

Powerful Strategies to Drive Revenue Growth

June 4, 2020

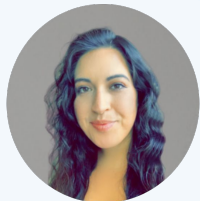


Speakers



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- Questions? Use the Q and A box on your screen and we will get to as many as we can at the end of the webinar.
- The webinar is being recorded, we will send you the slides and recording once the webinar concludes.

Financial & Production Impact from COVID-19

97% of practices have experienced a negative financial impact with 1% saying no and 2% being unsure.

55% decrease in revenue and **60%** reduction in patient volumes; varying based on specialty or services provided.

**Medical Group Management Association*

Charge Reconciliation

CPT Analysis - Some questions to ask...

- Billable services - Specialty
 - Are you an Orthopedist? How are you billing your fracture care?
 - The rheumatology clinic. How are you billing your infusions and injections?
- Local Coverage Determination and Payer Specifics Guidelines
 - Payable services - Medicare and Commercial Payers
 - Documentation Requirements
- Code Correct Initiative
 - Reduce bundling denials (CO97)
 - Correct Modifier
- Medical Necessity
 - ICD-10 assignment
 - Unspecified
 - Symptom vs definitive dx

Charge Reconciliation

Capturing All Ancillary Services

- Nurse visits 99211
- Blood draws
- Anticoagulant testing (PTINR)
- Labs (urinalysis)

Charge Reconciliation

Routine Documentation and Coding Audits

- Provider E/M Audit and Education
- Monthly E/M Bell Curve Review
 - Peer Speciality Group

Yearly Coding and Billing Updates- Thinking Ahead

- ICD-10 October
- CPT January - New, deleted, and revised codes.
- 2021 E/M

Charge Reconciliation

Clean Claim Submission

Review claims for accuracy to include but not limited to:

- Place of service and facility
- Billing, rendering, and supervising physician
- Date of Service
- CPT/ICD-10 Code assignment
 - Documentation
- Modifiers
- Missed or added procedures based on documentation
 - Documentation

Denial Management

- Identify Denial Reason
 - CAS Code analysis - Top Ten denials:
 - Determine if the denial is payer specific or coding error
 - Payer “non-covered service” or “not medically indicated.”
 - Coding Error - training and education
- Action Plan - Prevention
 - Provider Education
 - EMR utilization

Tools for Charge Reconciliation

1. eClinicalWorks Rules Engine Edit
2. Explosion Codes
 - a. Medicare administration codes for vaccines vs Commercial
3. Code Correct Edits
4. IMO Smart Search
 - a. ICD10
5. Mandatory Diagnosis
 - a. LCD and Procedure and Medical Necessity

New Services & Revenue Opportunities

1. Chronic Care Management (CCM)
2. Transitional Care Management (TCM)
3. NPP's Incident to through post operative follow up
4. Durable Medical Equipment (DME)
5. HEDIS, Risk Adjustment
6. Advanced Care Planning
7. Smoking Cessation, Depression Screening and Other Counseling Services
8. Preventative Care / Annual Wellness Exam (AWE)
 - a. Same day sick visit
9. Telehealth: Is there a future?

Strategies to AR Recovery

1. **Payments**
2. **Denials**
3. **No Response**
4. **Patient Outreach**

Strategies to AR Recovery

Payments

- Identifying payments and remittances received by paper
- Enrolling in EFT and ERA for all payers when possible can often result in expedited payments and reduce turnaround time for denials or underpayments.
- ERAs provide trending data

Strategies to AR Recovery

Denials

When working insurance level claim denials it is important to identify payer trends, determine root cause of denial trends, and create action plans to prevent future related denials

Understanding payer CAS Codes

- It is important to know that while the same CAS codes are used nationally, not all payers use CAS Codes the same way.
- Don't base your action to resolving the denial solely on the CAS code description.
- Review CAS codes by payer group

