

A person wearing a white lab coat and a black wristwatch is holding a white smartphone. The phone screen displays a patient's medical record for 'Michael Anderson', including a 'Home' button, a circular profile picture, and a list of medical history items like 'Allergies', 'Medications', 'Lab Results', and 'Appointments'.

Promoting Access to Quality Care Through Technology and Innovation

 **Azalea Health** ➤

Azalea Health Leaders Summit
August 18 - 20, 2016



RCM, Industry Updates & Best Practices



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RCM: Agenda

- Rural Health Clinic Updates
- Telehealth
- ICD-10 Grace Period
- Prior Authorizations
- Credentialing
- Revenue Cycle Performance with Azalea

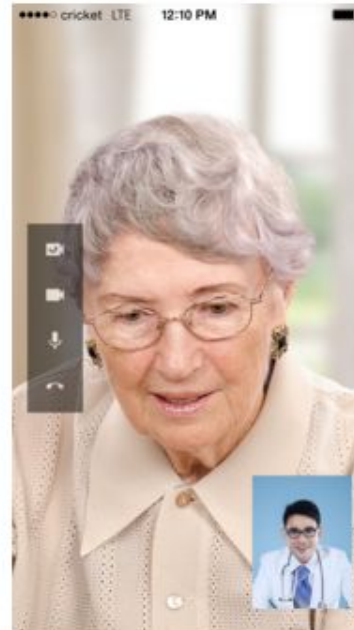
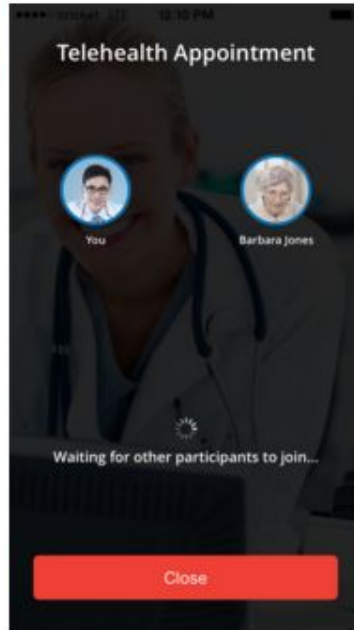
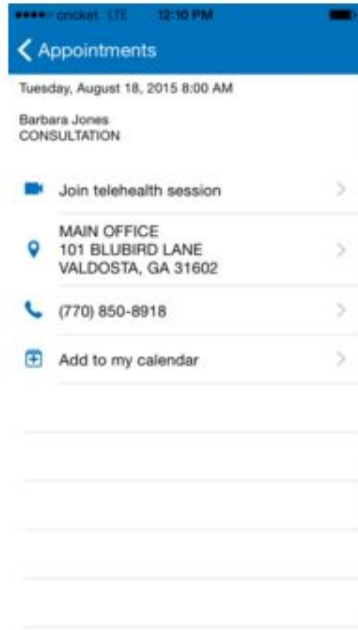
RCM: Rural Health Clinic (RHC)

April 1st billing changes are complete - How are we doing ?

- CG Modifier
- October 1, 2016 all RHC claims
- Should have modifier CG appended to signify charges are to be paid at an all inclusive rate and are subject to the deductible and coinsurance amounts (MLN SE1611)
- Home Health visit coverage
- Effective for services on or after October 1, 2016 home health Visits are billable and paid at the visit rate . The code G0466 should be used for the service with a revenue code of 0521 and the modifier CG for FQHC and G0490 for RHC
- RHC Qualifying Visit List - new services are eligible for billing October 1, 2016

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/FQHCPPS/Downloads/RHC-Qualifying-Visit-List.pdf>

RCM: Telehealth



Reimbursement Options - Medicare

- Originating Site (patient location) Requirements
 - Health Professional Shortage Area (HPSA) or
 - In a county outside a Metropolitan Statistical Area (MSA)
 - Sites include provider office, Hospital, CAH, RHC, FQHC, Skilled Nursing Center, Hospital or CAH-based Renal Dialysis Center, and Community Mental Health Center
 - Cannot be a patient's home
 - Telehealth Payment Eligibility Analyzer -
<http://datawarehouse.hrsa.gov/tools/analyzers/geo/Telehealth.aspx>

