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**Note:** This is a contracted feature. Contact [solutions@officepracticum.com](mailto:solutions@officepracticum.com) to learn about implementing this in your Practice.

OP is excited to announce its Integration with Alpha II ClaimStaker, a comprehensive **Claim Scrubber** Software. ClaimStaker verifies encounter and claim data from the payer's perspective and allows for corrections prior to filing. OP has integrated with ClaimStaker to help get cleaner claims out the door for faster payments, fewer denials, and improved cash flow.

## How to Enable Automatic or Manual Claim Scrubbing

### Enable Automatic Claim Scrubbing

When automatic claim scrubbing is enabled, the process of scrubbing claims will happen as soon as the user clicks on the **Save** or **Save + Queue** button in the Add/Edit Charges window for non-daysheeted claims, and the **green checkmark** in the Edit Archived Claim Transactions window for daysheeted claims.

1. Navigate to **Global Preferences > Billing tab > Superbill tab > Claim Scrubbing Settings section**.
2. Check **Require Claim Scrubbing**.

### Enable Manual Claim Scrubbing

When automatic claim scrubbing is disabled, claims must be scrubbed manually. Users can pick and choose which claims to scrub using the **Scrub Claim** button in the Add/Edit Charges window and the Edit Archived Claim Transactions window.

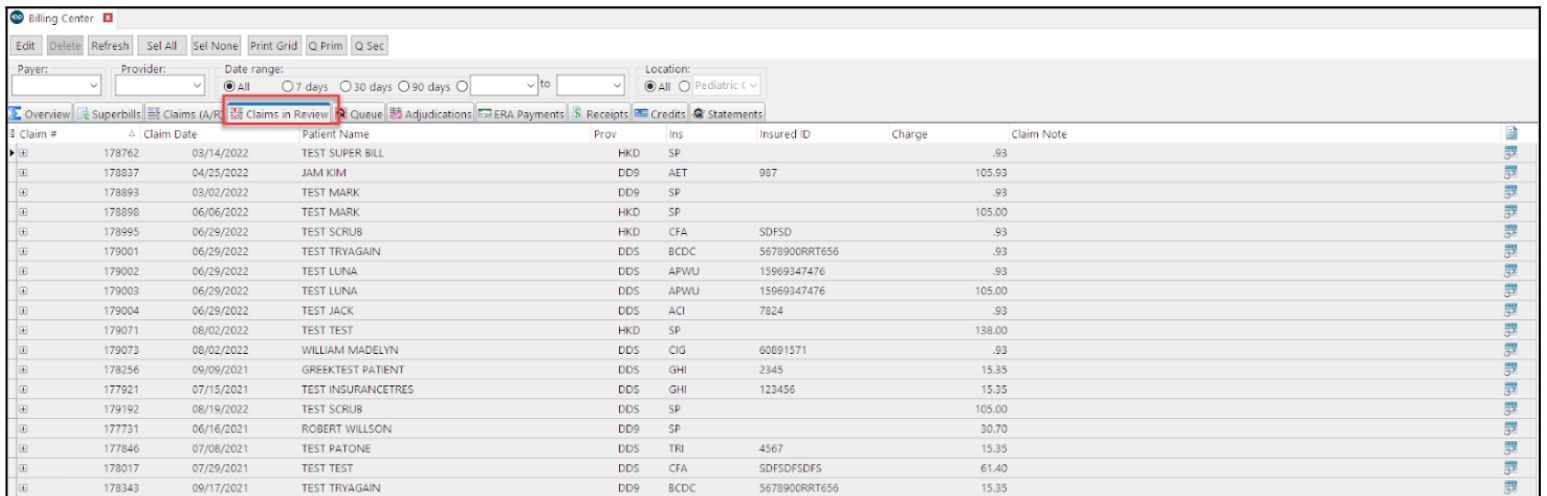
3. Navigate to **Global Preferences > Billing tab > Superbill tab > Claim Scrubbing Settings section**.
4. Uncheck **Require Claim Scrubbing**.

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## How Does the Claim Scrubber Work?

