Advanced Claims Editing (ACE) helps you identify potential coding issues in batch claims up front.

ACE applies coding rules to batch medical claims submitted through Availity via electronic data interchange (EDI). By checking claims before they enter Humana’s system, submitters may avoid processing delays resulting from incomplete or inaccurate data.

If a potential coding issue is identified, the claim will be “returned” with enhanced messaging on the electronic batch record (EBR) or electronic benefit transfer (EBT), the reports by which you receive HIPAA and payer-specific edits (PSE). This messaging will inform you about rules that may be applied and provide an opportunity to update the claim coding for faster processing.

Options when a claim is returned with messaging

Messaging returned with each claim should be reviewed carefully to determine whether it is appropriate to update the claim.

- If you wish to update the claim coding based upon the messaging, you may update it and resubmit the claim as an original.
- If you do not wish to update the claim, simply resubmit it. The claim will proceed to Humana for adjudication.

Important things to know

- A claim that has no rules applied up front may still have them applied by Humana later, when the claim is processed.
- In some circumstances, the nature of a particular claim may make it more appropriate to submit the claim as it was initially coded.
- Initially, ACE will include a limited number of rules; in time, Humana will expand the rules applied in this front-end process to ensure the claims experience for electronic claims submitters continues to improve.

Want to learn more?
Visit Humana.com/MakingItEasier for additional information about Humana’s claims policies and processes.

Find out more about working with Humana online by visiting Humana.com/ProviderSelfService.