

End of Year Review

December 2020

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Contracts and Credentialing

Set up Master files for Contract and Credentialing Details
Establish Periodic reviews of Key Information

Monthly

Quarterly

Annually

Remove inactive providers from rosters

- Review for upcoming contract renewals
- Review for upcoming re-credentialing dates
- Ensure CAQH profiles are up to date for all credentialed providers

- Verify all Service locations and Billing address, fax numbers and emails are current with each funder
- Verify the correspondence address is current to receive important notifications









Compliance

Work Plan of OIG 2021 (Office of Inspector General)

Tele-Health

- Program Integrity
- 2. Documentation
- 3. If providers followed guidance given by payers

Home Health Agencies

- Includes Speech,
 Physical and
 Occupational
- 2. Evaluate trends for outliers.

Medicaid

- 1. Overpayments
- 2. EVV
- 3. Increase in Enrollment has caused increase in payments

For more detail on the OIG Work Plan of 2021 go to: https://oig.hhs.gov/reports-and-publications/workplan/active-item-table.asp



Importance of Benefit Checks

Insurance verification is the first and most significant step in billing and collecting for services rendered.

There are three main reasons to ensure you have a process to verify or re-verify all of your active patient's benefits.

- 1. Improves cash flow
- 2. Minimizes claim rejections and denials.
- 3. Increases patient satisfaction

We recommend calling **two** times to verify the benefits as most insurance companies have difficulty in verifying ABA benefits.



To effectively complete a New Year benefit check; ensure you have the following:

- Copy of insurance card (front & back)
- Current demographic form for patient (and subscriber of payer)



Authorizations



• Update reports for all expiring auths and prepare ahead for new authorization requests in the new year



- Have a plan for when families have changed insurance in the new year and there needs to be a new authorization
- Review secondary plans



Claims Submission



One of the main areas that providers leave "money on the table" is by not ensuring that all claims have been accepted and adjudicated by the payer. This includes submission of corrected and secondary claims.

Claim Rejections

- Daily reconciliation of claim rejections from Clearinghouse
- Verify that all claims have been submitted from the PM system and haven't been caught in the internal que.

Corrected Claims

* If team members are late in entering their time OR if there are edits after a claim has been submitted, it is important that the billing team has a process in place to capture these updates so that a corrected claim can be submitted timely.

Secondary Claims

Once patients with a secondary insurance have been identified it is important that secondary claims are submitted timely and that patients are not billed for balances prior to both payers processing the claim.

Payment Posting



- Ensure all payments deposited as of 12/31 have been recorded (applied) in your practice management and accounting systems.
- Posting zero payments with details of denials is beneficial in your follow-up process for denied claims. Zero remits in the new year can also be 100% deductible.

Accrual Basis Accounting

- If you use accrual-basis accounting, payments should be recorded at year end based on deposit dates to your bank account.
- Keep in mind your 1099 from Insurance plans will be based on the check issued date so there could be a discrepancy to review with your CPA if a check was issued the last week of the year that you have not deposited.

Cash Basis Accounting

- If you use cash-basis accounting, payments should be recorded at year end based on deposit dates to your bank account.
- With cash-basis accounting, payments are also used to recognize revenue.

- Tie-out bank deposit totals to practice management and accounting systems on a monthly basis.
- If you have unapplied or unreconciled (out of balance) payments, your Accounts Receivable balances will be inaccurate.
- Pay close attention to recoups and offsets and ensure the total net payment posted is reflected accurately.



Accounts Receivable

Aging Schedule						
Customer	Total Balance	Outstanding Balance	Days Past Due			
			1 to 30	31 to 60	61 to 90	90+
1	1,200,000	1,000,000		200,000		
2	865,235	562,354	151,440	151,441	- 1	
3	190,000	7,500		I	182,500	
4	58,325	50,200	8,125	I		
5	565,000	480,000				85,000
Total	2,878,560	2,100,054	159,565	351,441	182,500	85,000
D - 1 1 1 1 1 1 1	245 247 40	405.000.70	45.056.50	70 200 20	72 000 00	F4 000 00
Bad debts	315,247.40 10.95%	105,002.70	15,956.50	70,288.20	73,000.00	51,000.00

End of Year A/R Aging

Balances and % of Aged

During the year, watch for payment trends as well as patterns and issues with payers.

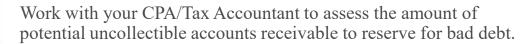
Determine if there are some target areas that need improvement in your processes.

Ensure that appeals have been filed where necessary to avoid missing timely appeal deadlines that could result in write offs.

Use for Cash Flow Projections

Bad Debt

Accrual Basis Accounting









Obtain current contact & insurance information.

Without current contact & insurance information you will be unable to verify benefits and to know where to send a patient statement.

Patient Responsibility



Verify patient cost share

We recommend getting two reference numbers from two separate phone calls to verify ABA benefits.

Current contact information is vital to ensure the effective collections with the patient.



In Network vs Out of Network

It is important to know if you are out of network as this will drastically impact the financial responsibility of the patient.



Accurate and timely patient statements

If you have all of the above, you will provide quality customer service by billing the families the accurate amount which will result in quicker payment to you for your services.



Accounts Payable and Payroll

Other Year End Considerations

Accounts Payable / Expenses

Accrual basis accounting

Be sure that all your Invoices and Expenses have been input to your accounting system, despite whether they are paid or not.

Cash basis accounting

- Be sure that you have paid all
- of the Invoices and Expenses
- that you want to recognize
- in the current year.



Payroll

Accrual basis accounting

Record your final payroll of the year as an accrual in your accounting system.



Cash basis accounting

Complete your final payroll with a check date in the current year and record in your accounting system.

Budget and End of Year Taxes



Take a look at the Year, how did you do?

What do you want to plan for next year in your Budget?

Do you have all your information ready for your CPA for taxes?

Budget



Year End Info for CPA





Resources

Consulting, Training, Webinars and Blog Posts from ABA Therapy Billing and Insurance Services www.ababilling.net

Revenue Cycle Management for ABA Therapy Book www.capecodcollab.net

Coupon codes:

- eBook discount code= C2ALBSX
- Print discount code= XDTX559
- ABA Coding Coalition <u>www.abacodes.org</u>
- The Council of Autism Service Providers (CASP) <u>www.casproviders.org</u>
- Association of Professional Behavior Analysts (APBA) <u>www.apbahome.net</u>