## How does the Claim Scrubber Work?

When superbills are converted, the integrated real-time claim scrubber will automatically review the claim for submission errors, when the global setting is turned on. If a claim has a submission error, the claims will be moved to a new tab in the billing center called “Claims in Review”. Claims will fall off the Claims in Review tab once they are edited, re-scrubbed, and return no errors. In the event that a claim with errors requires transmission to the payer without correcting. The following security permissions will allow users to override the error message and send the claim to the transmission queue: **Billing\_ClaimReview\_Queue & Billing\_Manage\_Queue.**



Claim #	Claim Date	Patient Name	Prov	Ins	Insured ID	Charge	Claim Note
178762	03/14/2022	TEST SUPER BILL	HKD	SP			.93
178837	04/25/2022	JAM KIM	DD9	AET	987		105.93
178893	03/02/2022	TEST MARK	DD9	SP			.93
178898	06/06/2022	TEST MARK	HKD	SP			105.00
178995	06/29/2022	TEST SCRUB	HKD	CFA	SDFSD		.93
179001	06/29/2022	TEST TRYGAIN	DDS	BCDC	567890RRT656		.93
179002	06/29/2022	TEST LUNA	DDS	APWU	15969347476		.93
179003	06/29/2022	TEST LUNA	DDS	APWU	15969347476		105.00
179004	06/29/2022	TEST JACK	DDS	ACI	7824		.93
179071	08/02/2022	TEST TEST	HKD	SP			138.00
179073	08/02/2022	WILLIAM MADELYN	DDS	CIG	60891571		.93
178256	09/09/2021	GREEKTEST PATIENT	DDS	GHI	2345		15.35
177921	07/15/2021	TEST INSURANCETRES	DDS	GHI	123456		15.35
179192	08/19/2022	TEST SCRUB	DDS	SP			105.00
177731	06/16/2021	ROBERT WILLSON	DD9	SP			30.70
177846	07/08/2021	TEST PATONE	DDS	TRI	4567		15.35
178017	07/29/2021	TEST TEST	DDS	CFA	SDFSDSDFSDFS		61.40
178343	09/17/2021	TEST TRYGAIN	DD9	BCDC	567890RRT656		15.35

## How are the errors reported?

Errors are delivered with a report called the **Claims in Error** report. This report can be located at the claim level, within the new **Scrub Report** tab, allowing users to make any edits before re-saving and re-scrubbing the claim. Claims in error report can also be accessed from the Billing Center within the **Claims in Review** and **Claims A/R** tab by clicking the report icon found in the report column.

### Claims in Error Report

Sorted by Claim Sequence Ascending Order

**Submitter ID:** [REDACTED]  
**Job ID:** [REDACTED]  
**File Name:** [REDACTED]  
**File Submitter Name:** [REDACTED]  
**Processed Date -** [REDACTED]  
**Duration (seconds):** [REDACTED]

Claim ID	Medical Record Number	Patient Account	Patient Name (DOB)	Provider	Destination Payer	Billed Amount	Facility
000001	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	Commercial [39026] UMR	\$114.00	[REDACTED]

Edit Severity	Edit #	Edit Description
Actionable	CW3514	(ICD) This ICD-10-CM diagnosis code reflects an "unspecified" laterality. Another diagnosis code for the same condition is available that identifies laterality. Review the documentation for the specific anatomic site of the diagnosis. Use of the more specific diagnosis code may result in greater success with quality reporting. Diagnosis - H04.539

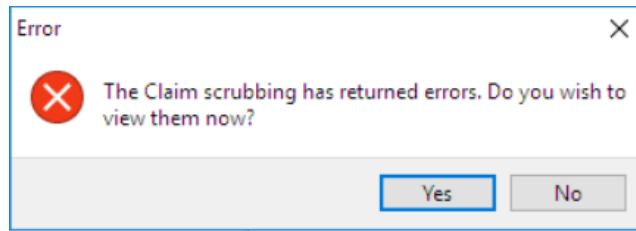
Seq	DOS From	DOS To	POS	CPT Code	Modifiers	Units	Diagnoses	Billed	Edits
01	12-20-2022	12-20-2022	11	99213		1	K42.9 Z09 H04.539	\$114.00	

Code Type	Code Description
CPT	99213 OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES A MEDICALLY APPROPRIATE HISTORY AND/OR EXAMINATION AND LOW LEVEL OF MEDICAL DECISION MAKING. WHEN USING TIME FOR CODE SELECTION, 20-29 MINUTES OF TOTAL TIME IS SPENT ON THE DATE OF THE ENCOUNTER.
ICD	K42.9 UMBILICAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE
ICD	Z09 ENCOUNTER FOR FOLLOW-UP EXAMINATION AFTER COMPLETED TREATMENT FOR CONDITIONS OTHER THAN MALIGNANT NEOPLASM
ICD	H04.539 NEONATAL OBSTRUCTION OF UNSPECIFIED NASOLACRIMAL DUCT

## Scrubbing Automatically

The **Add/Edit Charges** Window will automatically close if the claim is **processed without errors** and the claim will be sent to the transmission queue.