Strategies to AR Recovery

No Response

- Know how long an insurance typically takes to accept and then process a claim
- Quickly identify claims submitted but no acknowledgement received from the payer
- Identify why the initial claim was not received before submitting again or you could contribute to additional delays or no response.
- Be aware of state Insurance processing and payment laws
- Utilize respective state prompt pay statutes as leverage to reduce delays in claims processing

Strategies to AR Recovery

Patient Outreach

- Creating letters to the patient requesting assistance
- Coordination of Benefits
- Delay in processing or payment by insurance

Reporting & Analytics

Data to Support Charge Reconciliation

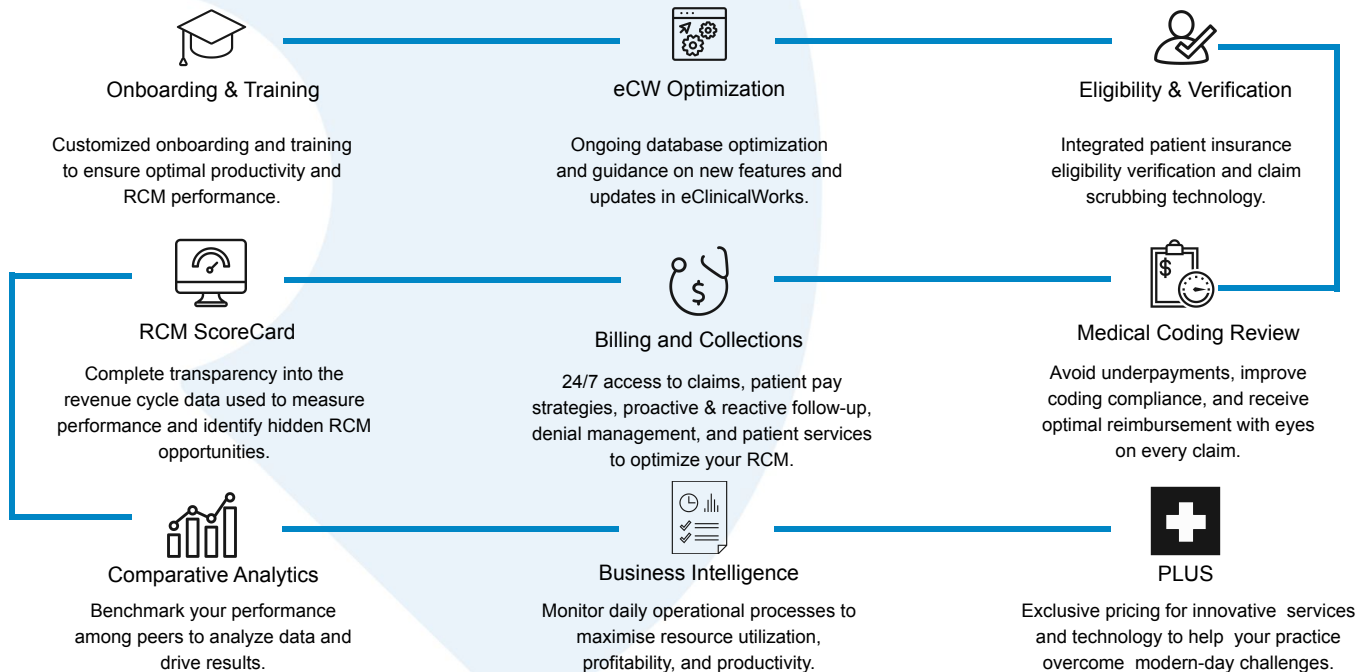
- Encounters Without Claims
- Charge Lag from DOS to Locked Encounters and/or Claims Submission
- Rounding/Surgical List vs. Claims

Data to Support AR Recovery

- Aging Summaries & Detail
- Days in AR Monitoring
- Denial Trending
- Payment Lags
- Payments without Claims or Unposted Payments

End-to-End RCM Solution

A complete revenue cycle solution for eCW users.



Q & A

How can we help *your practice*?