

Select

Provider

5. Authorizations

Check

Eligibility

Bypassing authorizations to focus on issuing payment.

Intake &

Prep

6. Networks

\$

Determine

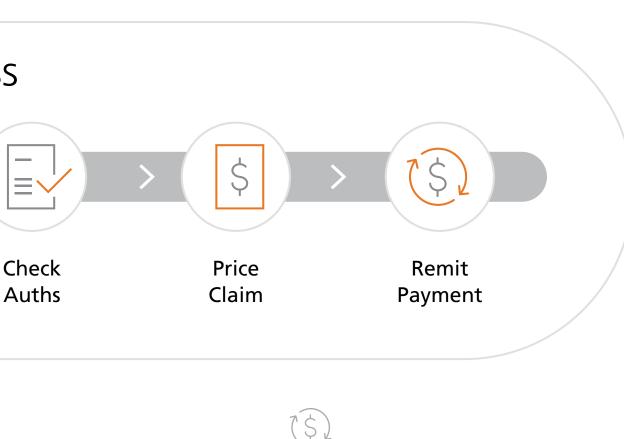
Benefits

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



4. Benefits

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



7. Post-Adjudication

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

CMS fee schedule updates that are retroactive cause overpayment.