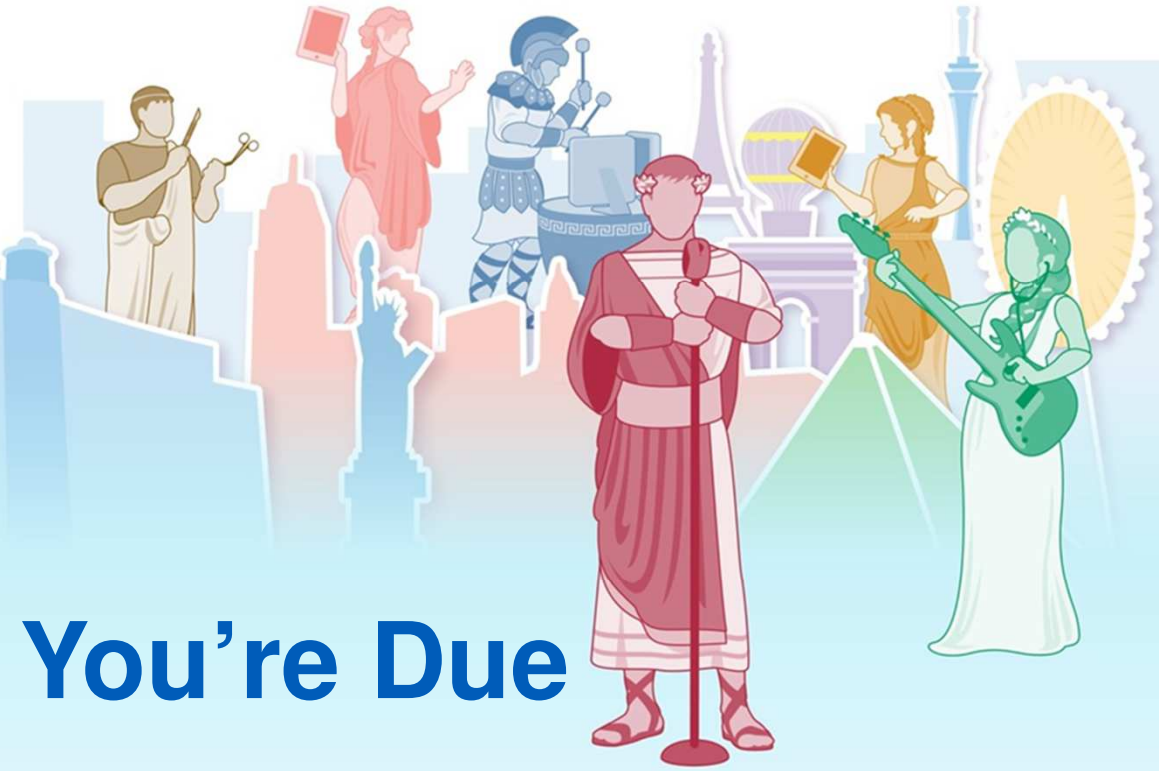
CENTRICITY LIVE
May 16-18, 2018
Caesar's Palace
Las Vegas, Nevada



Getting Paid What You're Due

Mona Reimers, MBA, FACMPE, CPC
Director of Administrative Operations
Alison Beber, Revenue Cycle Analyst
ORTHO NORTHEAST, PC

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What the Experts Say

- 7% of claims are underpaid - HFMA (2015)
- 20% of claims are inaccurately processed - AMA (2011)
- 65% of all denied claims are NOT re-worked – MGMA Connection (2014)

- 2009 – Recovery Act, Followed by MIPS
- OIG expects a 95% accuracy rate on claims filed

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WHY IS IT SO HARD?

- You need to know the rules (that change all the time)
- You need to be find out if you have been underpaid
- You need to file appeals and corrected claims
- You need to be able to trend these issues to fix them at your end or the payers end
- You need to follow up with payers who don't respond to appeals and corrected claims
- You need to fix your processes going forward and to move the payers to do the same

The Details of Payment Rules

Every commercial plan can create rules that change the payment rates.

- The amount per provider type can vary
- What line item is paid the highest
- Whether they will follow the CCI rules
- How often they update rates or rules for services, medications and DME
- They can deem almost anything non-payable
- Many commercial plans allow employers to layer on additional rules

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What We Ruled Out

- Adding more staff
- Clearinghouses weren't going to solve our problems
- Accepting the status quo

CONTRACT PAYMENT TERMS

Every Payer Is Unique!

- Site of Service
- Type of Provider
- Modifiers
- Multiple Procedure Reductions
- Bilateral Billing Guidelines
- Payer Reimbursement
- Sequestration

