

Good Samaritan Health & Wellness Center
Policies and Procedures

Subject: AR Claim Denials

Policy #: 3.22.10

Prepared by: Tammi Sorrells, CFO

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3.22.10 AR Claim Denials

Policy: GSHWC's Billing Department will monitor and research claims denied by insurance carriers to determine the cause of the rejection and, if eligible, GSHWC will refile claims for payment

Purpose: To document policy and procedures for the re-filing of denied claims.

Procedures:

1. Denied Claims are worked and refiled as applicable as payments are posted in eClinicalWorks EHR/Practice Management system (eCW).
2. A weekly claims denial report will be generated from eCW. It will be analyzed to determine the specific claims that have been denied, the cause of the denial and any necessary corrections will be made to close the claim.
3. Upon resolution of the issues causing the claim to be denied, the claim will be resubmitted.

Management will review the denials for consideration, and errors will be tracked as a method for determining training needs.