

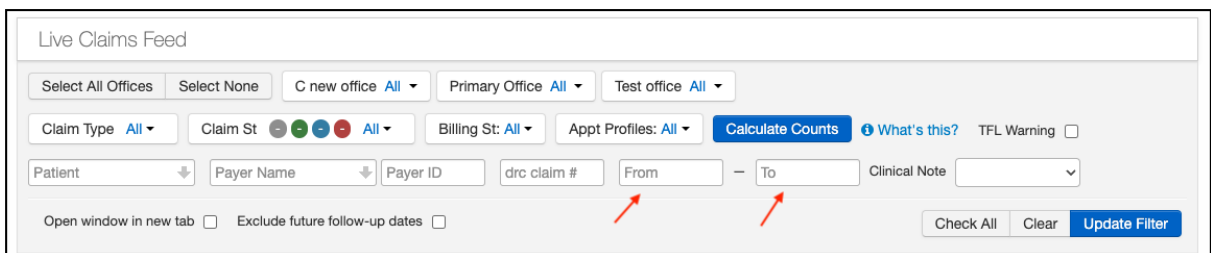
# Why is this Claim Being Rejected?

Last modified on 11/22/2024 3:15 pm EST

Claim rejections from DrChrono's billing system, the clearinghouse, or the payer will be displayed in your Live Claims Feed (LCF) for review, correction, and resubmission.

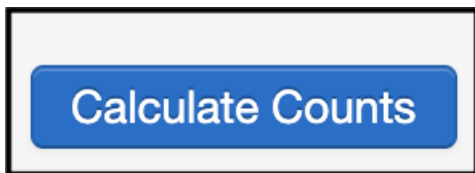
Here's how to identify them:

1. Hover over **Billing** and select **Live Claims Feed**.
2. You will first want to update the date range to ensure you are capturing all claims. The system will default to the past month, but it can be updated by using the date boxes.



The screenshot shows the 'Live Claims Feed' interface. At the top, there are buttons for 'Select All Offices', 'Select None', and three office selection dropdowns: 'C new office All', 'Primary Office All', and 'Test office All'. Below these are 'Claim Type All', 'Claim St' (with a status legend), 'Billing St: All', and 'Appt Profiles: All'. A prominent blue 'Calculate Counts' button is visible. Further down, there are search fields for 'Patient', 'Payer Name', 'Payer ID', 'drc claim #', 'From', and 'To', along with a 'Clinical Note' dropdown. At the bottom, there are checkboxes for 'Open window in new tab' and 'Exclude future follow-up dates', and buttons for 'Check All', 'Clear', and 'Update Filter'. Two red arrows point to the 'From' and 'To' date input fields.

3. Next, press the blue **Calculate Counts** in the middle of the screen. This will have the system count the number of claims you have in each status, making it easier to identify those that need attention.



4. Select the **Claim St** Dropdown, you will need to uncheck **All Statuses** and choose any (or all) of the 3 denial/rejected statuses: Rejected, ERA Denied, or Missing Information.
5. Press on **Update Filter**. The system will display the claims that match your status and date range parameters.

Live Claims Feed

Select All Offices | Select None | C new office All | Primary Office All | Test office All

Claim Type All | Claim St All | Billing St: All | Appt Profiles: All | Calculate Counts | What's this? | TFL Warning

All Statuses  
 ERA Received  
 In Process at Clearinghouse  
 In Process at Payer  
 Payer Acknowledged  
 Coordination of Benefits  
 Other  
 Rejected  
 ERA Denied  
 Not Submitted  
 Missing Information

Patient  
 drc claim #  
 Clinical Note  
 Check All | Clear | Update Filter

Batch Status Change | Export | Display | + Schedule | Internal | PAGE 1

| Claim ID         | Patient | Billed | Allowed | Adjmt  | Ins 1 Paid | Ins 2 Paid | Pt Paid | Ins Bal | Pt Line Item Bal | Claim Bal | Exp Reimbr | Ins 1 Status | Ins 2 Status |
|------------------|---------|--------|---------|--------|------------|------------|---------|---------|------------------|-----------|------------|--------------|--------------|
| No Records Found |         |        |         |        |            |            |         |         |                  |           |            |              |              |
| Totals:          |         | \$0.00 | \$0.00  | \$0.00 | \$0.00     | \$0.00     | \$0.00  | \$0.00  | \$0.00           | \$0.00    | \$0.00     |              |              |

6. Press the blue **Date of service** to go into the billing details screen.

|                          |           |                     |                   |             |          |          |         |          |        |        |           |          |         |        |       |   |
|--------------------------|-----------|---------------------|-------------------|-------------|----------|----------|---------|----------|--------|--------|-----------|----------|---------|--------|-------|---|
| <input type="checkbox"/> | 295537320 | Ashlee (Demo) Smith | 2/23/2024 03:15PM | Test office | \$267.96 | \$173.01 | \$94.95 | \$136.58 | \$0.00 | \$0.00 | -\$109.88 | \$146.31 | \$36.43 | \$0.00 | Aetna | <input type="checkbox"/> Missing Information: Incomplete ClearingHouse Set up |
|--------------------------|-----------|---------------------|-------------------|-------------|----------|----------|---------|----------|--------|--------|-----------|----------|---------|--------|-------|---|

7. In the Billing Detail screen, press on the link that reads **Rejected/Missing Information/ERA Denied**.

| Code/Check Date   | Description | Mods/Posted Date | Service Date | Qty/Min | Dx Pointers | Price | Billed | Allowed | Adjmt | Ins 1 paid | Ins 2 paid | Pt Paid | Ins Bal | Pt Bal | Status/Adj Type |
|---|-------------|------------------|--------------|---------|-------------|-------|--------|---------|-------|------------|------------|---------|---------|--------|-----------------|
| Totals: \$267.96 \$173.01 \$94.95 \$136.58 \$0.00 \$0.00 -\$109.88 \$146.31   |             |                  |              |         |             |       |        |         |       |            |            |         |         |        |                 |
| <input type="checkbox"/> Missing Information: Incomplete ClearingHouse Set up |             |                  |              |         |             |       |        |         |       |            |            |         |         |        |                 |

This will display a pop-up window that will provide details of the rejection reason. Once the rejection reason is known, you will be able to make the appropriate corrections and resubmit the claim, if needed.

To resubmit the claim, just check the box **Resubmit claim** and then press **Verify and Save**.

Resubmit Claim

Verify & Save

The best practice is to review for denials each day. A claim that is sitting in one of these statuses is not being processed by a payer, which means that your reimbursement will be delayed.

We want to make sure you are promptly paid for the great services you provide to patients!

