

Work Denials

Last Modified on 05/19/2022 8:17 am EDT

Path: Navigation Form > 835 Form > Working Queue tab

About

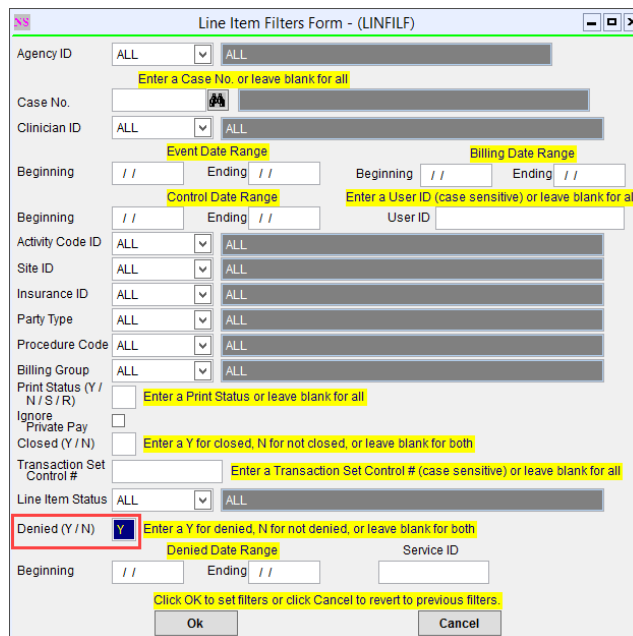
When importing an 835 file in the HIPAA 835 Inbound Form, by default, the **Do Not Post Denied** checkbox is selected. When clicking the **Post** button, the system will post the remittance lines in Records To Post to their matching Line Items. At the same time, the Post column checkboxes for lines that are denied become unchecked, and those lines can be moved to the Working Queue along with the records listed under Records Unable To Post. Follow the steps below to work on your claims that came back as denied.



Warning: If you **do not** have the Do Not Post Denied checkbox selected, the denial is posted as an adjustment in full, and the Line Item will be closed.

Denial Workflow

1. If you are working with an ERA and have the Working Queue open or if you have a denial on an EOB, navigate to the Line Items Filters Form: **File > Billing > Line Items**.
2. In the **Denied (Y/N)** field, type Y.



Line Item Filters Form - (LINFILF)

Agency ID: ALL

Case No.: Enter a Case No. or leave blank for all

Clinician ID: ALL

Event Date Range: Beginning / / Ending / /

Billing Date Range: Beginning / / Ending / /

Control Date Range: Beginning / / Ending / /

User ID: Enter a User ID (case sensitive) or leave blank for all

Activity Code ID: ALL

Site ID: ALL

Insurance ID: ALL

Party Type: ALL

Procedure Code: ALL

Billing Group: ALL

Print Status (Y / N / S / R): Enter a Print Status or leave blank for all

Ignore Private Pay: Enter a Y for closed, N for not closed, or leave blank for both

Transaction Set Control #: Enter a Transaction Set Control # (case sensitive) or leave blank for all

Line Item Status: ALL

Denied (Y/N): Y Enter a Y for denied, N for not denied, or leave blank for both

Denied Date Range: Beginning / / Ending / /

Service ID: / /

Click OK to set filters or click Cancel to revert to previous filters.

Ok Cancel



Note: Use any other fields in this form as necessary to narrow your search.

3. Click the **Ok** button. The Lines Item List is displayed.
4. Select the Line Item you want to work on and click the **Ok** button to open the Line Item Form. The Denied checkbox is selected and the Denied Date, Denial Reason Code, and Description are displayed.

Line Item Form - (LINITML)

Line Item Type: S Case No.: 1033952 Test, Sam Event Date: 05/04/2021 Start Time: 12:00 PM End Time: 12:30 PM Elapsed Time: 00:30 Agency ID: 1 Activity Code ID: 90839

Service ID: 336748 Discipline code: 1 PSYCHIATRIST Physician / CSW: Insurance ID: 1 - AETN Party Type: 3 Other Insurance Billing Date: 05/04/2021

Staff ID: 0159 Prior Authorization: Billing Group: ICD-9 ICD-10: Assignment Accepted: Subscriber No: 12345679 Medicaid Status Codes: Resource Code: Provider ID: 123456789 Medicare Status Code: Other Ins Code: Print Status (Y/N/S/R): N Remarks:

Procedure Code: 90839 In/Outpatient: O Private Pay Statement Date: 07/27/2021 Invoice Date: 07/27/2021 Modifiers: Additional Modifier: Override Current Modifiers: Diagnosis 1: F99 ICD Diagnosis 2: ICD Diagnosis 3: ICD Diagnosis 4: ICD

Place of Contact / Service: 1 Site ID: Living Arrangement: Private Pay Date Posted: Claim Frequency Code: 1 Original Reference Number: ICN1291C258717 Referring Physician Override:

Quantity: 1.00 Billed Amount: \$200.00 Screen Amount: \$200.00 Paid Amount: \$0.00 Adjusted Amount: \$200.00 Current Balance: \$0.00 Approved Amount: \$200.00 Deductible Amount: \$0.00 Co-Pay Amount: \$0.00 Patient Pay Amount: \$0.00

Denied: ☒ Denied Date: 07/28/2021 Denied Reason 1: 99 Billed in error Denied Reason 2: Claim Reference: L1277387C103395217

Notes: Reverse Charge Date: Transaction Set Control #: 9715 Submission #: 3 NDC: 0.00 Unit Of Measure: Send As Primary: ☐ Send Notes on 837 in 2400 NTE: ☐ Send Notes on 837 in 2400 SV101-7: ☐ Submission History: 3 Record(s) found.

Agency: 1 ABC Primary User ID: TRAINING22 Control Date/Time: 08/05/2021 10:40:13 AM Line Item Status: 1 Staff: 0159 Solutions, NextStep Physician / CSW: 0159 Solutions, NextStep

Buttons: Add Edit Delete Exit (Esc) Transactions Transactions Hist Line Item List

- Click the **Edit** button to re-work the claim and prepare it for resubmission, according to the reason for the denial.
- Once you've made your changes, deselect the **Denied** checkbox.
- Change the **Print Status** to a **Y** so that you can pick it up in a batch of claims to send out.
- Select a **Claim Frequency Code** to reflect the reason for resubmission.
- Click the **Save** button.
- If this denial was from an ERA, to remove it from the Working Queue list, select the **Delete** checkbox from the Working Queue window and click the **Delete Selected** button.

Note: You should be checking your Clearinghouse after sending out an 837 file, for front-end clearinghouse rejections.



Those rejections do not make it to the payer and do not come back as a remit. The Line Items for those rejections can be worked in a similar fashion, except they will not have denial information or a reference number since they did not make it to the payer.