MEDICAL BILLING What is the next step?

By: Mary Stoner, President and

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- Providers:
 - Massive phone calls and lines backed up out the door
 - Immediate needs for freezers, inventory, payer enrollment, as well as scheduling options and electronic intake processes
 - No insurance cards or patient refused to provide..."bill it to HRSA"
 - Wrong insurance (gathering prescription drug plan info and not medical info)
 - Patient completed forms, and no time to review documentation
 - No Assignment of Benefits included in their documentation
 - Shortage of staffing
 - Sick, quit, lack of people to hire, difficult/impossible at-home options
 - High salary workers needed to administer treatment

COVID Hurdles: Providers

COVID Hurdles: Billing Team

- ► Billing Team:
 - Every payer for every provider needed EDI setup
 - Tons of W9 developments
 - Correcting claims (more restriction rules needed)
 - ▶ Wrong date of service not changing DOS when billing on a different day than administered
 - ▶ Wrong SCC codes used This causes incorrect billing codes to be submitted
 - > Duplicate claims Entering same claim with different insurance, different DOS, same SCC
 - Massive workloads
 - Shortage of staffing...sick, quit, lack of people to hire
 - ► Shortage of equipment...desks, computers, phones, etc
 - Work at home options

COVID Hurdles: Payers

- Payers:
 - ▶ Major influx of EDI, ERA, and W9 requests
 - Massive workloads
 - Shortage of staffing...sick, quit, lack of people to hire
 - ▶ Shortage of equipment...desks, computers, phones, etc
 - Work at home options
 - Programming changes needed
 - Short notice of coding changes
 - Failure to make massive updates to current claim processing rules

What we did...

We opened a second location...tripled our staff Enhanced the educational opportunities and onboarding for our clients Forward thinking to continue pharmacies momentum Implemented Insurance Discovery and Advanced Eligibility Options

> Created new processes with payers to streamline claims processing BCBS COVID Sweep process initiated in 14 states Created relationships and network opportunities with the payers Providing payers with resources to understand what pharmacists are able to bill for so they can expand their technology to include pharmacist as providers.

Pursuing advanced technology and integration with other partners to allow for EMR documentation, created more robust NCPDP rules engine to provide an upstream solution to claim rejections

Invested in a PITBULL to lead the charge for independent pharmacy's

Leanne Haley-Brown RPh VP of Pharmacy Operations

Pharmacy Operations Manager for 19 independent pharmacies for over 9 years Consulting clinical pharmacist since 1989

Pharmacy owner for over 20 years

FULL service independent pharmacy owner for over 20 years

Including: A full line of custom and non custom DME/POS services

Diabetes Self Management Educator

Asthma and Osteoporosis Educator for BCBS

of Western NY

Medical contracts with many payers

Pharmacy Business Coach



Lessons Learned

Education is key to success

- We must make time for it, even when there is no time left
- How to know the unknown? We don't know what we don't know!

In times of great need, we needed:

- Greater organization
- The ability to turn on a dime
- Slow down and do it right the first time

When a tornado rips through your community...we all step in to help!

Best Workflow Practices

KNOW YOUR PAYER!!!

Medicare Part B is very straightforward and was a fairly streamlined process for CoVid. CoVid vaccines were an entry point for many Pharmacies into medical billing.

Medicare Advantage and Commercial Insurance is NOT the same!!

- → Is the service covered on the Prescription Benefit, the Medical Benefit ?

 Check with the prescription side first, if paid be happy!!.

 → If rejected and told to bill on the medical side, CALL the commercial payor or your intermediary for: network status, eligibility and deductible information. This is so important because medical claims will take MUCH longer to adjudicate.
- → Get comfortable with Medical insurance cards. Letters matter here!! Copies of front and back should be made and scanned to the patient's profile.
 → Research your local Commercial payers, let's work together on getting your
- Pharmacy in-network

How can we best support you?

Let's clean up the mess...We will need your help!

- > Do you need training on how to read and EOB?
- > Are you reviewing your claims portal for rejections/denials?
- Information on how to do some checks and balances?
- Access to easier eligibility tools...and how to understand the responses?
- Additional staff training?
- Improve customer service and follow up?
- Connect with your congressmen (women) to encourage additional funding for the CARES Act HRSA funds for the Uninsured

Questions...

...Comments

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