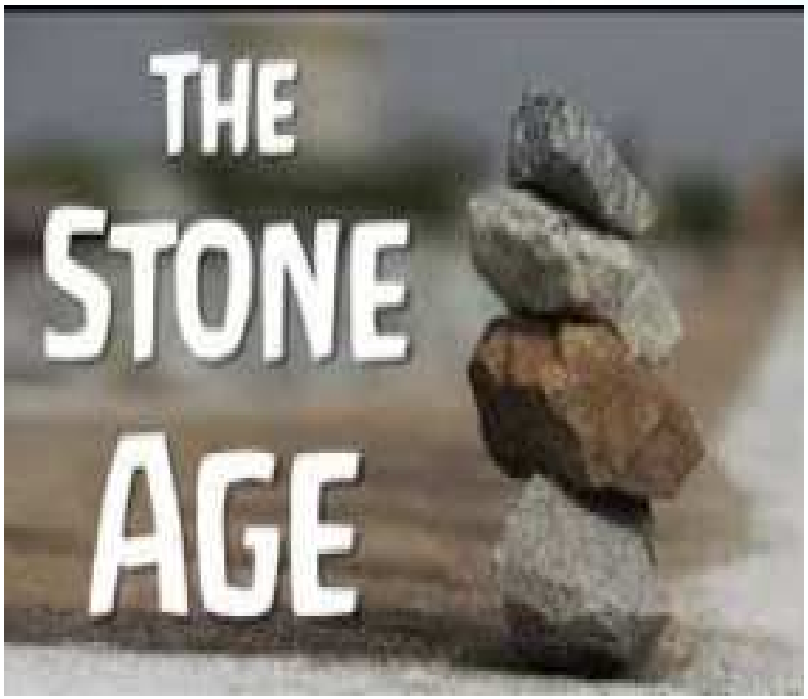
Even the Order of Listed Codes Matters

CPT Code	Procedure Descr	Modifier	Doctor	Facility	Place Of Service	Primary Insur Carrier	Total Chrg	Units	RVU	Reimbursement
27822	Rep Ankle Fx, W/WO Fixat	RT	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,416.00	1	11.21	$1,352.23
28615	Open Tx Foot Joint Disloc, W/Int Fix	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,281.00	1	5.35	$610.38
28615	Open Tx Foot Joint Disloc, W/Int Fix	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,281.00	1	5.35	$610.38
27829	Repair Low Leg Joint Dis	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$1,964.00	1	4.4	$471.75
28600	Treat Ft Dislo, W/O Anes	59	Heisler DO, Jason	Parkview Region	Inpatient Ho		$541.00	1	1.01	$[illegible]
									27.32	$3,177.42

CPT Code	Procedure Descr	Modifier	Doctor	Facility	Place Of Service	Primary Insur Carrier	Total Chrg	Units	RVU	Reimbursement
28600	Treat Ft Dislo, W/O Anes	59	Heisler DO, Jason	Parkview Region	Inpatient Ho		$541.00	1	2.02	$265.39
28615	Open Tx Foot Joint Disloc, W/Int Fix	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,281.00	1	5.35	$610.38
28615	Open Tx Foot Joint Disloc, W/Int Fix	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,281.00	1	5.35	$610.38
27829	Repair Low Leg Joint Dis	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$1,964.00	1	4.4	$471.75
27822	Rep Ankle Fx, W/WO Fixat	RT	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,416.00	1	5.61	$[illegible]
									22.73	$2,634.02

CPT Code	Procedure Descr	Modifier	Doctor	Facility	Place Of Service	Primary Insur Carrier	Total Chrg	Units	RVU	Reimbursement
28600	Treat Ft Dislo, W/O Anes	59	Heisler DO, Jason	Parkview Region	Inpatient Ho		$541.00	1	2.02	$265.39
28615	Open Tx Foot Joint Disloc, W/Int Fix	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,281.00	1	5.35	$610.38
28615	Open Tx Foot Joint Disloc, W/Int Fix	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,281.00	1	5.35	$305.19
27829	Repair Low Leg Joint Dis	51	Heisler DO, Jason	Parkview Region	Inpatient Ho		$1,964.00	1	4.4	$235.87
27822	Rep Ankle Fx, W/WO Fixat	RT	Heisler DO, Jason	Parkview Region	Inpatient Ho		$2,416.00	1	5.61	$[illegible]
									22.73	$1,754.89

Getting Started



- Verified and polished existing spreadsheets with accurate rates and payer rules
- Educate staff, verify staff understand rules/definitions
- Make spreadsheets

Example: Assistant Surgeon Rates

- 22 Payers
- Reimburse-ment varies from 12 – 35%!

Carrier	Modifie	Percentage
[redacted]	AS	12.0%
	AS	16.0%
	AS	16.0%
	AS	13.6%
	AS	16.0%
	AS	20.0%
	AS	16.0%
	AS	10.0%
	AS	16.0%
	AS	20.0%
	AS	35.0%
	AS	20.0%
	AS	16.0%
	AS	16.0%
	AS	20.0%
	AS	16.0%
	AS	20.0%
	AS	20.0%
	AS	16.0%
	AS	15.0%
	AS	12.0%
	AS	35.0%

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CPM Dashboard as of 3/14/2018

Yesterday's Exceptions

Insurance Group	$ Variance	Count
[redacted]	$745.40	5
	$430.30	1
	$185.06	3
	$103.46	3
	$30.00	2
	$19.93	1
	$3.65	1
	$1.89	1
Totals	$1,519.69	17

Open Exceptions

Insurance Group	$ Variance	Count
[redacted]	$4,714.45	31
	$1,987.10	10
	$364.45	1
	$341.75	7
	$284.93	6
	$275.37	4
	$229.75	6
	$186.34	4
	$98.96	2
	$30.00	2
	$26.05	8
Totals	$8,539.15	81

Top 10 open exceptions by variance($)

