SOP Template: Claims Creation, Review, and Submission Workflow

This SOP details the **claims creation, review, and submission workflow**, encompassing the systematic process of initiating claims, verifying accuracy and completeness through thorough review, and ensuring timely and compliant submission to relevant parties. It aims to streamline claim management, minimize errors, enhance communication between departments, and guarantee adherence to regulatory and organizational standards, ultimately facilitating efficient claims processing and resolution.

1. Purpose

To define a standardized process for claims creation, review, and submission to ensure accuracy, efficiency, regulatory compliance, and effective communication among all stakeholders.

2. Scope

This SOP applies to all staff members involved in claims management in the organization, spanning from claims initiation through review and submission to external parties.

3. Responsibilities

- Claims Initiator: Completes initial documentation and data entry for claims.
- Reviewer: Verifies the claim for completeness and accuracy, resolves discrepancies.
- Claims Submission Officer: Ensures timely and compliant submission.
- Supervisor/Manager: Monitors workflow adherence, addresses escalated issues.

4. Definitions

- Claim: A formal request for payment or reimbursement based on service delivery, contract, or policy.
- Submission: Forwarding the completed and approved claim to the designated payer or authority.

5. Procedure

5.1 Claims Creation

- 1. Gather all relevant information and supporting documentation required for the claim.
- 2. Complete the claims template/system data fields accurately.
- 3. Attach all necessary supporting documents.
- 4. Save the draft claim in the designated system or location.

5.2 Claims Review

- 1. Reviewer retrieves the draft claim and supporting documents.
- Verify accuracy of claim details (dates, codes, amounts, attachments).
- 3. Check for completeness against regulatory and organizational checklists.
- 4. If errors/omissions are found, return claim to initiator for correction; otherwise, approve claim for submission.
- 5. Document all review findings and actions taken.

5.3 Claims Submission

- 1. Ensure all approvals are documented and the claim is finalized.
- 2. Submit the claim to the designated external party via approved channel (e.g., electronic portal, mail).
- 3. Record submission confirmation (e.g., submission receipt, confirmation number).
- 4. Notify relevant stakeholders of claim submission.

6. Documentation & Record Keeping

- All claims, supporting documentation, and submission confirmations must be retained per policy and regulatory guidelines.
- Maintain a centralized log or tracking system for all claims processed.

7. Compliance & Quality Assurance

- Periodic audits are to be conducted on the claims process.Staff must be trained on this SOP and updated for regulatory changes.

8. References

- Applicable regulations and guidelines (e.g., HIPAA, CMS instructions)
- Internal claims management policy

9. Revision History

Version	Date	Description	Author
1.0	2024-06-01	Initial SOP creation	SOP Team