple procedures, assistants and time
- [ ] PMB conditions coded as PMBs, with DSP rules checked
- [ ] Theatre times and procedure codes shared with assistant and anaesthetist
- [ ] Patient told about expected shortfalls and co-payments before the procedure
- [ ] Claims submitted promptly, well inside the stale-claim deadline
- [ ] Rejections read, corrected and resubmitted every day

- [ ] Remittances reconciled and short payments queried

General guidance only. Scheme rules differ by scheme and option. © Forte Medical Solutions.

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