Denial Analysis Report

07/24/2024 1:45 pm EDT

This tool helps you to identify the denial trends for your practice so you can identify root causes and set a workflow to avoid denials in the future.

- Navigate to Billing > Denial Analysis

As with other areas of the system, you have several options to view the information.

- **Filter by** - This allows you to select between appointment, check, or posted date.
- **Date Range** - This allows you to select a date range including to-date, quarters, and a custom range that you can select.
- **Patient** - Allows you to select an individual patient to view
- **Office** - Allows you to select an individual office or all of them
- **Room** - Allows you to select an individual office within an office or all of them

You also have the option via the checkboxes to include unbilled transactions only, and whether you want to see claims that currently have a zero balance.

In the **Summary** tab, you can find the top denial reasons (red), the top codes that are getting denied (blue), and the top insurance payers with the most denied claims (green).

Outstanding Denials
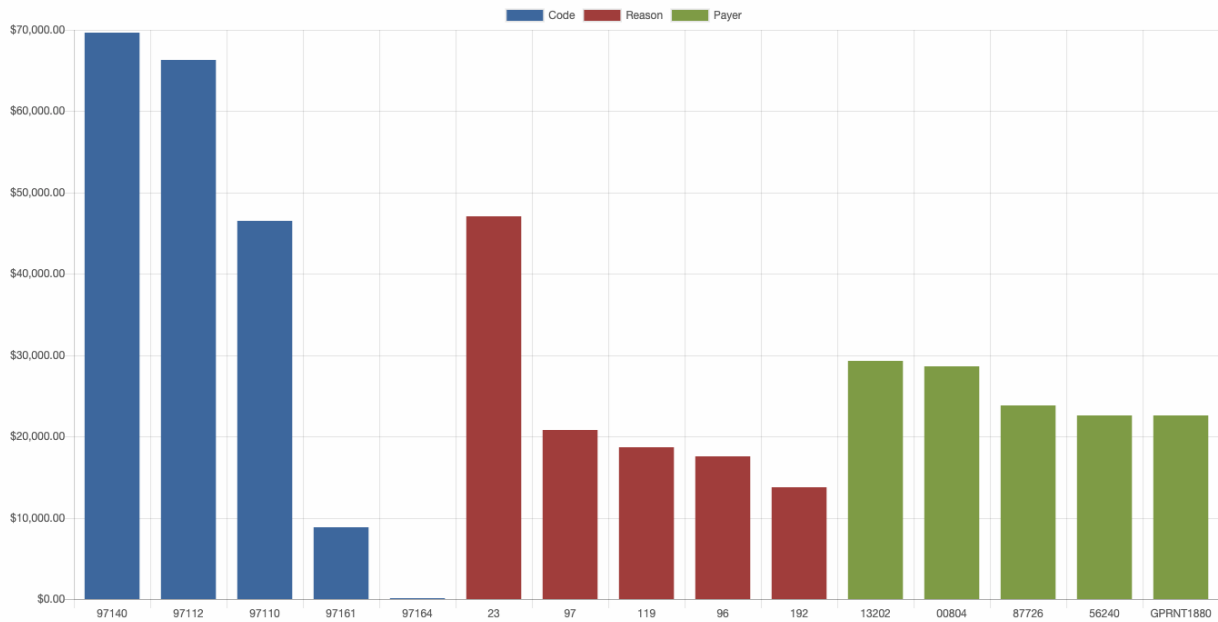
In the **Details** tab, you will see additional details regarding the denials. You can choose to view them in several different ways including by reason code, by CPT/HCPCS code, or by insurance.

If you select to view by reason code, it will appear like the image below, sorted by 30-day increments. If you would like to dive deeper into which patients make up that amount, just click on the blue dollar amount and you will be able to view that information. From there, you can also click on the blue date of service to be taken to the Live Claims Feed to view the individual claim closer.

