

# PROVIDER Blue

## Importance of Proper Coding

Correct coding is critical to ensure we apply benefits and reimbursements correctly to claims. We encourage you to strive for the highest level of detail in your coding when submitting claims. This applies to procedure and diagnosis codes.

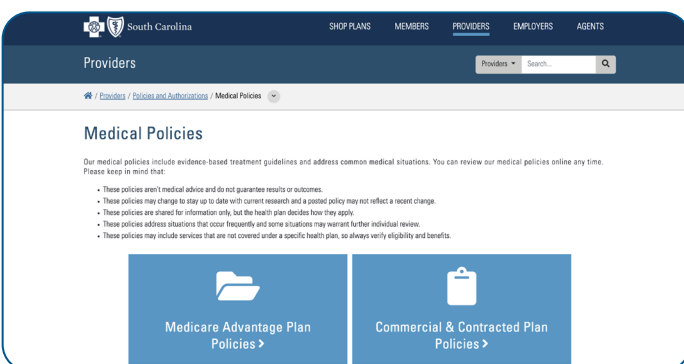
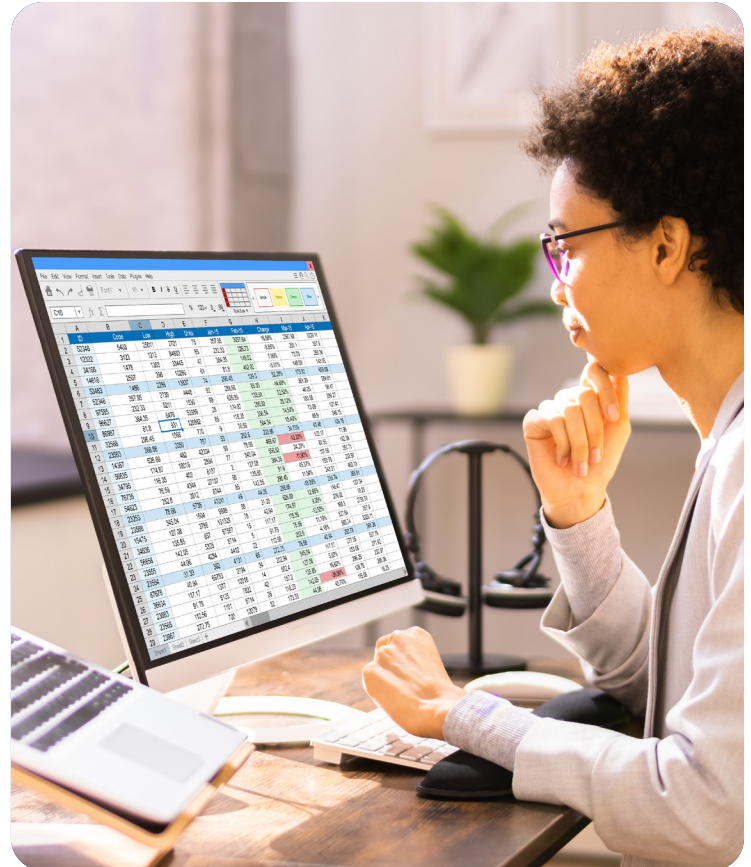
At the time of service, you may not have specific codes. It is best to determine what the condition is or what exactly is being treated before coding and submitting the claim.

Benefits of using specific codes include:

- Accurate reimbursements.
- Fewer corrected claims.
- Quicker claims processing.
- Fewer denials.

To ensure claims follow the correct coding guidelines:

- Consult with your business partners who code and bill on your behalf to ensure they use proper coding.
- Ensure all staff are current on correct coding guidelines.
- Review your remittances, locate affected claims, and make the necessary changes.



## Medical Policy Updates

BlueCross frequently revises the medical policies used to make clinical determinations for a member's coverage. Review the [latest medical policy updates](#).

We strongly encourage you to visit the [Medical Policies and Clinical Guidelines](#) pages regularly to stay up to date with these changes and to read any policy in its entirety.