The **Add/Edit Charges** Window will **not** close if the ClaimsStaker **returned errors**. The user will be alerted with a pop up message, stating the Claim has scrubbing service returned errors:



- Clicking **YES**: Scrub Report tab will automatically open in the Add/Edit Charges screen to view the scrubbing results.
- Clicking **NO**: The Add/Edit Charges screen closes and we will be able to **review in the Claims in Review tab of the Billing Center**.

**Note:** If a claim returns errors and the user has clicked **Save + Queue**, the claim will not be queued. The user will have to review the errors and if they have the security permission, queue the claim from the Claims in Review tab.

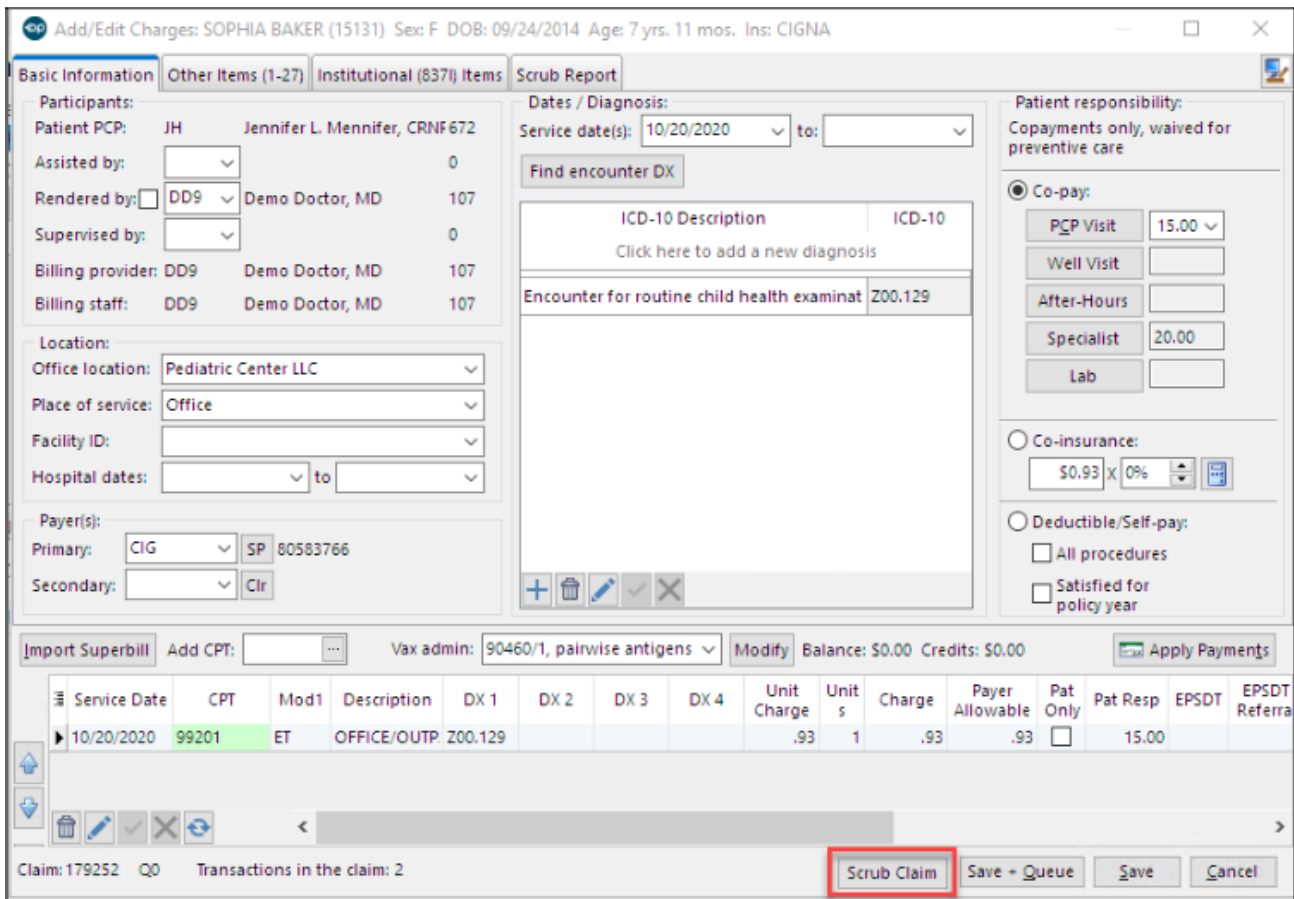
Claims will remain in the **Claims in Review** tab until returned without errors, or overridden & queued errors. Permissions are required to override.