Reimbursement Options - Medicare

- Additional Considerations
 - Reimbursement not affected by distant site
 - Only face-to-face, interactive video consultation services where the patient is present will be reimbursed (mimic a face-to-face consultation)
 - Will not cover store-and-forward applications
 - Teleradiology
 - Remote EKG

Reimbursement Options - GA Medicaid

- Live Video Reimbursement
 - Must be medically necessary, the procedure is individualized, specific, consistent with symptoms or confirmed diagnosis of an illness or injury under treatment, and not in excess of the patient's needs
 - Eligible Services
 - Office visits
 - Pharmacologic management
 - Limited office psychiatric services
 - Limited radiological services
 - A limited number of other physician fee schedule services

Reimbursement Options - GA Medicaid

- Nursing Homes
 - Mental health services for residents in nursing homes via telemedicine will be reimbursed for dual eligibles (Medicaid and Medicare) with Medicaid the payer of last resort

Reimbursement Options - Private

- No widely accepted standard
- Some value telehealth and reimburse a variety of services
- Others have no comprehensive reimbursement policy
 - Prior approval may be required
- Check with contracted payers to verify

RCM: ICD-10 Grace Period

1. Prepare for Risks Associated with Unspecified ICD-10 Code Usage

Perform Internal Review

- Review usage reports of top unspecified ICD-10 diagnosis codes
- Identify any patterns or trends in unspecified ICD-10 coding
- Review clinical documentation
 - Verify if more specific diagnosis codes can be assigned based on the documentation
 - If documentation is not complete for desired level of specificity, look to provide clinical documentation improvement education to clinicians

Ramifications of using unspecified ICD-10 codes post grace period

- Increase in post payment audits
- Increase in quality reporting errors
- Increased payer requests for medical records and documentation

RCM: ICD-10 Grace Period

2. Check EMR Software

Review clinical templates with pre-loaded unspecified ICD-10 codes

- Consider removing or replacing with more specific code options after internal discussion with providers and clinicians

Review problem history and previous diagnosis info for unspecified ICD-10 codes

- Be diligent when reviewing problem history and previous visit diagnosis information to prevent continuous usage of unspecified codes for existing patients

RCM: ICD-10 Grace Period

3. Prepare for the Future

Influx of new ICD-10 codes as part of CMS thawing of “partial code freeze”

- 2012-2015: Annual code updates limited to ease transition (code freeze)
- 2016 (October): Regular updates to begin
- 2,000 new ICD-10 codes introduced for 2016

Year-Over-Year reporting inconsistencies

- Unspecified ICD-10 from 2016 to be compared against specific codes in 2017
- Prepare to mitigate year-over-year statistical reporting inconsistencies

RCM: ICD-10 Grace Period

Patients

Charts

Doug Tester X

X

Doug Tester, DOB:01/01/1981, 35 y.o., Male MU937

Patient Actions Upload

4

Show Menu

Chart (MU937A6)

Save

Save & Close

More

CC

S

O

A

P

Billing

+

-

Patient Charts

Apr 4, Mr. Tester is a 35

08/18/15

Assessment Notes

Go

Frequency

Alphabetic

Post-op lap appen

Hypertension contr

Anxiety

RPE

Pain

+ Assessment Field

Diagnosis Codes

C.S.	Code	Description	Status	Diagnosed Date	Resolved Date	Edu.	Cog/Func.	Actions
ICD10	I10	Essential (primary) hypertension	ACUTE	04/06/2015 at 00:00 am EST		No	No	  
	ICD10	R52 Pain, unspecified	ACUTE	04/06/2015 at 00:00 am EST		No	No	  

10 per page Columns

Showing page 1 of 1 (1 - 2 of 2)

Show total count

Go

Submit

Search

DX QuickPick

Diagnosis / SNOMED CT Codes

RCM: ICD-10 Grace Period

Encounter #MU937A21 Jun 21 (Patient 35 y.o.) , seen by Thomas Gibbons NEW

Encounter Billing Save Save & Close Cancel More Save & Make Ready NEW + -

Patient Encounters
Jun 21
Apr 7
Apr 6
Apr 4, Mr. Tester is a 35 year
Apr 4
Apr 1
Mar 3
Feb 26
Jan 25
08/18/15
08/07/15
07/31/15
03/27/15

