

THE MEDICAL BILLING PROCESS IN 9 SIMPLE STEPS

Patient Registration

Collecting patient details, demographics, and insurance information for billing purposes.

Verification of Insurance Eligibility

Confirming patient's coverage and benefits with the insurance provider before service.

Prior Authorization for Services

Securing approval from the insurer for specific treatments or procedures.

Medical Documentation

Recording services provided and assigning standardized medical codes for billing accuracy.

Claim Scrubbing & Submission

Reviewing claims errors before submitting them electronically to insurance companies.

Payer Review & Claim Adjudication

The insurer evaluates the claim for coverage, payment eligibility, or denial.

Handling Denials or Rejections

Reviewing denied claims if any, making corrections, and resubmitting for reconsideration.

Payment Posting

Recorded received payments from insurers and adjusted account balances accordingly.

Patient Billing & Collections

Sending invoices to patients for any remaining balance and managing payment collection.

Maximize Revenue and Efficiency with BillingFreedom's Expert Medical Billing Team

Boost your collections and streamline your process with BillingFreedom. With a 96% claim acceptance on the first submission and faster claim processing, we reduce A/R days and ensure complete transparency through timely patient statements. Let our expert team help you increase revenue while cutting collection costs.