Reason Code	0—30	30—60	60—90	90—120	120+	Total	
Total:	$0.00	$0.00	$0.00	$0.00	$191,449.14		$191,449.14
119	–	–	–	–	$18,684.81		$18,684.81
133	–	–	–	–	$5,645.00		$5,645.00

In the **Denial History** tab, you can see total denials by month by dollar value.
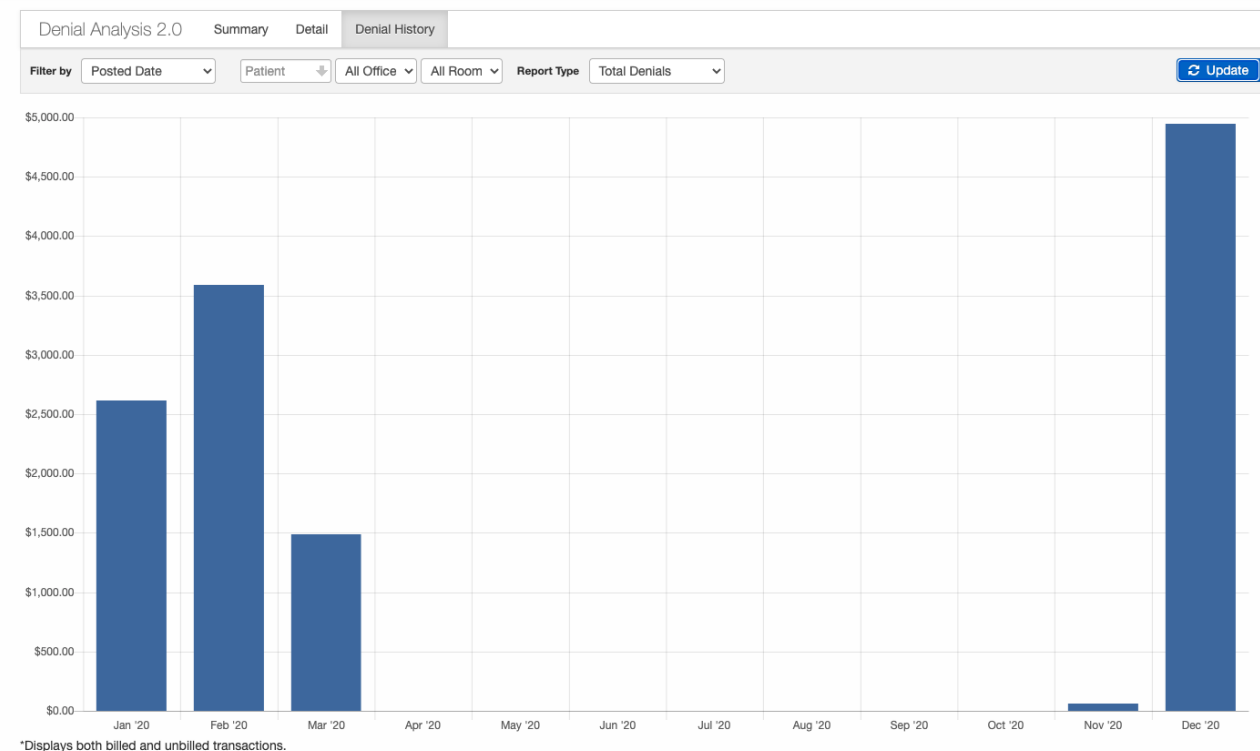
Calculations

- Summary Page
  - The blue bar displays the dollar amount sum of denials for the top five CPT codes within the date type, date range and patient specified.
  - The red bar displays the dollar amount sum of denials for the top five Claim Adjustment Reason Code (CARC) within the date type, date range and patient specified.
  - The green bar displays the dollar amount sum of denials for the top five Payer ID Codes within the date type, date range and patient specified.

- Detail Page
  - Each row in the Details table represents a different reason code/CPT/HCPCS code/payer
  - In each column, the number produced is the dollar value sum of denied claims that are 0-30, 31-60, 61-90, 91-120, and 121+ days old. This number is calculated from the date type (Posted Date, Check Date, Appointment Date) and date range you selected.

- Denial History Page
  - The bar graph pulls information based on your choice of date type: Posted Date, Check Date, and Appointment Date. The graph is then created from the dates of your denials, calculating the month-by-month sum.
  - Each bar is the dollar value sum of denials that fall within that particular month.
  - The percentage is the percentage change from the previous month, calculated with the formula: Current Month Total / Preceding Month Total - 1.
  - The line graph pulls information based on your choice of date type: Posted Date, Check Date, and Appointment Date. The graph is then created from the dates of your denials, calculating the month-by-month percentages relative to your total collections.
  - Total Denials
  - Denial Percentage