Fee Schedule: DOCTOR'S FEE SCHEDULE
Created By: DOUG SWORDS on 06/21/2016 at 05:49 am EST
Last Edited By: DOUG SWORDS on 06/21/2016 at 08:07 am EST

Diagnosis Codes

Submit Search Reorder DX QuickPick
☒ **Apply new diagnoses to all CPT Codes Below**

C.S.	Code	Description	Actions	
	ICD10	#1 - R52	Pain, unspecified	Apply to CPTs ✕
	ICD10	#2 - M17.9	Osteoarthritis of knee, unspecified	Apply to CPTs ✕
	ICD10	#3 - I10	Essential (primary) hypertension	Apply to CPTs ✕

CPT® Codes/Charges

Submit Search Reorder Advanced Mode Clear All DX Pointers

RCM: ICD-10 Grace Period

- **Aetna**: The company stated that for dates of service of Oct. 1, 2015, and after, providers “should use ICD-10 codes in all transactions where ICD coding is required. All policies that we apply during the claims payment process won’t change, other than a conversion to the ICD-10 code set.”
- **Anthem**: **Anthem will follow CMS guidance** and not reject Medicare Part B Fee-for-Service Claims that are coded with an ICD-10 code within the correct family even if the correct level of specificity is not used.

RCM: ICD-10 Grace Period

- **Cigna**: In a frequently asked questions document from September 2015, Cigna stated that “**When sufficient clinical information isn’t known or available about a particular health condition to assign a more specific code, it will be acceptable to report the appropriate ‘unspecified’ code.** (e.g., a diagnosis of pneumonia has been determined, but not the specified type.)”
- **Humana**: The company states that “**Humana will follow current CMS guidelines.** Per CMS, each health care encounter should be coded to the level of certainty known for that encounter. Clinicians should report unspecified codes when such codes most accurately reflect what is known about the patient’s condition at the time of that particular encounter. It is inappropriate to select a specific code that is not supported by the medical record documentation.”⁵

RCM: Prior Authorizations

Peach State Advantage : No retro authorization after 11/01/2016

A Pre-Auth tab is available on the Peachstate website to determine if a authorization is required

To submit a request for authorization by the portal or by fax at 877-689-1055 with the following information CPT4 code , diagnosis code, provider's name tax id and NPI, and of course the clinical supporting documentation .

RCM: Credentialing

Medicare

- Use PECOS to verify that your information is current , make changes or add additional locations or providers whenever possible.
- The Medicare Learning Network has released a Technical Assistance Contact Sheet (ICN 903766) to provide information for assistance with using the system as well as resources links Passwords expire every 60 days but you can reset your password under the My Profile link.

Revalidation

- All providers must revalidate every 5 years and suppliers every 3 years and CMS providers a lookup tool on the cms.gov website where providers can check their status .

Medicaid

- Providers must have a number for each location
- The CVO process will centralize the credentialing process; if you are a member of a IPA or PHO then you are excluded from the process
- The CVO process will not exclude you contracting and credentialing with the CMO's



Revenue Cycle Performance with Azalea

Best Practices For Improving your Revenue Cycle

- Front-end Process
- Documentation
- Charge Capture
- Coding
- Claims Submission
- Payment Posting
- Accounts Receivable Follow-up

Revenue Cycle Performance with Azalea

Best Practices: Front End Process

 Edit Appointment

Appointment

Checkout



\$



More ▾

 Doug Testerson, 45 y.o. MU78 (MRN# WC)

* Patient has a copay of 30.00.

* Patient has a patient balance of \$252.64.

* Patient has an insurance balance of \$2,425.18.

