Electronic Claim Submission Checklist

Follow these guidelines to ensure your practice is set up and ready to send electronic claims successfully. Spending a little extra time ensuring correct setup before submitting claims will save considerable time and effort troubleshooting, correcting and resubmitting rejected, denied, or no-response claims. It will also help ensure your claims get processed and paid as quickly as possible!

Use the Claim Rejections Resource to troubleshoot claim rejections, including a list of the top rejections received by Kareo customers, a description of possible causes, and suggestions for correcting in Kareo.

Practice Setup Checklist

Steps to take both in and out of the Kareo software when initially setting up your practice to bill electronically via Kareo Desktop Application.

1. Verify the following with each payer - for all payers
   - Payer address with 9 digit zip-code
   - Payer ID
   - Credentialing Information - Determine NPI and Tax ID/SSN that each provider bills under for each payer

2. Complete Enrollments
   - Complete and return Payer EDI Enrollment Echosign Form
   - Sign and return any required Payer Agreements
   - Track payer approvals as your receive them

3. Verify Correct Practice Information
   - Name - cannot be more than 35 characters
   - Group NPI and EIN
   - Address with a 9-digit zip code

4. Verify Provider Setup
   - Individual NPI
   - Address with 9-digit zip code
   - Very default billing information (NPI and
EIN/SSN) based on how the provider is credentialed

- Verify Claim Settings Overrides are set up properly if billing information for the provider varies for a specific payer or service location

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### Submitting to a Payer for the First Time

Steps to take prior to claim submission to ensure you are setup and fully prepared to bill to a payer for the first time through the desktop application.

1. **Verify Enrollment approval received from the payer (if applicable)**
   - Received approval email from Kareo Enrollments or directly from the payer

2. **Verify Insurance Setup in Kareo**
   a. **Insurance Plan Information**
      i. Address with 9-digit zip code
   b. **Insurance Company Information**
      i. Verify correct Insurance Program is selected (e.g. selecting “CI” for a Medicare payer will result in a rejection)
      ii. **Electronic Claims Tab**
         - Ensure “This payer accepts electronic claims” box is checked
         - Ensure the correct Clearinghouse is selected
         - Ensure the correct Payer ID is selected
   iii. **Practice Setting Tab**
      - Ensure Enrollment Status is set to “Enrolled in live mode”
      - Verify enrollment has been approved by the payer first (if applicable)
      - Ensure the “Disable electronic claims for this payer” box is unchecked
      - If billing to this payer as secondary, ensure the “Use electronic billing when this payer is secondary” box is checked
Claim Submission Best Practices

Steps to take prior to claim submissions for all patients. Building a workflow in your practice that incorporates these steps will help reduce rejections and get you paid more quickly.

1. **Verify Patient Information**
   - Copy or scan patient insurance card (front and back) and ID

2. **Verify Patient Information**
   a. Attach copy of patient’s insurance card and ID to patient record
   b. Verify the patient's name, date of birth, and address with 9-digit zip code against the patient's ID
   c. Verify the patient's policy against the insurance card
      i. Insurance Type - If billing to Medicare as secondary
      ii. Policy #
      iii. Effective Start date - cannot be a date after the Date of Service
      iv. Insured (if applicable)

3. **Run Eligibility Check**