CPT Code	Insurance Group	$ Variance
64640	[redacted]	$1,512.24
22612		$1,073.93
23472		$719.64
22844		$594.25
29826		$430.30
29823		$409.60
01214		$364.45
22842		$358.91
27654		$342.42
64635		$317.86
	Totals	$6,123.60

Top 10 open exceptions by count

CPT Code	Insurance Group	$ Variance
64640	[redacted]	$1,512.24
99213		$14.60
23472		$719.64
27447		$300.49
99203		$73.60
20610		$44.56
99283		$57.56
01470		$30.00
23615		$104.50
64483		$101.50
	Totals	$2,958.69

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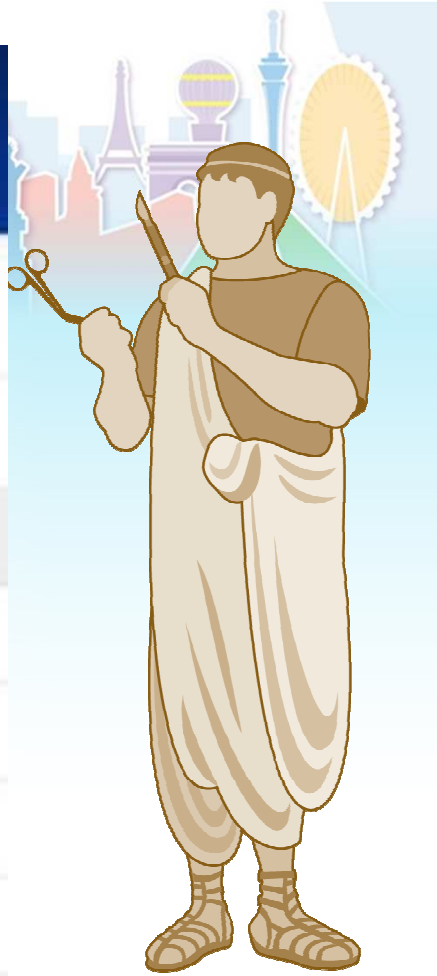
Contract Payment Manager

DASHBOARD APPEALS **EXCEPTIONS** CODE LOOKUP FEE SCHEDULES

923 exceptions were found

	Tickler	Patient	Ticket Number	Procedure Code	CPT code	CPT description	Service date
☐	20	Fake Patient	2438475	J3301	J3301	J3301-**Kenalog up to...	09/23/2014
☐	1	Fake Patient	2736590	73140	73140	73140-Xray Exam of Fi...	11/10/2015
☐	72	Fake Patient	2310055	73630	73630	73630-Xray Ex Foot Co...	03/24/2014
☐	72	Fake Patient	2310055	73630	73630	73630-Xray Ex Foot Co...	03/24/2014
☐	22	Fake Patient	2316410	25609	01830	01830-open treatment...	03/13/2014
☐	22	Fake Patient	2316411	25609	01830	01830-open treatment...	03/13/2014



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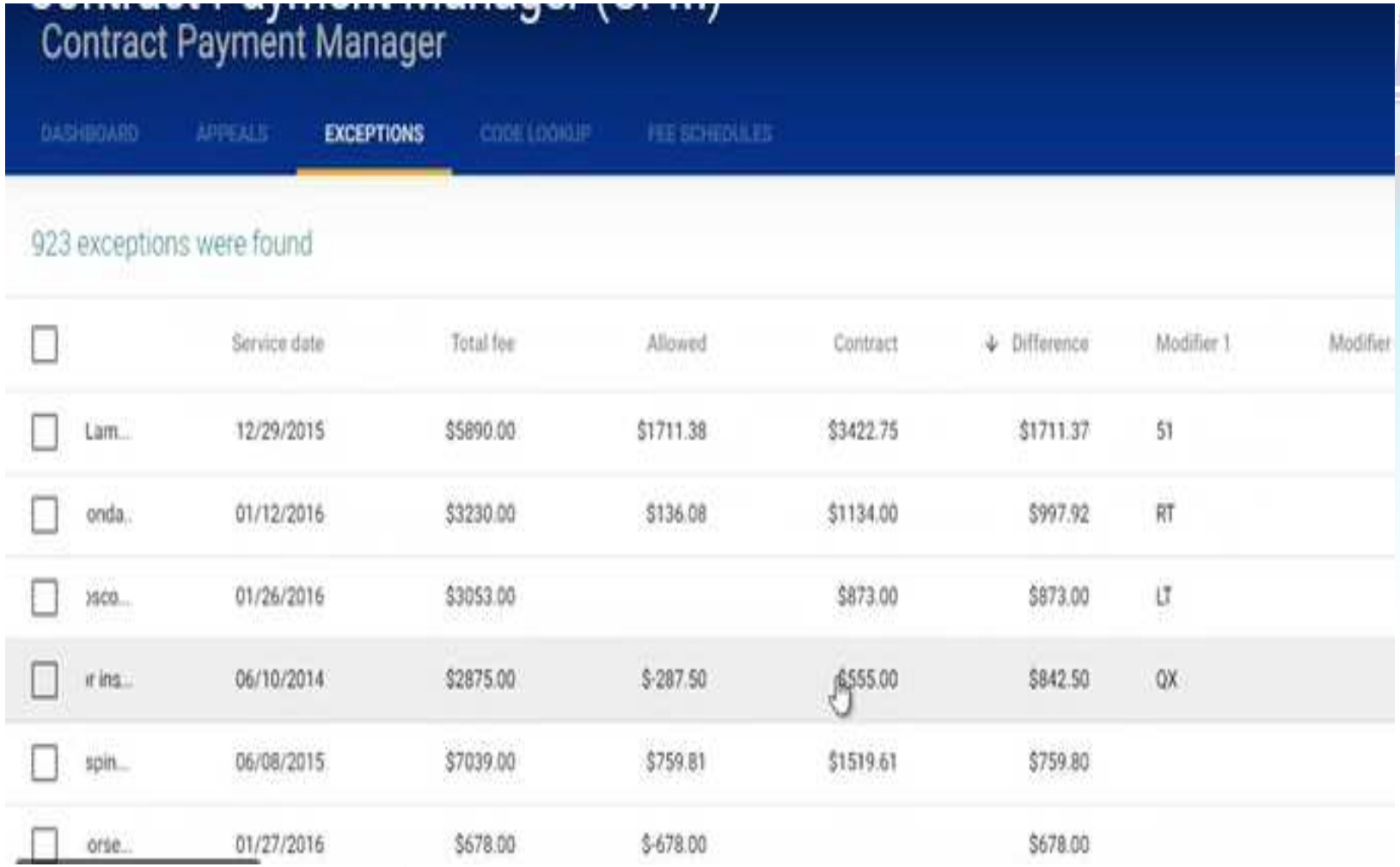
Contract Payment Manager
DASHBOARD
APPEALS
EXCEPTIONS
CODE LOOKUP
FEE SCHEDULES
923 exceptions were found
Service date
Total fee
Allowed
Contract
Difference
Modifier 1
Modifier
Lam...
12/29/2015
$5890.00
$1711.38
$3422.75
$1711.37
51
onda..
01/12/2016
$3230.00
$136.08
$1134.00
$997.92
RT
)sco...
01/26/2016
$3053.00
$873.00
$873.00
LT
r ins...
06/10/2014
$2875.00
$-287.50
$555.00
$842.50
QX
spin...
06/08/2015
$7039.00
$759.81
$1519.61
$759.80
orse...
01/27/2016
$678.00
$-678.00
$678.00

