Workers' Compensation Revenue Cycle Process and Challenges

Presented by Tony Berkebile

SunStone Consulting

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- Providing Reimbursement, Revenue Integrity & Outsourcing services for 20+ years
- 300+ clients across the US & Puerto
- 25+ years of experience with Workers' Compensation/Auto – No Fault Outsourcing
- Assisted the Pennsylvania Bureau of Workers' Compensation with developing and implementing the Application for Fee Review system.

Agenda

- Registration Essentials
- The Billing Process
- Denial Management
- Collections and Follow-up
- Confirming Correct Payments
- The Application for Fee Review Process
- Questions and Answers

Registration Essentials

- Critical data elements at time of registration
- Information gathering strategies
- Employer contact information
- Patient letter or workers' compensation insurance card.
- Validating all claim information in the providers system

The Billing Process

- Validate all information with the employer and the insurance carrier. No detail is too small.
- Confirm all claim information matches the UB04/1500 and the LIBC-9.
- Confirm the insurance companies contact information and billing address.
- Ensure all billing documents are present and in the correct order.
- Identify service codes for hospital bills.

Denial Management

- Understanding denial terminology.
- Next steps after reviewing the EOB in detail.
- Application for Fee Review with the Pennsylvania Bureau of Workers' Compensation.
- Reconsiderations to the insurance carrier.
- Timely changing the financial class if necessary.

Collections and Follow-up

- Contacting the insurance company:
  - Who should you contact?
  - How many attempts to contact should you make?
- High dollar claim resolution.
- Communicating with cash posting /cash posters on outstanding payments.
- What does “In Processing” mean?
- Payment agreements, discounts and contracts.

Confirming Correct Payments

- Outpatient hospital claims:
  - Service codes
  - Pharmacy items (frozen pharmacy RCCs)
  - Lab tests (lab fees imbedded in Part B fee schedule)
- Inpatient claims:
  - Inpatient DRG (Box 71 of UB)
  - Cost and day outliers are still part of the calculation.

Confirming Correct Payments

- Inpatient rehab claims:
  - Follows the outpatient methodology using the inpatient rates (Table I).
- Part B Claims:
  - Generally paid using the Part B fee schedule.

Application for Fee Review

- When to file an Application for Fee Review.
  - 30 days from payment or denial, or 90 days from the original bill date, whichever is later.

- How to file an Application for Fee Review.
  - Workers' Compensation Automation and Integration System (WCAIS).
  - UB04 or 1500 claim form.
  - Medical report form (LIBC-9)
  - Detailed bill (for hospitals)
  - EOB(s)

Application for Fee Review

- When you win a fee review.
  - Call the insurance carrier. Don’t wait for them to reach out to you.
  - Send the insurance carrier any supporting documents.
  - Be persistent!

Questions & Answers

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