

## Part B Insider (Multispecialty) Coding Alert

## Run Down This Quick Checklist to Pinpoint Denial's Reason

## 1 phone call may solve a simple mistake

When you get a denial for a claim you know Medicare should pay, use this action plan to decipher exactly what you need to do next.

## Put This Checklist To Work For You

If you receive a denied or underpaid claim, you first have to make sure that the denial isn't a result of the way you filed the claim. To do so, follow these steps as outlined by **Barbara Cobuzzi**, director of outreach programs for the **American Academy of Professional Coders**, based in Salt Lake City:

- 1. Read denial codes on explanation of benefits (EOB) to determine the payor's reason for denial or underpayment.
- 2. Audit and review coding documentation.
- 3. Make sure the documentation supports what was billed.
- 4. Determine whether the payor made an error.

If you determine that Medicare made an error, you can write a letter expressing why you think your carrier should pay the claim.

If you find you-ve made a mistake, remember that you don't have to appeal, according to CMS. Just ask your carrier to reopen the claim so you can correct the error.