Appeals and Corrected Claims

Appeal is correspondence used to disagree with the health plan's claim payment decision. Most appeals are submitted in a letter form along with corresponding proof to show the claim is in deed payable. Some payers allow providers to use payer forms to submit the information. Appeals can be faxed, mailed or submitted directly via the payer's site.

Corrected Claims claims rebilled with corrected information. There are specific formats per payer when sending a corrected claim. Now, corrected claims can be submitted online with most payers along with documentation. Only send a corrected claim when you realize there is an error on the original submission such as a missing modifier or NPI.

TIP

Make sure your practice management system's fee schedules are updated and correct. Medicare updates the fee schedule yearly for professional codes. The HCPCS codes are updated quarterly. Set a reminder to review your fee schedules to confirm your allowed amounts are correct in the system. Don't leave money sitting on the table. Go after every last cent!