



1. Intake & Prep

Clearinghouses are contracted for Level 1 editing only; the acceptance of "not clean claims" causes payment errors.

Claims systems preprocessor selects incorrect provider record when multiple matches exist.



2. Enrollment & Eligibility

Retroactive member terminations cause claim payment errors.



3. Provider Contracts

Rate complexity and delayed provider fee schedule and contract loads impact auto adjudication process.



4. Benefits

Incongruence in benefit plan design and system configuration cause errors (e.g., copays for diagnostic and therapeutic radiology).

Core Claims Process



5. Authorizations

Bypassing authorizations to focus on issuing payment.



6. Networks

Delays in CMS fee schedule and rate changes cause processors and systems to apply incorrect rates.



7. Post-Adjudication

Overpayment assessments trigger adjustments re-work retro >2 years.

CMS fee schedule updates that are retroactive cause overpayment.