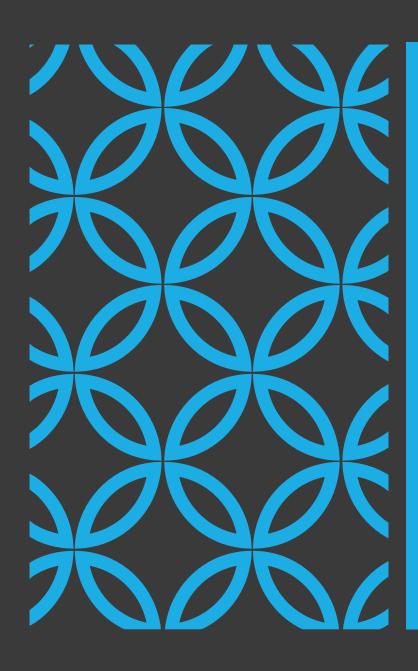


DENIALS MANAGEMENT: HOW EVERY EMPLOYEE CAN HELP PREVENT DENIALS

Lindsey Herman Nolan, Nolan Practice Management



AGENDA

How Can Front Desk Impact Denials?

How Can Clinical Staff Impact Denials?

How Can Back Office/Billing Staff Impact Denials?



TOP DENIAL REASONS

Top Reasons for Denials:

- 1. Timely Filing
- Coding Issues (Medical Necessity)
- 3. Incorrect Patient Information
- 4. Authorization Issues
- 5. Referral Issues



HOW CAN FRONT DESK IMPACT DENIALS?

REFERRALS

- Referrals are required for all HMO Insurance Policies
- Must:
 - Come from Primary Care Provider
 - Diagnosis (Treatment for only that condition is approved)
 - Dates of Referral
 - Number of Visits Approved
- Worker's Compensation Plans
 - Approval for Evaluation and Treatment required before bringing patients in the office
- Referrals must be received prior to appointment booking

ELIGIBILITY AND BENEFITS

- Eligibility and Benefits MUST be checked before patients come into the office
 - Ideally, the clinic should be checking at least 3 days prior, if not more

•Eligibility:

• Is the patient CURRENTLY active under the insurance plan?

Benefits:

- What does the insurance cover for the patient?
- Does the patient have a copay? Deductible? Coinsurance?
- What does the front desk need to collect at check in?

