

Anesthesia denial prevention checklist

Most denials come from a handful of fixable causes. Catch them at the front end and your team spends far less time on appeals.

Before the claim

- ☐ Eligibility checked for the date of service
- ☐ Correct primary and secondary insurance recorded
- ☐ Provider enrolled with the payer on the date of service
- ☐ Authorization or referral number on file where needed

On the claim

- ☐ Anesthesia code matches the procedure performed
- ☐ Diagnosis supports the procedure and any MAC
- ☐ Staffing modifier matches the record
- ☐ Time reported the way the payer requires
- ☐ Separately billed blocks and lines carry the right modifiers

After the claim

- ☐ Rejections fixed and resent within days
- ☐ Denials sorted by reason every month
- ☐ Top two causes fixed at the source
- ☐ Nothing allowed near its timely filing limit

Notes