

Essential CMS-1500 Claim Instructions: Lesson 11

Lesson ten will explore the commonly used blocks on the CMS-1500 claim form and will discuss the types of errors that will delay in the claim being processed. Students will describe how funds are recovered from the payers, and how to enter patient and policyholder information (names, provider names, mailing addresses, and telephone numbers) according to completion guidelines. Students will also learn optical scanning techniques when completing claim forms. Students will be able to successfully report ICD-10-CM, HCPCS level II, and CPT codes according to claim completion guidelines. Students will understand when a signature is required on a claim, the use of the national provider identifier and the national standard employer identifier. They will also understand how secondary claims are processed, common errors that delay processing, and the final steps required in processing. They will finally establish insurance claim files for a physician's practice.

Credit Hours: 30