

Manage Claim Scrubbing

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Claim Scrubbing helps you manage the complex rules and terminology of coding. This feature is used to analyze the claims before submission to the clearinghouse as a solution for catching problem claims, maximizing the potential for your healthcare facility to be paid correctly on the first submission.

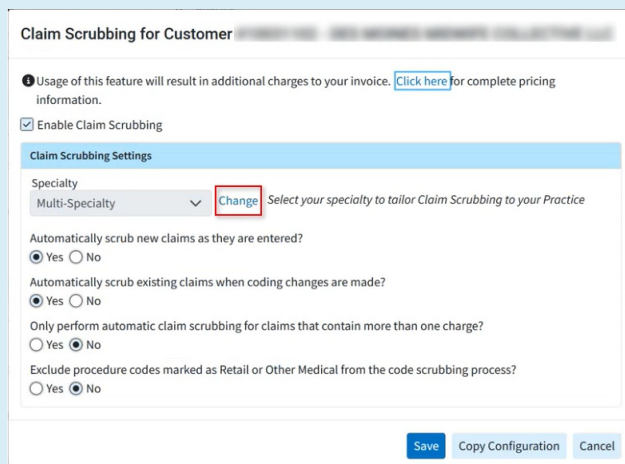
Types of Claim Scrubbing Edits

- **NCCI Edits:** Prevents improper payments of procedures that should not be billed together.
- **CPT/HCPCS Edits:** Code Validation, Age Validation, Gender Validation, Add-On Code Edit, Relative Value Units sequencing.
- **ICD Code Validation:** Date of Service, Specificity, Valid Primary Diagnosis, Duplicate Diagnosis.
- **Modifier Use:** Date of Service, Global Fee Period, Invalid Modifier Use.
- **Medical Necessity:** Proprietary Medical Necessity, Non-Primary Diagnosis should be primary.

If you're the Auth Rep, follow the steps below to enable, configure, or disable claim scrubbing:

1. Select **Account Administration > Services**.
2. Click the **button** next to Claim Scrubbing.
3. The **Enable Claim Scrubbing** box allows you to **enable or disable this service**.
4. Set your **Claim Scrubbing Settings**
 1. Use the **Specialty** drop-down menu to select your specialty in order to get tailored edits for your specific claims.

 Your initial specialty will auto-populate based on what was set in the Practice or Provider section. If you already have claim scrubbing enabled, you can click "Change" to modify your specialty.



2. **Automatically scrub new claims as they are entered through the claim section?**

1. Select **Yes** to have the system automatically scrub all new claims manually entered directly through the applications claim section.

3. **Automatically review and scrub new claims as they are entered through an Interface?**

1. Select **Yes** if you want to automatically scrub new claims created from a DFT message received via the interface.

4. **Automatically scrub existing claims when coding changes are made?**

1. Select **Yes** to have the system automatically scrub claims after a coding change has been applied.

5. **Only perform automatic claim scrubbing for claims that contain more than one charge?**

1. Select **Yes** to have the system automatically scrub claims only if they contain two lines or more.

6. **Exclude procedure codes marked as Retail or Other Medical from the code scrubbing process?**

1. Select **Yes** so procedure codes with the specified types are not included in the Claim Scrubbing process, resulting in misleading errors.

5. **Optional:** Select **Copy Configuration** to copy these settings to another customer account you manage.

1. Check the box next to the customer account(s) to copy the settings to, then click **Copy**.

6. Click **Save**.