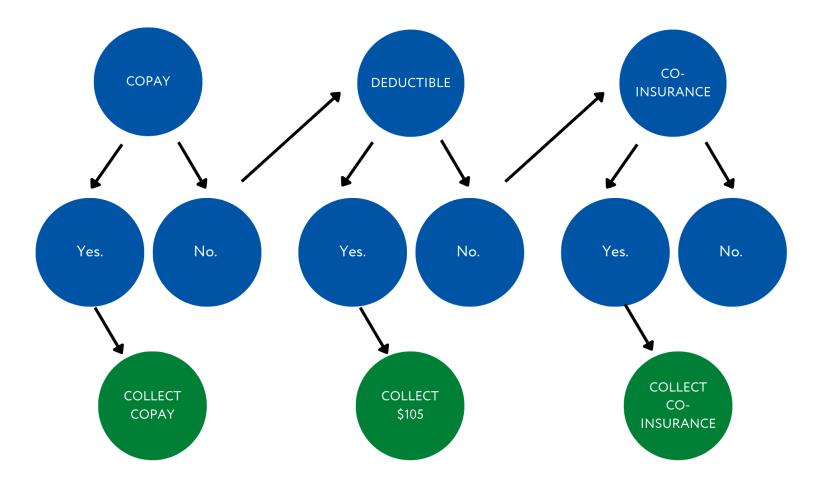


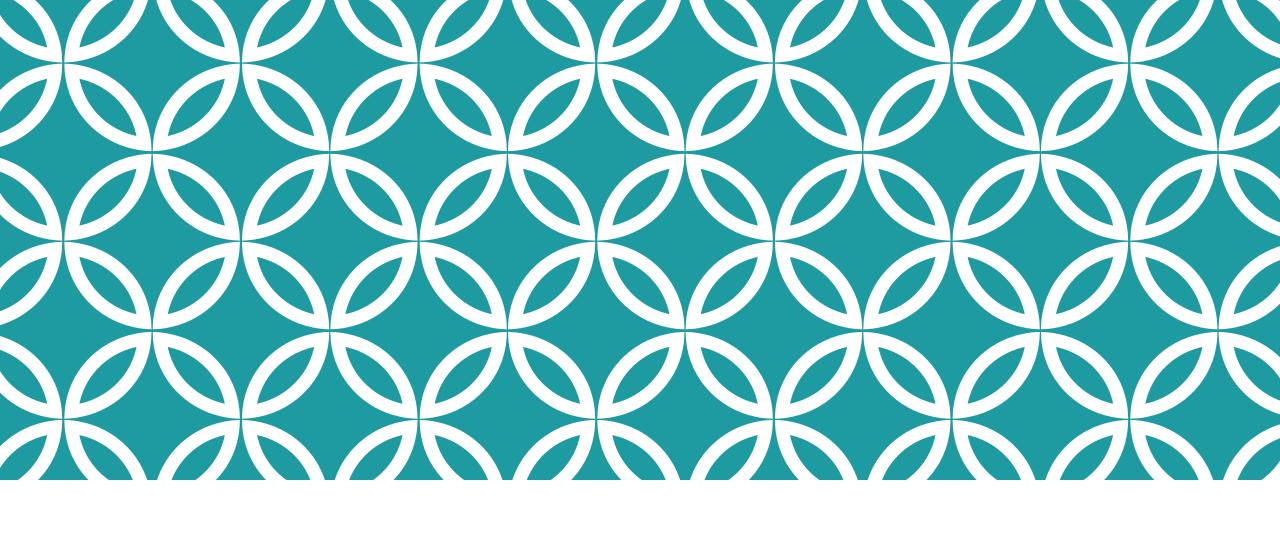
023457 Group No. 987654 Benefit Plan HIOPT Effective Date 00/00/00

Dependent Three PPO \$15 Office Visit Specialist Copay

\$15 \$75 Emergency Deductible \$50

INSURANCE TRAINING





HOW CAN CLINICAL STAFF IMPACT DENIALS?

DOCUMENTATION! DOCUMENTATION!



MEDICATION RECONCILIATION

- Must be completed in order to be paid for office visit codes
 - Must be DOCUMENTED!
 - Medical Assistant Responsibility



CODING

- Medical Necessity
 - Specific CPT Codes require certain diagnosis codes to be approved for medical necessity
- Insurance Coding Changes
- Use of Modifiers
- Level of Service

CLOSING NOTES



Providers completing and closing notes is one of the biggest contributors to timely filing denials



Scribes, Medical Assistants



HOW CAN BACK OFFICE/BILLING STAFF IMPACT DENIALS?

AUTHORIZATIONS

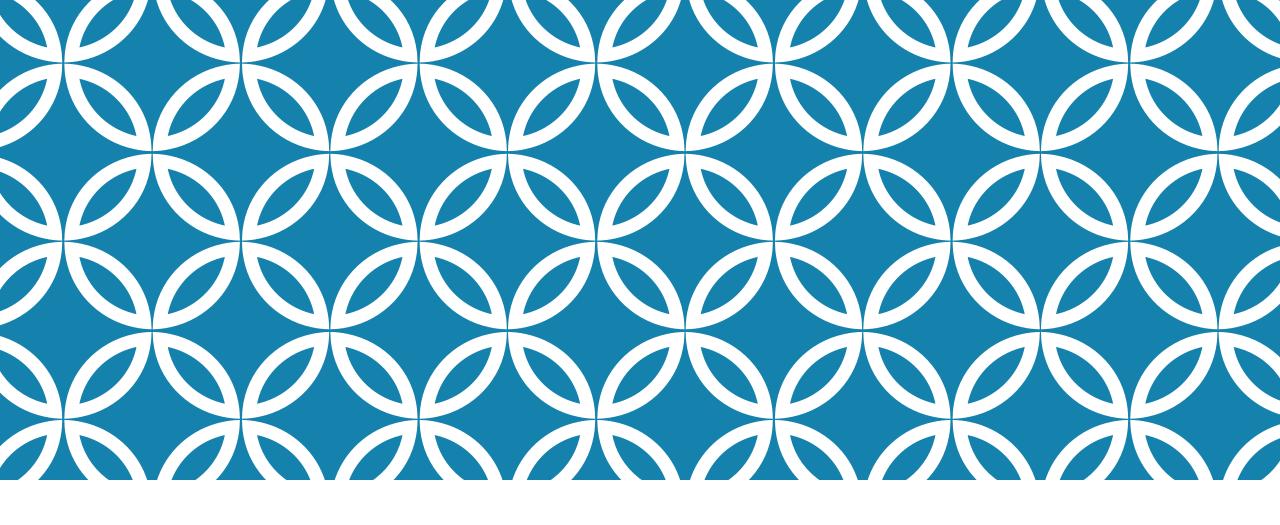
- All procedures MUST be authorized
 - Even if "no authorization is required"
 - If done over the phone, record the reference number and rep's name
 - All must be recorded into the billing system

DOUBLE CHECKING CLAIM INFO

It takes more effort to correct a denied claim than bill it correctly the first time

NPI, Location, Taxonomy Errors

Confirm Typing Errors not present



QUESTIONS?

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