WHY IS IT SO HARD?

consistency.

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Bolt of the Obvious

The Next Steps

PREVENT SOME OF THE ISSUES

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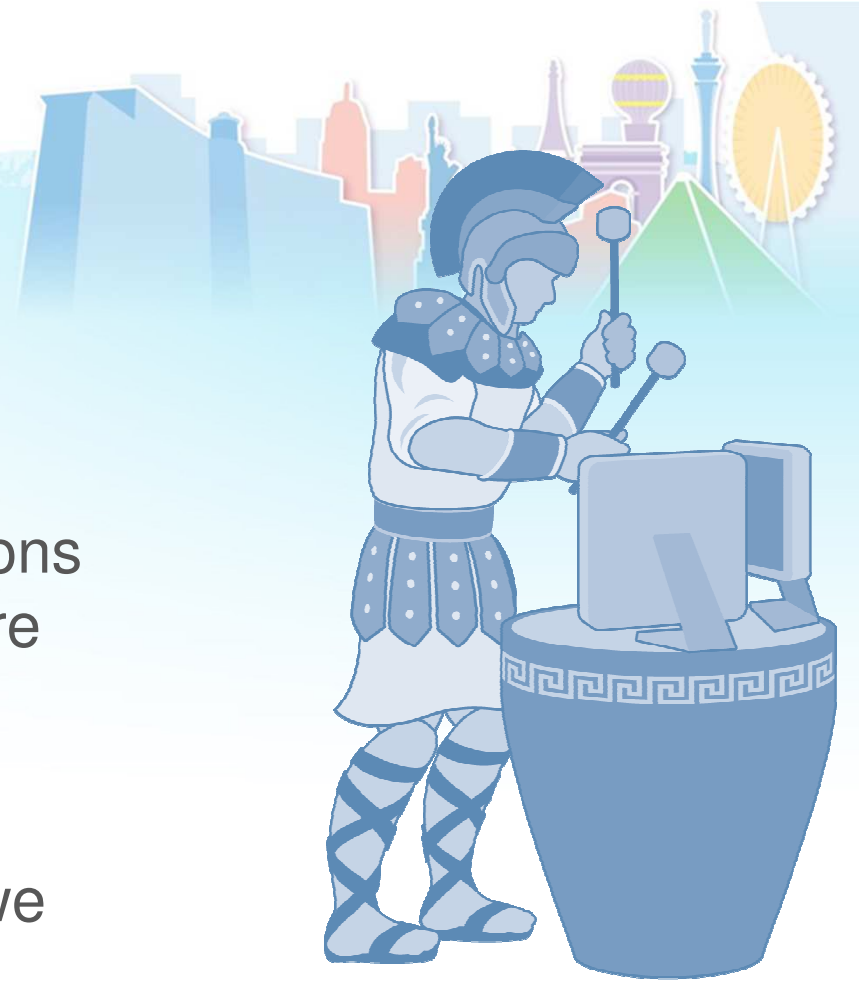
Precert Matching

