Intelligent Claim Rejection Messages

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DrChrono has introduced an Al-powered enhancement to make claim rejections easier to understand. For customers using the ePS Clearinghouse, rejection messages will now be displayed in clear, simplified language—helping you quickly identify issues and take action with confidence.

Examples:

Original Rejection Message	Intelligent Rejection Message
THE SUBMITTED NDC CODE IS NOT ELIGIBLE TO BE BILLED WITH THE LISTED HCPCS CODE.;LX 3 SV1 HC J7040 JZ Usage: Only for use to reject claims or status requests in transactions that were accepted with errors on a 997 or 999 Acknowledgement. Rejected.Syntax error noted for this claim/service/inquiry.See Functional or Implementation Acknowledgement for details. Acknowledgement/Returned as unprocessable claim-The claim/encounter has been rejected and has not been entered into the adjudication system.	The NDC code submitted on service line 3 doesn't match the HCPCS code J7040. Please verify the correct NDC for sodium chloride infusion and resubmit with the appropriate NDC-HCPCS combination.
Clm-The Condition Code 1 was not valid on transaction date 20250603. Invalid Data: 1 Clm-The Condition Code 1 is not a valid code. Invalid Data: 1 Category: Acknowledgement/Rejected for Invalid Information - The claim/encounter has invalid information as specified in the Status details and has been rejected. Status: NUBC Condition Code(s)	BCBS NH rejected the claim because condition code \"1\" is invalid. Condition codes must be two characters. Please correct the condition code format and resubmit.
Entity's state license number. Usage: This code requires use of an Entity Code. Entity's state license number. Usage: This code requires use of an Entity Code. (Rendering Provider) Provider reporting has been rejected due to non-compliance with the jurisdiction's mandated registration. To be used for Property and Casualty only. Date of Injury/Illness	Liberty Mutual rejected this claim because it's missing the date of injury, which is required for workers' comp claims. Additionally, the rendering provider's state license number is missing, and the provider isn't properly registered with the jurisdiction for workers' comp reporting.
ACK,REJCTD FOR INVAL INFO-CLAIM,ENCNTR HAS INVAL INFO AS SPCFIED IN STATUS DTAILS AND BEEN REJCTD.:REJECT REASON CODE R PAYER SPECIFIC EDIT SERVICE FACILITY REQUIRED FOR THIS PLACE OF SERVICE CODE	Pioneer Provider Network requires service facility information for the place of service code used. Add the missing service facility details and resubmit the claim.

Clm-Professional FEP claims must be filed directly to the Home Plan. Invalid Data:
e44ZCP25217083730281191FEP Category:
Acknowledgement / Rejected for relational field in error.
Status: Information submitted inconsistent with billing guidelines. Usage: At least one other status code is required to identify th Category: Acknowledgement / Rejected for relational field in error. Status: Claim

FEP claims must be filed directly to the patient's Home Plan, not to Anthem California. Resubmit the claim to the correct Blue Cross Blue Shield plan based on the patient's ID card.

Status: Entitys contract/member number.Usage: This code requires use of an Entity Code.Entity: Insured or Subscriber., Category: Acknowledgement/Rejected for Invalid Information - The claim/encounter has invalid information as specified in the Status details and has been rejected.

submitted to incorrect payer.

Blue Cross Medicare Advantage rejected the claim due to invalid subscriber ID. Verify the member's insurance card and resubmit with the correct ID number.