

Exa® PACS/RIS

Feature Summary

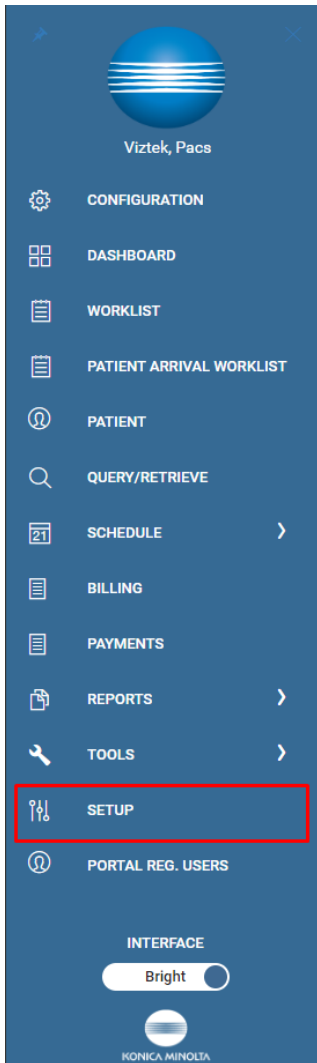
Fix Common Claim Errors

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In this document, we've outlined common claim rejections that you can fix in Exa PACS/RIS before a claim is resubmitted. To do this, you'll use either the Setup or Billing modules.

Setup

Burger > Setup



Exa Billing

Burger > Billing

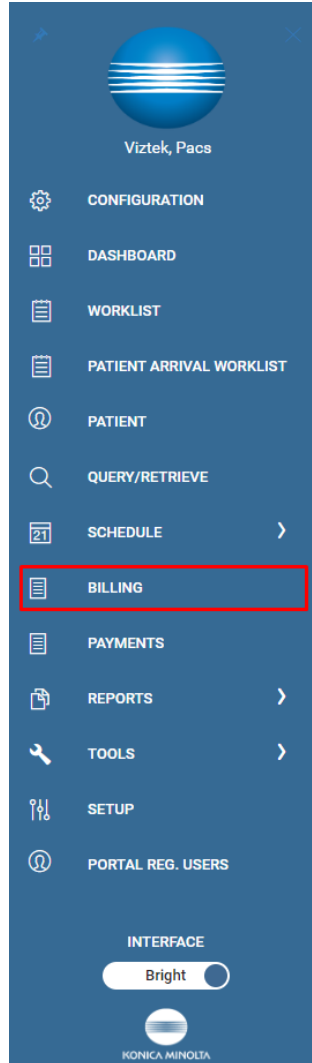


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Diagnosis rejections

Burger > Setup > Office > Scheduling & Codes > Diagnostic Codes.

Diagnostic rejections can occur for various reasons, but if the reason is an invalid diagnosis you can fix it in Setup by adding, editing, or inactivating diagnostic codes. Deleting diagnostic codes affects dependent claims and is not recommended—inactivation is preferred.

The screenshot shows the 'DIAGNOSTIC CODES' section of the software. The navigation bar includes 'FEE SCHEDULE', 'FACILITY FEE SCHEDULE', 'BODY PARTS', and 'DIAGNOSTIC CODES' (highlighted with a red box). The form contains the following fields:

- Code ***: A text input field.
- Description ***: A text input field.
- Code Type**: A dropdown menu.
- Inactive**: A checkbox.

Rendering provider rejections

Burger > Setup > Office > Providers & Resources

Rejection: Missing rendering provider NPI or incorrect NPI.

You can correct NPIs (National Provider Identification) in Setup. NPIs should be verified using the NPES NPI Registry.

The screenshot shows the 'PROVIDERS & RESOURCES' section of the software. The navigation bar includes 'ORDERING FACILITY', 'PROVIDER ORGANIZATION', 'PROVIDER GROUP/LOCATION', 'RESOURCE' (highlighted with a red box), and 'PROVIDER PAY SCHEDULE'. The form contains the following fields:

- Type ***: A dropdown menu (set to 'Referring Provider').
- Code**: A text input field (set to 'DocTest').
- Name ***: A text input field (set to 'Dr Doctor'), followed by 'MI', 'Testing', and 'Suffix' input fields.
- Title**: A text input field.
- NPI No. ***: A text input field (set to '1234567890').
- Taxonomy Code**: A text input field.
- Dr. Office Name**: A text input field.
- SSN**: A text input field.
- Inactive**: A checkbox.

