

Optometry Coding & Billing Alert

Reader Questions: Duplicate Claims Submission

Question: We have several claims that our payer is taking more than 30 days to process or that the payer has suspended for review. A colleague told me that after 30 days I should resubmit the claim to ensure that the payer received it and will process it. Is this an appropriate solution?

Alabama Subscriber

Answer: You should not submit identical, duplicate claims to payers when you don't think you're getting payment in a timely fashion. Duplicate billing tops most payers' lists of billing errors.

National Government Services (NGS) in New York and New Jersey said it is seeing "a large volume of duplicate claims; specifically for chiropractic, psychiatric, and evaluation and management services." The reminder specifically states that you should not resubmit a duplicate claim if the carrier suspends your claim pending further review.

"Submitting duplicate claims increases processing costs, processing times, and potential for errors," NGS states.

The penalty: Submitting duplicate claims can get you into hot water with your payer. Some insurance companies, including Medicare, consider duplicate billing worthy of fraud investigation.

Best bet: If you have not received payment after 30 days and are concerned about your payment, contact the payer. A quick call to the customer service department or to your payer representative should get you answers, and will avoid future hassles from duplicate billing. Also, review your electronic system logs to confirm that the payer received your claim.

-- Answers to You Be the Expert, Reader Questions, and Build a Better Business reviewed by **David Gibson, OD, FAAO**, practicing optometrist in Lubbock, Texas.