## Scrubbing Manually

The user will be able to press the scrub claim button to trigger the scrubbing process without sending the claim to the transmission queue.

**Note:** The **Save**, and **Save + Queue** button remain the same as it works today.

When **manually** scrubbing the claims, the user will **receive a pop up for both a clean claim and claim that has errors**, alerting the user of the outcome of the scrubbing process.



OP Add/Edit Charges: SOPHIA BAKER (15131) Sex: F DOB: 09/24/2014 Age: 7 yrs. 11 mos. Ins: CIGNA

Basic Information | Other Items (1-27) | Institutional (837) Items | Scrub Report

Participants:  
 Patient PCP: JH Jennifer L. Mennifer, CRNF 672  
 Assisted by: [ ] 0  
 Rendered by:  DD9 Demo Doctor, MD 107  
 Supervised by: [ ] 0  
 Billing provider: DD9 Demo Doctor, MD 107  
 Billing staff: DD9 Demo Doctor, MD 107

Dates / Diagnosis:  
 Service date(s): 10/20/2020 to: [ ]  
 Find encounter DX  
 ICD-10 Description ICD-10  
 Click here to add a new diagnosis  
 Encounter for routine child health examinat Z00.129

Patient responsibility:  
 Copayments only, waived for preventive care  
 Co-pay:  
 PCP Visit 15.00  
 Well Visit [ ]  
 After-Hours [ ]  
 Specialist 20.00  
 Lab [ ]  
 Co-insurance:  
 \$0.93 x 0%  
 Deductible/Self-pay:  
 All procedures  
 Satisfied for policy year

Location:  
 Office location: Pediatric Center LLC  
 Place of service: Office  
 Facility ID: [ ]  
 Hospital dates: [ ] to [ ]

Payer(s):  
 Primary: CIG SP 80583766  
 Secondary: [ ] Clr

Import Superbill Add CPT: [ ] Vax admin: 90460/1, pairwise antigens Modify Balance: \$0.00 Credits: \$0.00 Apply Payments

Service Date	CPT	Mod1	Description	DX 1	DX 2	DX 3	DX 4	Unit Charge	Units	Charge	Payer Allowable	Pat Only	Pat Resp	EPSDT	EPSDT Referral
10/20/2020	99201	ET	OFFICE/OUTP.	Z00.129				.93	1	.93	.93	<input type="checkbox"/>	15.00		

Claim: 179252 QO Transactions in the claim: 2 **Scrub Claim** Save + Queue Save Cancel

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## Claim Scrubber Impact on Other Billing Areas

Three new claim status histories have been added to OP to enhance the claim scrubbing working

Users will see these claim statuses in the Claim Status History grid to help track the claim along the process.

1. **SP (Scrub Passes)**: Scrub Passes will appear when the claim has been scrubbed and does not return any errors.
2. **SNR (Scrub Needs Review)**: Every time a claim is scrubbed and returns an error report, an entry of SNR will appear. If the claim is scrubbed 4 times, there will be 4 entries of SNR.
3. **SBE (Scrub Bypassed without Edits and Queued)**: Scrub Bypassed without edits and queued will appear when the user who has the security permissions has queued the claim without making the recommended edits.

## Claims A/R Tab

A new **Claims in Error** column has been added to the Claims A/R tab and will display a red  when the claim is flagged for review. Users will not be able to queue those claims from the A/R tab. They can only be queued from the Claims in Review tab. Details on the errors can be viewed by clicking on the **report** icon  found in the report column.

## Claims in Review Tab

Claims with unresolved errors will be found in the **Claims in Review** Tab. Claims will remain here until edited, re-scrubbed and resubmitted. Both Daysheeted and Non Daysheeted claims will be found within this tab.

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