Rejection: Missing rendering provider taxonomy

The use of the taxonomy can vary depending on insurance. When the taxonomy is requested, set it under **Burger > Setup > Office > Providers & Resources**. Open the rendering provider, and then fill in the **Taxonomy Code** field.

The screenshot shows the 'PROVIDERS & RESOURCES' configuration page. The 'Taxonomy Code' field is highlighted with a red box and contains the value '987654321'. Other fields include Type (Provider-Radiology), Code (RAD), Name (Radiologist), NPI No. (123456789), and various insurance-related fields like License No., Medicare Provider No., and Medicaid Provider No.

Procedure code rejections

Burger > Setup > Office > Scheduling & Codes > Procedure Codes

Rejection: Procedure code is invalid for the date of service

Official bodies update procedure codes yearly, and you must update the codes in Exa PACS/RIS to match, otherwise incorrect or outdated procedure codes can appear on claims. You can update codes in Setup. Deleting codes affects dependent claims and is not recommended—inactivation is preferred.

The screenshot shows the 'SCHEDULING & CODES' page with the 'PROCEDURE CODES' tab selected. A table lists procedure codes. The first row is highlighted, showing code '74250' and description 'RADEX SM INT W/MLT SRL FLMS'. A red box highlights the edit icon for this row.

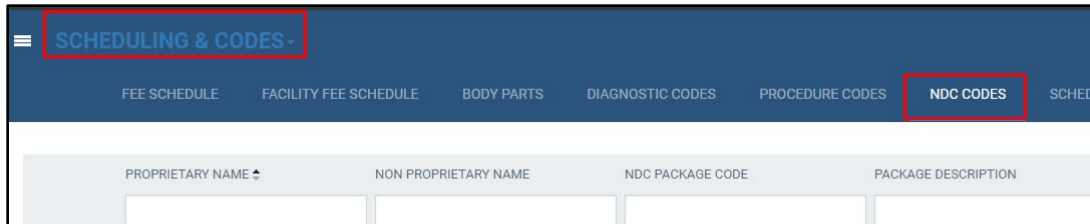
CODE	DESCRIPTION	EXAM PREP INSTRUCTIONS	GLOBAL FEE	DURATION	FAC
74250	RADEX SM INT W/MLT SRL FLMS		0	15	Nuc

NDC rejections

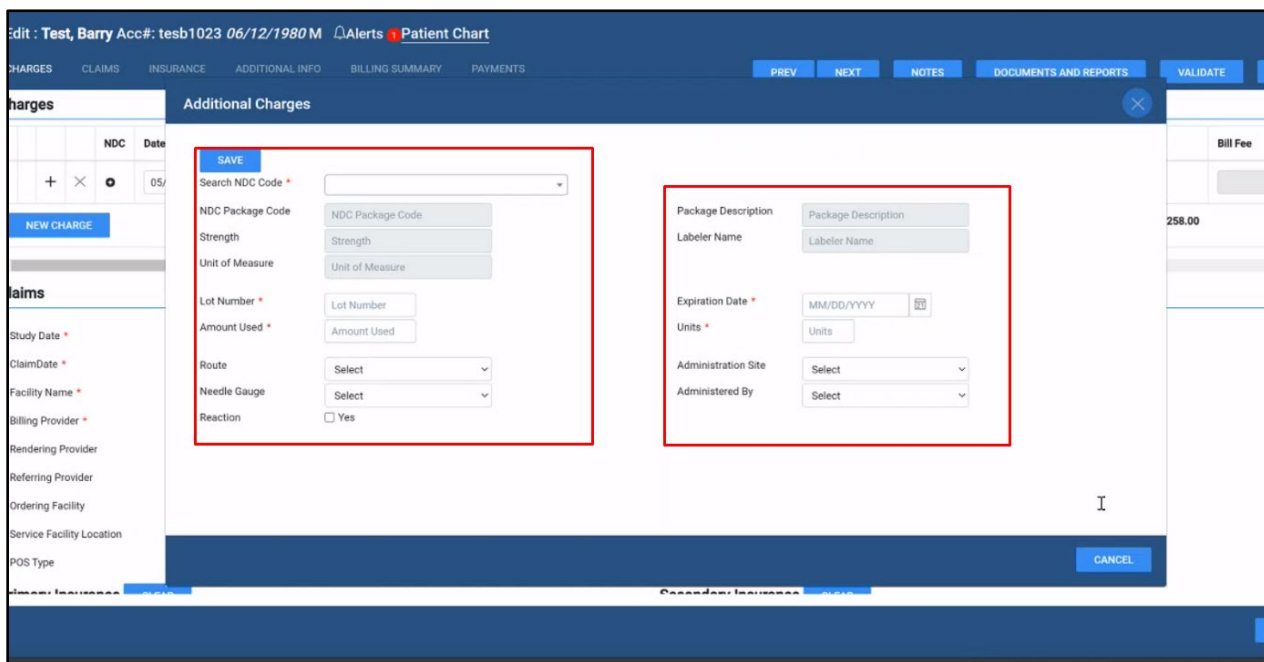
Burger > Setup > Office > Scheduling & Codes > NDC Codes