 Appointment Details

Appointment Time: Wed, August 17, 9:00am EST - 9:30am EST

Location: CLINIC

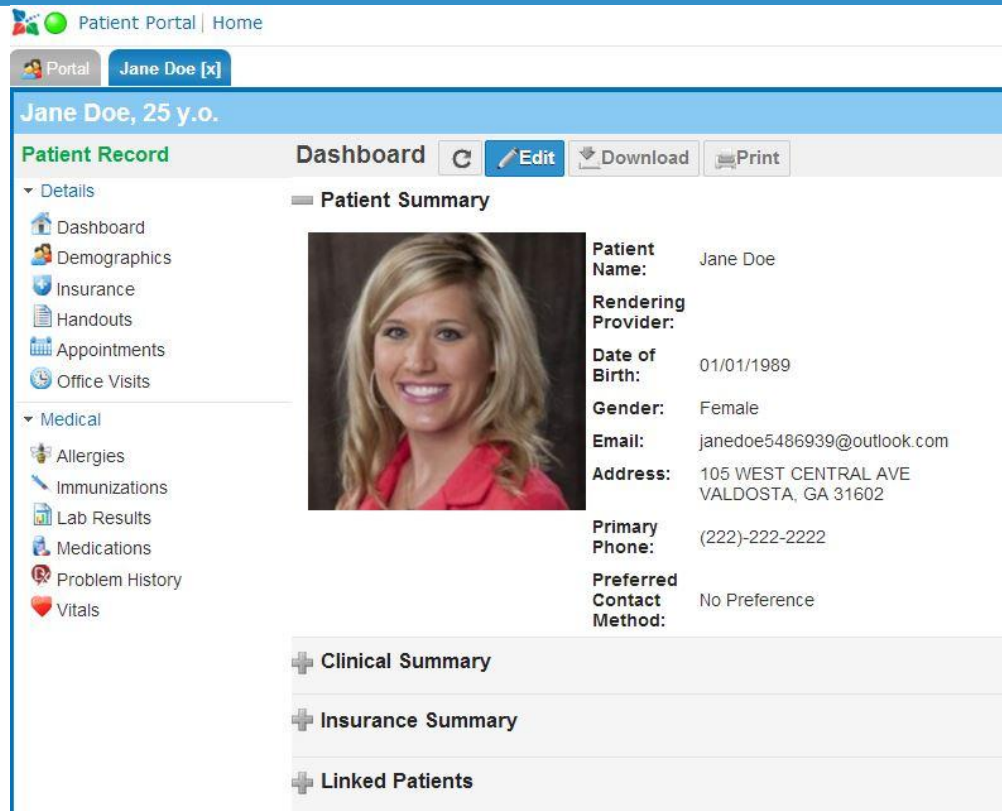
Provider: PHILIP LEONARD

Appointment Reason: ADULT WELL VISIT ▾

Revenue Cycle Performance with Azalea

Best Practices: Front End Process: Patient Portal

- Request appointments and view future appointments
- Easy-to-use online bill payment
- Patient statement messaging
- Update demographic and insurance information online
- Request medication refills
- Easy access to medication list, history, and lab results
- Secure messaging allows patients to interact directly with healthcare



The screenshot displays a patient portal interface. At the top, a navigation bar includes a logo, the text "Patient Portal | Home", and a "Portal" button. Below this, a header for "Jane Doe [x]" is visible. The main content area is titled "Jane Doe, 25 y.o." and features a "Patient Record" tab. To the left of the main content is a sidebar menu with categories: "Details" (Dashboard, Demographics, Insurance, Handouts, Appointments, Office Visits) and "Medical" (Allergies, Immunizations, Lab Results, Medications, Problem History, Vitals). The main content area is divided into two sections: "Patient Summary" and "Clinical Summary". The "Patient Summary" section includes a patient photo and a table of personal information. The "Clinical Summary" section includes expandable sections for "Insurance Summary" and "Linked Patients".