- If Precert doesn't match some payers deny all or part of the claim
- Most payers allow for prior authorizations to be modified if they are notified before the claim arrives in to their system
- Hard to know this without work effort we didn't have time for



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Precert Matching

Ticket Number	Charge Create Date	Doctor	Facility	DOS	AuthNumber
3324173	2/26/2018	Karr MD, Scott D	Parkview Surgery ONE	2/20/2018	
3324173	2/26/2018	Karr MD, Scott D	Parkview Surgery ONE	2/20/2018	
3324173	2/26/2018	Karr MD, Scott D	Parkview Surgery ONE	2/20/2018	
3324188	2/26/2018	Stephens MD, Matthew A	Parkview Surgery ONE	2/20/2018	
3324188	2/26/2018	Stephens MD, Matthew A	Parkview Surgery ONE	2/20/2018	
3334711	3/13/2018	Dohl MD , Douglas R	Parkview Ortho Hospital - IP/AM	3/12/2018	

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Billing for The Highest Possible Rates

&

Reducing FTEs

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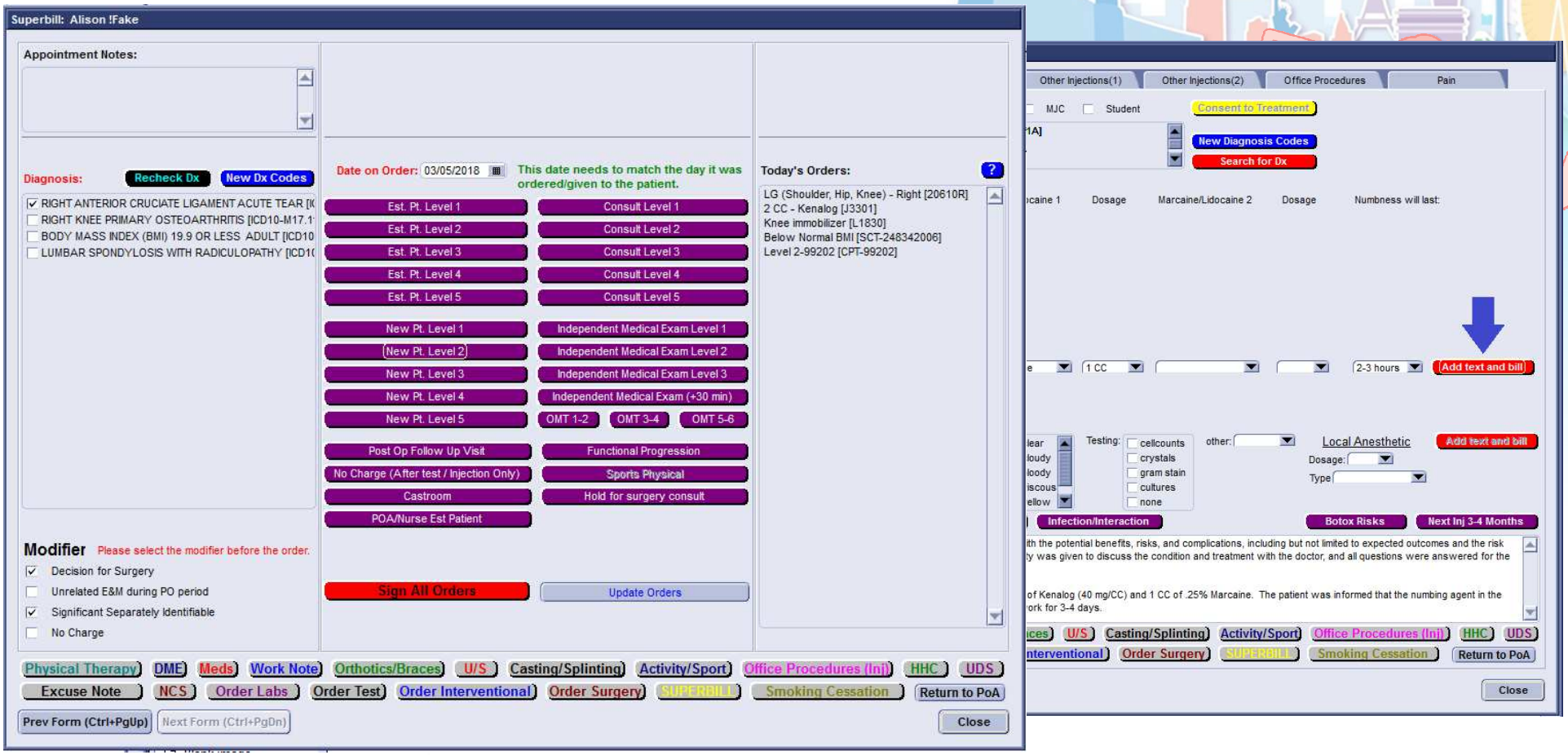
Automated Office Charge Entry



EMR Orders Generated And Imported Into CPS

Centricity EMR - Revenue Cycle Analyst Alison B @ ONE Central Business Office (one01) - 3/5/2018 11:57 AM - [Chart]

Go Actions Options Help

Desktop Chart Appts Reg Reports LinkLogic New View Print Help EXIT

Alison !Fake External ID: **10729053** Alerts: ***None*** Online: ***None*** Home: None Work: None PIN: 7890 (03/01/2018 10:28:12 AM)
72 Years Old Female DOB: **08/24/1945** Referring MD: **Dominick Acquaro MD, MD** Insurance: **Aetna (14076)** Group: Email: fakeemail@yahoo.com

