

5 Ways to Improve Provider Acceptance of Claim Edits



1 Transparency is king

KEEP THE LINES OF COMMUNICATION OPEN

to ensure providers aren't confused about your policy or why you're denying a claim.



"Zelis is sensitive to the fact that our clients require a provider notification period when we're making edits that are related to some coding changes that have been released. In fact, we even put together a one-pager that explains what the edit is and how it should fire."

- Craig Van Natta, Vice President, Edit Operations, Zelis

2 Customize wherever possible

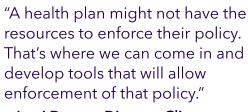
THAT WAY YOUR EDITS ARE APPLICABLE

at the provider level, and you can still adhere to prompt pay guidelines.

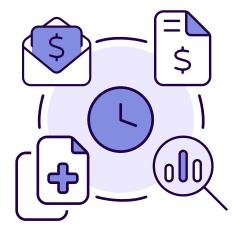
3 A strong defense is a good offense

CITE AND SOURCE YOUR POLICY

on any of the edits that are recommended, so providers understand the edit. If you do not have a policy, Zelis can help you create a clear and concise one!



- Jyoti Dewan, Director, Client Experience, Claims Editing, Zelis



4 Bring in the experts

MAKE IT A BETTER EXPERIENCE

If the provider does have a dispute, make it a better experience by bringing in experts early in the process.

5 Have a clinical coding policy specialist on standby

IDENTIFY GAPS IN YOUR POLICY

An in-depth comparison and gap analysis can help you identify gaps in your policy or gaps in enforcement.

