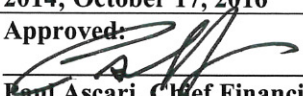





COBB COUNTY COMMUNITY SERVICES BOARD
DOUGLAS COUNTY COMMUNITY SERVICES BOARD

Page 1 of 1

Policy # 2514	Electronic Billing Procedures
Origination Date: May 1997	
Revision Date: March 2004; March 11, 2008; August 11, 2010; Sept 21, 2012	
Reviewed Date: March 2005; March 15, 2006; March 9, 2007; April 2, 2009; Oct. 5, 2013; November 21, 2014; October 17, 2016	
Approved:	
 Paul Ascari, Chief Financial Officer	 Bryan G. Stephens, Interim Executive Director

POLICY:

It is the policy of the Cobb County Community Services Board and the Douglas County Community Services Board to provide accurate, timely and structured guidelines that meet Federal and State compliance standards when filing third party insurance claims.

PROCEDURE:

Claims are generated based on all scheduled appointments that are kept. The Cobb County Community Services Board and Douglas County Community Services Board will electronically submit claims at least once a week to meet timely filing guidelines with certain payers and regulate the flow of cash receipts.

A. The following steps should be followed to process a Electronic Claim:

WEEKLY

- All billing transactions will be reviewed, and edited for necessary corrections, prior to submitting the claims.
 - All billing transactions that do not pass edit checks will be backed out of claim batch review and processed at a later time.(No later than a week)
- B. If billing transactions are placed on hold, or if conflicting information occurs, the discrepancy should be resolved in the following manner:
- A weekly error report is generated for site managers to review. Corrections and research are communicated by department managers to appropriate clinicians.
 - All errors should be corrected by the end of each week.
 - The claim remains on hold until resolved or placed into another billing status or adjusted.

Neither the Cobb County Community Services Board nor the Douglas County Community Services Board will alter any supporting documents after they are signed and dated by the physician or clinician. Any corrections that are a result of an error will be documented in an addendum to that clinical note.