

SOP Template: Handling Patient Queries, Billing Disputes, and Corrections

This SOP details the process for **handling patient queries, billing disputes, and corrections**, including steps for receiving and logging inquiries, verifying patient information, investigating billing discrepancies, communicating resolutions effectively, processing necessary billing adjustments, and maintaining accurate records. The aim is to ensure prompt, transparent, and accurate responses to patient concerns, promoting improved patient satisfaction and financial accountability.

1. Scope

This procedure applies to all staff members responsible for managing patient billing inquiries, disputes, and necessary corrections within the healthcare organization.

2. Responsibilities

Role	Responsibility
Billing Staff	Receive, log, and investigate patient queries/disputes; coordinate corrections and communicate with patients.
Supervisors	Approve adjustments and oversee dispute resolution processes.
Medical Records / IT	Assist in record verification and correction as necessary.

3. Process Steps

- 1. Receive and Log Inquiry**
 - Accept patient queries/disputes via approved channels (phone, email, portal, in-person).
 - Record inquiry in the tracking system/log with date, time, patient name, and contact details.
- 2. Verify Patient Identity and Information**
 - Confirm patient identifiers (e.g., DOB, MRN, address) as per policy before discussing account details.
- 3. Investigate the Dispute or Query**
 - Review medical records, billing statements, and supporting documentation.
 - Contact relevant departments/providers as needed for clarification.
- 4. Communicate Findings and Resolution**
 - Contact the patient with a clear explanation of findings and proposed resolution within 5 business days.
 - If further investigation is needed, provide an estimated timeline for follow-up.
- 5. Process Corrections/Adjustments**
 - Initiate any necessary corrections in billing and update relevant systems.
 - Obtain supervisory approval for adjustments above authorization limits, if applicable.
 - Notify the patient upon completion of adjustments/corrections.
- 6. Maintain Accurate Records**
 - Document all steps, communications, findings, and outcomes in the appropriate systems for audit purposes.

4. Communication Guidelines

- Use clear, professional, and empathetic language at all times.
- Maintain patient confidentiality in all exchanges.
- Provide written confirmation of resolutions or actions taken when applicable.

5. Monitoring and Quality Improvement

- Regularly review logged disputes for recurring issues or process gaps.
- Report and address root causes to reduce future disputes and enhance service quality.

6. References

- Patient Privacy Policy

- Billing Correction Approval Matrix
- Complaint/Dispute Tracking System User Guide

Review/Revision Date: _____ | *Approved by:* _____