Find Pt. Protocols Graph Handouts Update Phone Nt. Refills Change Send Complete View Remove Organiz

Summary | History | Problems | Medications | Alerts/Flags | Flowsheet | **Orders** | Documents

!		Date	Type	Description	Authorized By	Status	Units
		03/05/2018	Service	Level 2-99202	William J. Berghoff MD	Complete	1
		03/05/2018	Test	Below Normal BMI	William J. Berghoff MD	In Process	1
		03/05/2018	Service	Knee immobilizer	William J. Berghoff MD	Complete	1
		03/05/2018	Service	2 CC - Kenalog	William J. Berghoff MD	Complete	8
		03/05/2018	Service	LG (Shoulder, Hip, Knee) - Right	William J. Berghoff MD	Complete	1

Code: **CPT-99202 - 25**
Type: **Service** Order #: **2362162-5**
Authorized By: **William J. Berghoff MD** Signed By: **Revenue Cycle Analyst Alison B**
Prime Coverage: **Aetna (14076)** Authorization #:
Duration: End Date: Units: **1**

Clinical Notes:

Diagnosis: **RIGHT ANTERIOR CRUCIATE LIGAMENT ACUTE TEAR (ICD-844.2) (ICD10-S83.511A)**

Sent to Provider: Service Provider:
Sent to Insurance:
Red Flags:

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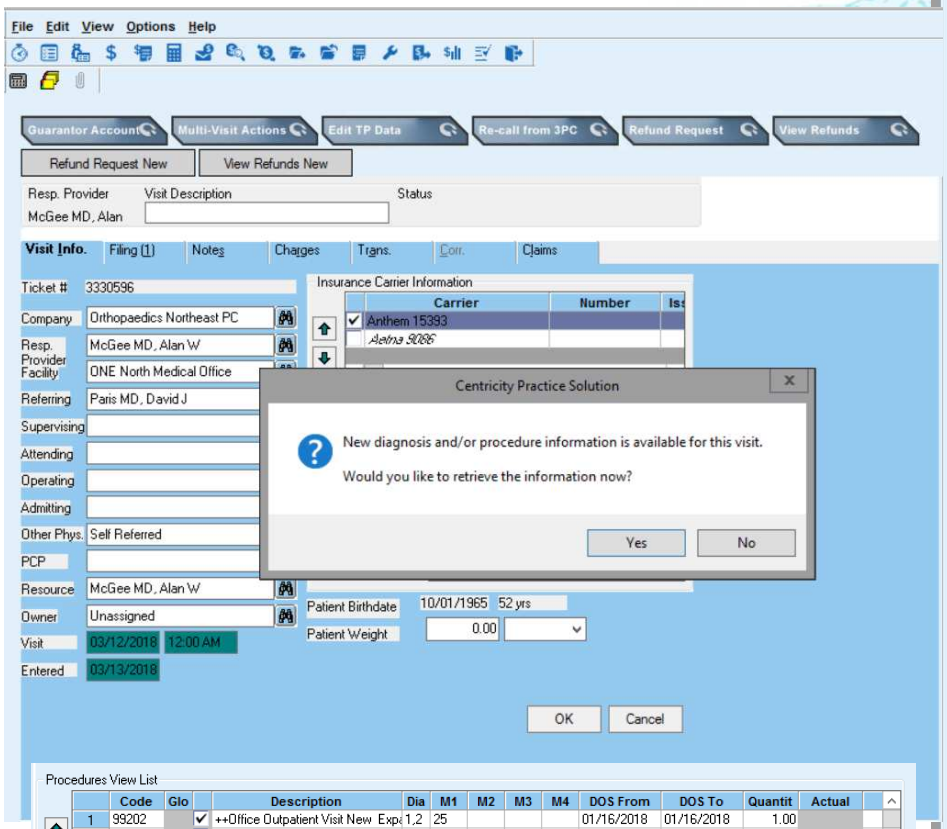
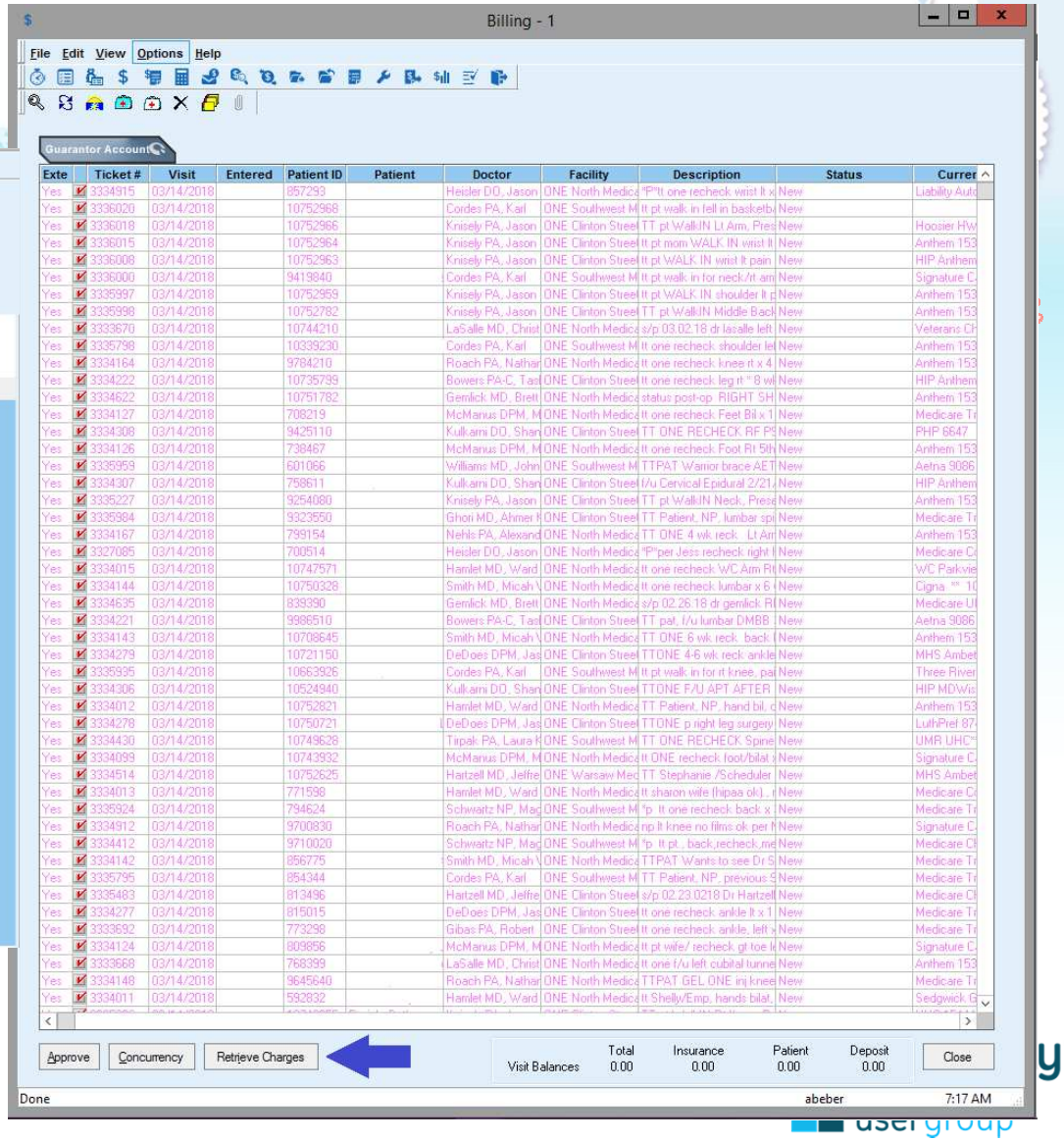
Batch Retrieval





