



Position Statement
on
Filing of Claims

(Approved by the Board of Directors November 23, 2002)

It is the policy of the *American Academy of Dermatology and AAD Association*, with regard to the filing of claims, that all health insurance entities—inclusive of non-profit and health maintenance organizations—should acknowledge the receipt of each electronic claim within one business day, and that acceptance or rejection of the electronic claim occur within 20 business days. Furthermore, all insurance entities should pay for “clean” claims when filed electronically within 14 days, and paper claims within 30 days, with interest accruing thereafter. These time periods should be considered ceiling, not floors or fixed differential between paper and electronic claims. All physicians are entitled to receive detailed billing and remittance information for the medical and surgical services they provide. Insurers should not deny payment on lost claims discovered beyond the required filing date, when the physician has proof that the electronic or paper claim was filed in a timely manner.