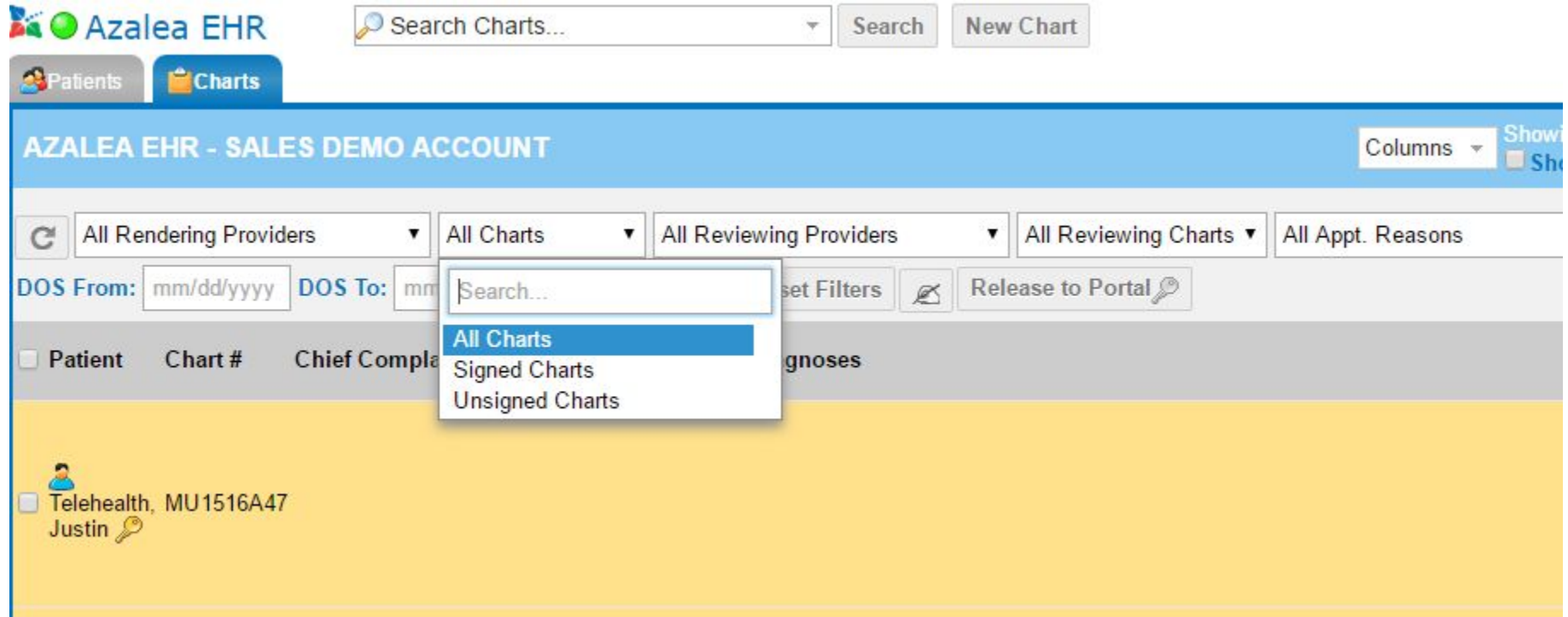
Patient Summary	
Patient Name:	Jane Doe
Rendering Provider:	
Date of Birth:	01/01/1989
Gender:	Female
Email:	janedoe5486939@outlook.com
Address:	105 WEST CENTRAL AVE VALDOSTA, GA 31602
Primary Phone:	(222)-222-2222
Preferred Contact Method:	No Preference

Below the Patient Summary section, there are three expandable sections:

- + Clinical Summary
- + Insurance Summary
- + Linked Patients

Revenue Cycle Performance with Azalea

Best Practices: Documentation



The screenshot displays the Azalea EHR interface. At the top, the 'Azalea EHR' logo is on the left, and a search bar labeled 'Search Charts...' is in the center, with 'Search' and 'New Chart' buttons to its right. Below the logo, there are tabs for 'Patients' and 'Charts', with 'Charts' being the active tab. The main header area is blue and contains the text 'AZALEA EHR - SALES DEMO ACCOUNT' on the left and 'Columns' and 'Show' on the right. Below the header, there are several filter boxes: 'All Rendering Providers', 'All Charts', 'All Reviewing Providers', 'All Reviewing Charts', and 'All Appt. Reasons'. Below these filters, there are fields for 'DOS From: mm/dd/yyyy' and 'DOS To: mm/dd/yyyy', followed by a 'Search...' dropdown menu. A dropdown menu is open from the 'All Charts' filter, showing three options: 'All Charts' (highlighted in blue), 'Signed Charts', and 'Unsigned Charts'. Below the filters, there are buttons for 'Set Filters', 'Release to Portal', and a key icon. The main content area is yellow and contains a table with columns: 'Patient', 'Chart #', 'Chief Complaint', and 'Diagnoses'. The first row of the table shows a patient named 'Justin' with a key icon next to their name, and a chart titled 'Telehealth, MU1516A47'.