Innovative Claims Editor (ICE)

Innovative Claims Edits as of 3/14/2018

Ticket Num	Patient	Rule
bmartin		
3334281		Additional Info required for 25 modifier
3334595		
cklein		
3334884		
csaine		
3325012		
3326053		
3328339		New Pt. vs. Est. Pt. Visit
3328459		Review for Modifier 25
3328565		Review for Modifier 25
3328582		Review for Modifier 25
3328604		New Pt. vs. Est. Pt. Visit
3328605		Consult Code Review
3328643		Check Global Period
3328743		Check Global Period
3329005		Check Global Period
3329006		Check Global Period
3329025		Check Global Period
3329028		Review for Modifier 25
3329101		Check Global Period
3329101		Combine Same J codes = 1 line w/ units

Procedures View List

	Code	Glo		Description	Dia	M1	M2	M
1	20610R		✓	Aspiration Injection Major Joint Burs	1	79	RT	
2	73552		✓	X-ray exam of femur 2/>	2	RT		
3	J3301		✓	Kenalog up to 10 mg	1			
4	99024			Postoperative follow-up visit, includ	1,2			
5								

New... Modify... Delete...

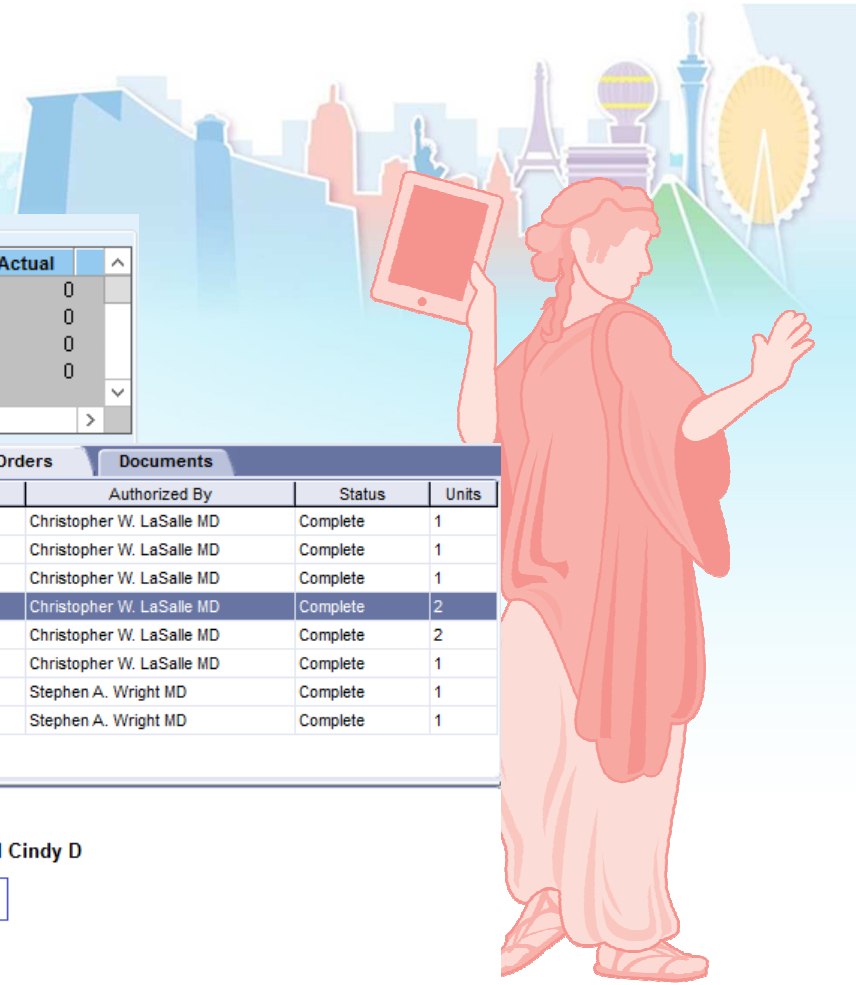
dmiller	
3301916	Procedure During Global Period
3304950	50 Modifier Invalid on DME
3305719	NC Modifier- requires review
3306104	Combine Same J codes = 1 line w/ units
3306104	Split DME to its own ticket
3306509	Additional Info required for 25 modifier
3306509	Modifier 50 is invalid
3307065	Split DME to its own ticket
3307170	50 Modifier Invalid on DME
3308031	Additional Info required for 25 modifier
3308333	Combine Same J codes = 1 line w/ units
3308333	Split DME to its own ticket
3308343	Check Global Period
3308479	Additional Info required for 25 modifier
3308481	Additional Info required for 25 modifier
3308481	Remove RT, LT, or 50 mod
3308491	Additional Info required for 25 modifier
3308519	Check Global Period
3308532	Check Global Period

Procedures View List

	Code	Glo		Description	Dia	M1	M2	M3	M4	DOS From	DOS To	Quantit	Actual
1	99203		✓	++Office Outpatient Visit New Low	1	25				02/05/2018	02/05/2018	1.00	0
2	20526		✓	Carpal Tunnel Injection	1	50				02/05/2018	02/05/2018	1.00	0
3	J1040		✓	Depo-medrol 80 mg	1					02/05/2018	02/05/2018	2.00	0
4	TITAN		✓	Titan Wrist Splint	1	50				02/05/2018	02/05/2018	2.00	0
5													

New... Modify... Delete...

Correcting Workflows in the EMR



Procedures View List

	Code	Glo		Description	Dia	M1	M2	M3	M4	DOS From	DOS To	Quantit	Actual
1	99203		✓	++Office Outpatient Visit New Low	1	25				02/05/2018	02/05/2018	1.00	0
2	20526		✓	Carpal Tunnel Injection	1	50				02/05/2018	02/05/2018	1.00	0
3	J1040		✓	Depo-medrol 80 mg	1					02/05/2018	02/05/2018	2.00	0
4	TITAN		✓	Titan Wrist Splint	1	50				02/05/2018	02/05/2018	2.00	0
5													

New... Modify...

Summary | History | Problems | Medications | Alerts/Flags | Flowsheet | Orders | Documents

!		Date	Type	Description	Authorized By	Status	Units
		02/05/2018	Service	Level 3-99203	Christopher W. LaSalle MD	Complete	1
		02/05/2018	Test	Above Normal BMI	Christopher W. LaSalle MD	Complete	1
		02/05/2018	Test	Follow-Up Appointment	Christopher W. LaSalle MD	Complete	1
		02/05/2018	Service	Titan Wrist splint	Christopher W. LaSalle MD	Complete	2
		02/05/2018	Service	2 CC - Depo-Medrol 80 mg	Christopher W. LaSalle MD	Complete	2
		02/05/2018	Service	Injection: carpal tunnel therapeutic	Christopher W. LaSalle MD	Complete	1
		05/30/2006	Service	Knees Both Standing AP	Stephen A. Wright MD	Complete	1
		03/17/2006	Service	Knee AP & Lat W/Obl Min 3 VW	Stephen A. Wright MD	Complete	1

Code: **TITAN - 50**
Type: **Service** Order #: **2346745-3**
Authorized By: **Christopher W. LaSalle MD** Signed By: **MA Clinical Cindy D**
Prime Coverage: **HIP MHS (16189)** Authorization #:
Duration: End Date: Units: **2**

Clinical Notes:

Diagnosis: **BILATERAL WRIST CARPAL TUNNEL SYNDROME (ICD-354.0) (ICD10-G56.03)**

Sent to Provider: Service Provider:
Sent to Insurance:
Red Flags:

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Results

- Days in A/R down by 7, and still dropping
- Denials are down by 42%
- Appeals and corrected claims are down by 56%
- Staffing in billing department down
  - 5 FTEs - $200,000/year

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Questions?

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