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# 5 Ways to Increase Your ASC Out-of-Network Revenue

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# Today's topics:

- Do you really need to do a verification of benefits for every case scheduled at the facility?
- How is the best way to collect from the patient up front?
- "The insurance has paid, is this all I get?“
- Payment Poster Responsibilities
- Collector Responsibilities.

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- The revenue cycle management process begins at the time that the surgeon's office calls to schedule a surgery at your facility.

- Is the surgeon's office providing pertinent details needed by the facility to make a decision on whether or not the case will be profitable? Implants needed, ALL CPT codes – the facility should not have to assume what the CPT codes are these should be provided by the surgeon. Time needed, Insurance info, correct demographics.

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- Benefits should be verified within 24 hours of scheduling, this will ensure that the patient is notified in a timely manner of their portion due or the surgeon's office is contacted if the case can not be performed at the center.
- VOB
- How much does it cost to perform the case?
- Are these resources available for the insurance verifier?
- Are you collecting from the patient up front?

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- What payment options are given?
- When you have flexibility in payment options people are more likely to pay you the full amount due whether it be over a period of time or up front.
- How many patients do you have that cancel due to being unable to perform their portion of the surgery?
- Make this assessment to decide if you need to take a second look at internal processes/policies.

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# VOB- is your process sufficient?

- Obtain in and out of network benefits.
- Confirm whether there are any daily maximums, ASC limitations that apply to the policy
- Methodology used for determining out of network allowable
- Is a third party network used for pricing? If yes, which one? ( First Health, TRPN) R&C – what percentile?
- What is the insurance carriers MPR?

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- This is important to know because there are re-pricing companies that choose their own MPR – for example UHC standard MPR is 100/50/50, however when Viant has re-priced claims in the past they use an MPR of 100/25/10. The patient's policy/the carriers guidelines should override the pricing companies.
- Once information is obtained and the patient portion is figured out. Then estimate what the insurance will be paying. Do the two combined amounts meet or exceed the cost to perform the case at your facility?

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# Collectors responsibilities?

- Gather all information on the phone call to get a head start on the reconsideration process
- Negotiate
- Use carrier forms when required
- Know carrier time lines for disputes, posting/collections
- Standard collector process
- Follow up timely on appeals/reconsiderations
- Never accept the first negotiation offer, ask questions, review previous data to confirm the allowable as being sufficient

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MINNETONKA, MN 55343-0000

PAYER CONTACT: ATLANTA SERVICE CENTER
PHONE: (877)842-3210

NPI:
EFT:
CHECK DATE:
PRODUCTION DATE

| PROV | SERV DATE | POS | NOS | PROC | MODS | BILLED | ALLOWED | DEDUCT | COINS | GRP/RC-AMT | | PROV PD |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| NAME | | | | | | ACNT: | | | ICN ) | | | |
| GRP/POL NUM: 701648 | | | | | | | | | | | | |
| | 0108 010815 | 831 | 1 | 64633 | RT | 12000.00 | 1052.35 | 777.14 | 82.56 | PR-45 | 10947.65 | 192.65 |
| | 0108 010815 | 831 | 2 | 64634 | RT | 6000.00 | 5875.00 | 0.00 | 1762.50 | PI-94 | -5750.00 | 4112.50 |
| | | | | | | | | | | PR-45 | 5875.00 | |
| | 0108 010815 | 831 | 0 | 64634 | RT | 5750.00 | 5750.00 | 0.00 | 0.00 | PI-97 | 5750.00 | 0.00 |
| PT RESP 19444.85 | | | | | | CLAIM TOTALS | 23750.00 | 12677.35 | 777.14 | 1845.06 | 16822.65 | 4305.15 |
| ADJ TO TOTALS: | | | | | | PREV PD 0.00 | | INTEREST 0.00 | | LATE FILING CHARGE 0.00 | NET | 4305.15 |

| TOTALS: | # OF CLAIMS | BILLED AMT | ALLOWED AMT | DEDUCT AMT | COINS AMT | RC-AMT | PROV PAID | PROV ADJ | CHECK AMT |
|---|---|---|---|---|---|---|---|---|---|
| | 1 | 23750.00 | 12677.35 | 777.14 | 1845.06 | 16822.65 | 4305.15 | [illegible] | 4308.07 |

| PROVIDER ADJ DETAILS: | PLB REASON CODE | FCN | HIC | AMOUNT |
|---|---|---|---|---|

GLOSSARY: Adjustment, Group, Reason, MOA, and Remark codes

PI- Payor initiated reductions. In the opinion of the payer, the adjustment is not the responsibility of the patient, but no supporting contract exists between the provider and the payer.

94 Processed in Excess of charges.

97 The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.

PR- Patient Responsibility

45 Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. (Use only with Group Codes PR or CO depending upon liability) This change effective 11/1/2015: Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. Note: this must not duplicate provider adjustment amounts (payments and contractual reductions) that have resulted from prior payer(s) adjudication. (Use only with Group Codes PR or CO depending upon liability).

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# Payment Poster Responsibilities

- Review each EOB/payment in detail. Review the collector's notes
- If you are out of network and there is not set guidelines that limit the reimbursement for the out of network provider on the patient's policy, are you capturing additional revenue? Is anyone reviewing this information?
- What is your adjustment policy? Who is authorized to make adjustments, what has to happen prior to them being performed?

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# Payment Poster Responsibilities

- The EOB can be misleading, payment poster must be educated in looking and determining the correct allowable.
- Trend tracking – project for a collector or poster
- Proper posting/tracking of recoupments

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- Is your business office setting you up for failure or success?
- Do you know what each type of case costs to perform at your ASC?
- Are you billing for your implants?
- Are you filing claims timely?
- Checks and balances on simple items such as demographics can save time on the back end.

Expect an email in a day or so from Marketing@MediGain.com with a copy of the webinar and some free eBooks.

If you would like a presentation on how **MediGain** can increase your ASC's reimbursement, send an email to marketing@MediGain.com or call **888-244-4754**

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