Azalea EHR

Search Charts... Search New Chart

Patients Charts

AZALEA EHR - SALES DEMO ACCOUNT Columns Show

All Rendering Providers All Charts All Reviewing Providers All Reviewing Charts All Appt. Reasons

DOS From: mm/dd/yyyy DOS To: mm/dd/yyyy Search... Set Filters Release to Portal

☐ Patient Chart # Chief Complaint Diagnoses

☐ Telehealth, MU1516A47 Justin

Revenue Cycle Performance with Azalea

Best Practices: Coding

CPT® Codes/Charges

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Submit

Search

Reorder

Advanced Mode

Clear All DX Pointers

Claim Order	Code	Description	DOS ↑	POS	Mods	Units	Dx Pointers	ABN	RVU	UB-04	Actions
#1	❗ 99391	PER PM REEVAL EST PAT INFANT	Today	OFFICE (11)		1	I10 R52 J060 E1142	no	2.79	NO	
#2	✅ 99213 (R) (CCI)	OFFICE VISIT	Today	OFFICE (11)		1	I10 R52 J060 E1142	no	2.05	NO	
#3	✅ 96372 (CCI)	THER/PROPH/DIAG INJ SC/IM	Today	OFFICE (11)		1	I10 R52 J060 E1142	no	0.71	NO	
#4	❗ J1070	TESTOSTERONE CYPIONAT 100 MG	Today	OFFICE (11)		1	I10 R52 J060 E1142	no	0.00	NO	
#5	✅ 11404	EXC TR-EXT B9+MARG 3.1-4 CM	Today	OFFICE (11) QW		1	I10 L R52 L J060 L E1142 L	yes	6.17	NO	
#6	✅ 85025	COMPLETE CBC W/AUTO DIFF WBC	Today	OFFICE (11)		1	I10 N R52 N E1142 N Q516 N	no	0.00	NO	

25 per page

Showing page 1 of 1 (1 - 6 of 6)

Go

Revenue Cycle Performance with Azalea

Best Practices: Claim Submission & Status

PM Records		Claim Statuses		All Statuses... All Sources...	
		All Codes...		Search...	
Ledger (AHI)		Processed Encounter #		All Statuses... Accepted Rejected	
Claim Statuses				Code	
				Note	
07/06/2016 #CAM1093A4		LAND OF LINCOLN HEALTH		Entity acknowledges receipt of claim/encounter. Note: This code requires use of an Entity Code.	
Accepted		Acknowledgement/Acceptance into adjudication system-The claim/encounter has been accepted into the adjudication system.		Accepted Claim sent out electronically	
07/19/2016 #CAM1599A9		UNITED HEALTHCARE CHOICE		Entity acknowledges receipt of claim/encounter. Note: This code requires use of an Entity Code.	
Accepted		Acknowledgement/Acceptance into adjudication system-The claim/encounter has been accepted into the adjudication system.		Entity acknowledges receipt of claim/encounter Acknowledgement/Receipt-The claim/encounter has been received. This does not mean that the claim has been accepted for adjudication.	
07/20/2016 #CAM1092A1		GATEWAY EDI		Entity acknowledges receipt of claim/encounter. Note: This code requires use of an Entity Code.	
Accepted		Acknowledgement/Forwarded-The claim/encounter has been forwarded to another entity.			

Revenue Cycle Performance with Azalea

Best Practices: Payment Posting

Payments List Unapplied Payments List EDI Remits / Logs							
Payments							
Columns ☐ Show total count							
☐ Include payment alerts							
Batch# ↓	Payment Date	Created Date	Bill Type	Auto-Posted	Insurance	Amount	Note
9415	08/18/2016	Aug 18	Insurance	-	BLUE CROSS BLUE SHIELD SHBP	\$13.35	420499835 7/19/16
9412	08/19/2016	Aug 18	Insurance	Yes	BLUECROSS BLUESHIELD OF GEORGIA	\$1424.19	3345308408
9411	08/19/2016	Aug 18	Insurance	Yes	BLUECROSS BLUESHIELD OF GEORGIA	\$766.04	3345302812

Revenue Cycle Performance with Azalea

Best Practices: A/R Follow Up

Encounters List

AZALEA EHR - SALES DEMO ACCOUNT Columns ▾ Showing page 1 of 1 (1 - 17 of 17)
☒ Show total count

Encounter Billing  **Export Encounters** Show All Reset Filters **Make Ready** Update Status ▾ More ▾

