DENTISTRY AUTOMATION

Dental A/R Follow-Up Checklist

A practical review guide for outstanding insurance claims

Use this checklist to organize claim follow-up, identify the next action, and route exceptions for human review. Follow your payer requirements, practice policies, and applicable filing or appeal deadlines.

1. PREPARE THE QUEUE

Start with the record

- ☐ Run the appropriate aging or outstanding-claims report.
- ☐ Confirm the claim, payer, balance, and current age.
- ☐ Review available claim status, prior notes, and recent activity.
- ☐ Flag filing, appeal, or other deadlines that affect urgency.

2. REVIEW THE CONTEXT

Find the reason for follow-up

- ☐ Is the claim still in the normal processing window?
- ☐ Is there an available payer, clearinghouse, or PMS status?
- ☐ Is information, an attachment, or documentation missing?
- ☐ Is there a denial, partial payment, or unclear payer response?

3. SET THE NEXT ACTION

Choose a specific follow-up step

- ☐ Allow normal processing and set a future review date when appropriate.
- ☐ Assign investigation when no usable status is available.
- ☐ Coordinate required documentation or attachments for submission.
- ☐ Review denial or payment variance details before deciding on correction, appeal, or other action.

4. EXECUTE AND DOCUMENT

Make ownership visible

- ☐ Record the action taken and the source reviewed.
- ☐ Assign a clear owner for the next step.
- ☐ Set the next follow-up date or escalation point.
- ☐ Document the outcome in the connected system where supported.

5. USE THE EXCEPTION GATE

Route judgment to people

- ☐ Escalate unclear or conflicting payer information.
- ☐ Escalate missing or incomplete documentation.
- ☐ Escalate denials, disputes, or situations requiring clinical, contract, or policy judgment.
- ☐ Escalate low-confidence or unusual exceptions instead of assuming a resolution.

6. CLOSE THE LOOP

Keep the queue current

- ☐ Confirm that the next action, owner, and due date are visible.
- ☐ Revisit claims that remain unresolved after the planned review date.
- ☐ Review repeated exception patterns and refine your internal process.

Quick handoff note

For each claim requiring follow-up, capture: **claim / payer** · **next action** · **owner** · **next review date** · **exception or outcome**.