Rejection: Claim is missing an NDC

An NDC (National Drug Code) rejection indicates that the NDC was not associated with the procedure code when the study was approved.



If your version of Exa Billing is earlier than 1.4.34, associate the NDC to an existing claim at the clearinghouse level. Otherwise, add the NDC code to the claim by selecting the NDC action button on the Charges screen. In the Additional Charges screen, fill in the appropriate dosing information.

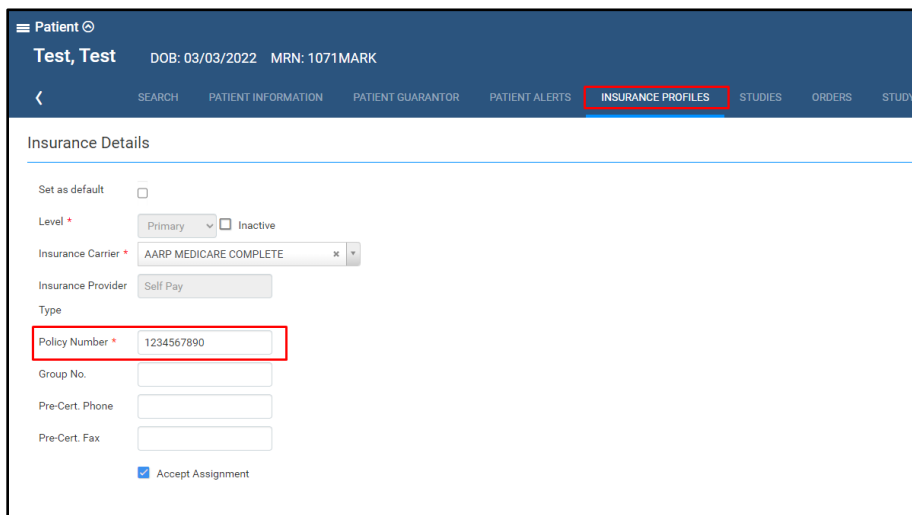


Incorrect subscriber ID

Burger > Patient > Find and Open Patient Chart > Insurance Profiles

Rejection: Subscriber ID incorrect/not found

If there is an error related to a subscriber ID, you can fix it in the patient chart (fixing the ID on an individual claim only updates the individual claim). Enter subscriber IDs using only capital letters if the policy number is alphanumeric. Verifying eligibility and saving a copy in the patient documents tab for future reference is important.



The screenshot displays the 'Insurance Profiles' section for a patient named 'Test, Test' (DOB: 03/03/2022, MRN: 1071MARK). The 'Insurance Details' form includes the following fields:

- Set as default:
- Level: Primary (dropdown), Inactive
- Insurance Carrier: AARP MEDICARE COMPLETE (dropdown)
- Insurance Provider: Self Pay (dropdown)
- Type: Policy Number * 1234567890 (text input, highlighted with a red box)
- Group No.: (text input)
- Pre-Cert. Phone: (text input)
- Pre-Cert. Fax: (text input)
- Accept Assignment

Workers' compensation rejection

Burger > Billing > Claim > Additional Information

Rejection: Missing injury date

Workers' compensation claims require injury dates and documentation. You can enter the injury dates on the claim or the patient chart under Additional Information. Related documents are available in the Documents and Reports tab of the charges.

Resubmitting a corrected claim

Burger > Billing > Claim > Additional Information

Resubmit your claims according to the rejection in the clearinghouse—not all resubmissions need to be corrected claims. If a corrected claim is needed, you can enter the additional information in the Charges screen.

Under **Burger > Billing > Claims > Charges > Additional Information**, enter the original ICN (Internal Control Number) in the Original Ref section, and use Frequency Code 7 to indicate a correction.

This document is intended to assist with common claim errors that can be fixed in Exa and demonstrate the resubmission process. This is not intended for consulting purposes.