All Claim Types ▾ All Providers ▾ All Locations ▾ BILLED ▾ All Charts ▾ Select Encounter Classes ▾

All Primary Ins. Classes ▾ All Primary Ins. ▾ All Secondary Ins. ▾

All Patient Classes ▾ All Next Payers ▾ Bal. Greater Than ▾ DOS From: 01/01/2016 To: 08/18/2016 Billed Date From: 0.01

 Diagnosis  Procedure

Go Reset Filters

- Mark Encounter(s) Billing Only
- Create Task(s)**
- Print Primary 1500
- Print Secondary 1500
- Print Tertiary 1500
- Print Primary IIR.01

Revenue Cycle Performance with Azalea

RCM Dashboard Stats - Financial

Practice Analysis From mm/dd/yyyy To mm/dd/yyyy Month Export								
From Date	To Date	Gross	Ins Pmt	Other Pmt	Total Pmt	Ins Adj	Other Adj	Total Adj
07/01/2016	07/31/2016	\$201,016.80	\$56,955.13	\$9,719.12	\$66,674.25	\$182,303.73	\$4,396.33	\$186,700.06
06/01/2016	06/30/2016	\$197,457.23	\$62,593.63	\$18,793.91	\$81,387.54	\$228,006.75	\$7,708.74	\$235,715.49
05/01/2016	05/31/2016	\$167,179.59	\$62,572.99	\$12,767.86	\$75,340.85	\$174,333.22	\$2,824.36	\$177,157.58
04/01/2016	04/30/2016	\$239,633.08	\$56,284.45	\$17,606.85	\$73,891.30	\$196,179.43	\$1,477.05	\$197,656.48
03/01/2016	03/31/2016	\$273,616.49	\$55,746.19	\$18,044.07	\$73,790.26	\$201,147.78	\$8,731.93	\$209,879.71
50 per page Columns						Showing page 1 (1 - 5)		Go <<<>>>
						☐ Show total count		

Revenue Cycle Performance with Azalea

RCM Dashboard Stats - Aging

Aging From mm/dd/yyyy To mm/dd/yyyy Primary Export																		
Date ↓	0-30	31-60	61-90	91-120	121+	Total	0-30	31-60	61-90	91-120	121+	Total	0-30	31-60	61-90	91-120	121+	
08/01/2016	\$421,021	\$23,021	\$4,491	\$3,137	\$4,927	\$456,597	1719	88	20	9	20	1856	93%	5%	1%	0%	1%	
07/01/2016	\$497,600	\$21,055	\$7,180	\$3,846	\$3,768	\$533,450	1905	77	27	14	17	2040	93%	4%	1%	1%	1%	
06/01/2016	\$412,082	\$21,605	\$6,706	\$4,264	\$5,541	\$450,198	1719	95	28	18	26	1886	91%	5%	1%	1%	1%	
05/01/2016	\$468,837	\$21,171	\$15,006	\$9,027	\$7,289	\$521,329	1980	100	87	37	37	2241	88%	4%	4%	2%	2%	
04/01/2016	\$510,723	\$30,983	\$14,119	\$2,302	\$8,705	\$566,833	2166	176	86	12	38	2478	87%	7%	3%	0%	2%	
Showing page 1 (1 - 5)																		
50 per page Columns ☐ Show total count Go ◀ ▶																		

Revenue Cycle Performance with Azalea

RCM Dashboard Stats - Benchmarks

General									From	mm/dd/yyyy	To	mm/dd/yyyy	Export
Extract Date ↓		Days in AR	Pmt Ratio	Pmt/Enc	Enc Qty	Hold Credits	Inc Enc	New Enc	Uns Charts				
08/01/2016		31.12	46.18%	\$96.38	2944	0	7	137	530				
07/01/2016		33.36	37.53%	\$82.93	3315	0	6	0	179				
06/01/2016		30.33	45.44%	\$93.58	3393	0	9	0	228				
05/01/2016		32.63	40.10%	\$81.74	3590	0	13	0	673				
04/01/2016		30.57	39.07%	\$81.71	4030	0	13	0	766				
50 per page Columns ▾						Showing page 1 (1 - 5)							
						☐ Show total count			Go ◀◀▶▶▶				



Thank you ➔