• AGING REPORTS (359/459 REPORTS)
  o REVIEW CLAIMS AND DETERMINE IF REBILLABLE. USE PAYER PORTALS, KY MMIS, ERAS, ETC.
    *WORK REPORT TIMELY*
• REVIEW DENIAL REPORTS BY PAYER AND WORK DENIED CLAIMS TIMELY (REPORTS: 578, 678, 878, ETC.)
  o MAKE CORRECTIONS TO PEF
  o REBILL USING CDP OR PAYER PORTALS, IF AVAILABLE.
• CDP BILLING REJECTION REPORT (306 REPORT)
  o WORK REPORT TIMELY AND THE CLAIMS WILL BILL OFF AT NEXT BILLING DATE AND ERROR WILL DROP OFF REPORT
• CHECK CLEARINGHOUSE AND PAYER REJECTION/ACCEPTANCE REPORTS (277 REPORT)
  o WORK ALL REJECTIONS DAILY
• REVIEW ALL PAID CLAIMS REPORTS (432 REPORT)
  o MAKE ADJUSTMENT/WRITE-OFFS FOR LEGITIMATE UNPAID AMOUNTS. NEED TO INVESTIGATE OTHER UNPAID AMOUNTS BEFORE MAKING ADJUSTMENTS.
  o POST THE PAID CLAIMS TO ACCOUNTS RECEIVABLE (A/R) IF NOT AUTO-POSTED BY CDP
• WORK MEDICAID APPLIED/PENDING REPORT DAILY (375 REPORT)
• INTAKE
  o DURING APPOINTMENT CALL REMIND PATIENT TO BRING ALL INSURANCE CARDS
  o MAKE COPIES OF ALL CARDS
  o DOUBLE-CHECK DATA ENTRIES INCLUDING SPELLING
  o DO ELIGIBILITY CHECKS PRIOR TO APPOINTMENT DATE USING APPOINTMENT LISTING, IF FEASIBLE.
• ROUTINE ACTIVITIES
  o CHECK 319 DAILY REPORTS FOR MISSING PEFS ON 850 AND SUBSEQUENT WEEKLY BILLING INVOICE REGISTERS (308 SERIES REPORTS)
• REPORT POTENTIAL STATEWIDE PAYMENT/DENIAL ANOMOLIES TO THE LOCAL HEALTH OPERATIONS (LHO) BILLING ANALYST BY EMAILING AT LOCALHEALTH.HELPDESK@KY.GOV. DO NOT PROVIDE PHI OR OTHER HIPPA INFORMATION IN YOUR EMAIL.