

### 3 Denials Prevention Best Practices

Now more than ever, it is critical for revenue cycle leaders and physician practices to determine ways to maximize cash flow. The pandemic has brought complexity to billing and new challenges to the forefront. For that reason, it is crucial to focus on denials prevention. Below are the 3 best practices to prevent and reduce denials proactively.

- **Educate and Communicate**
  - Front offices and back offices need to know their role and responsibility in the practice and operations. Communication is key. [Refer to this summary of the responsibilities](#) tasked to your practice team and to the OP RCM team.
  
- **Verify Patient Insurance Prior to Service**
  - Leverage your clearinghouse insurance verification feature to properly obtain patient's eligibility and benefits.
  - Address any coordination of benefits (COB) issues, prior to the visit.
  
- **Document Appropriately and Clearly**
  - Ensure that the appropriate ICD 10 and CPT codes are utilized. For the 2021 coding changes training, refer to [2021 Office Visit E/M Coding & Documentation Changes Resource Center](#).
  - Review the clinical templates within OP to ensure these are current.

Denials prevention requires all hands on deck. Our goal as partners is to contribute to reducing the burden of denials. This will ultimately help clear the way for providers to focus on what is most important: caring for your patients.