

Practical Tips to Improve Your Cancer Program's Revenue Cycle Management

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Your appeal

GENOMIC HEALTH INC, filed an appeal on your behalf, for the gene testing (Oncotype Dx Genomic Prostate Score) provided to you on January 28, 2019, by Genomic Health, Inc. because you feel the service is medically necessary.

Our decision

We received a recommendation to uphold the denial from an External Reviewer Medical Doctor (MD), who is board certified and specializes in urology. Our Anthem Medical Director Reviewer

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MD, who is board certified and specializes in internal medicine denied this request based upon this specialty match review recommendation. Here's why:

We cannot approve your request for gene testing (Oncotype Dx Genomic Prostate Score). We see that the member has prostate cancer. Medical studies do not show this test is as safe and effective for the treatment of this condition when compared to other therapy. For this reason, this service is denied as investigational. We based our decision on Anthem Medical Policy (GENE.00009) Gene-Based Tests for Screening, Detection and Management of Prostate Cancer (eff. 10/01/2019).



Revenue Cycle Oncology Staffing

- Each billing team member has separate section of the patient alphabet
- Obtains all Preauthorization
- Patient Financial counseling
- Assures coding of claims is correct and then submits claims
- Post payments and remittances
- Follow up on unpaid claims and questions from patients on accounts
- Determine who is the natural leader and have that person lead and make their alphabet smaller than the others



Collections Percentage

- Total Receipts since inception to now = \$15,692,907
- Total Adjustments associated with receipts = \$33,978,801
- Collection % = 31.59%
- After \$1 million of write offs with no further collections
- Receipts the same as above
- Total Adjustments = \$34,978,801
- Collection Percentage = 30.97%
- This equals a .64% difference



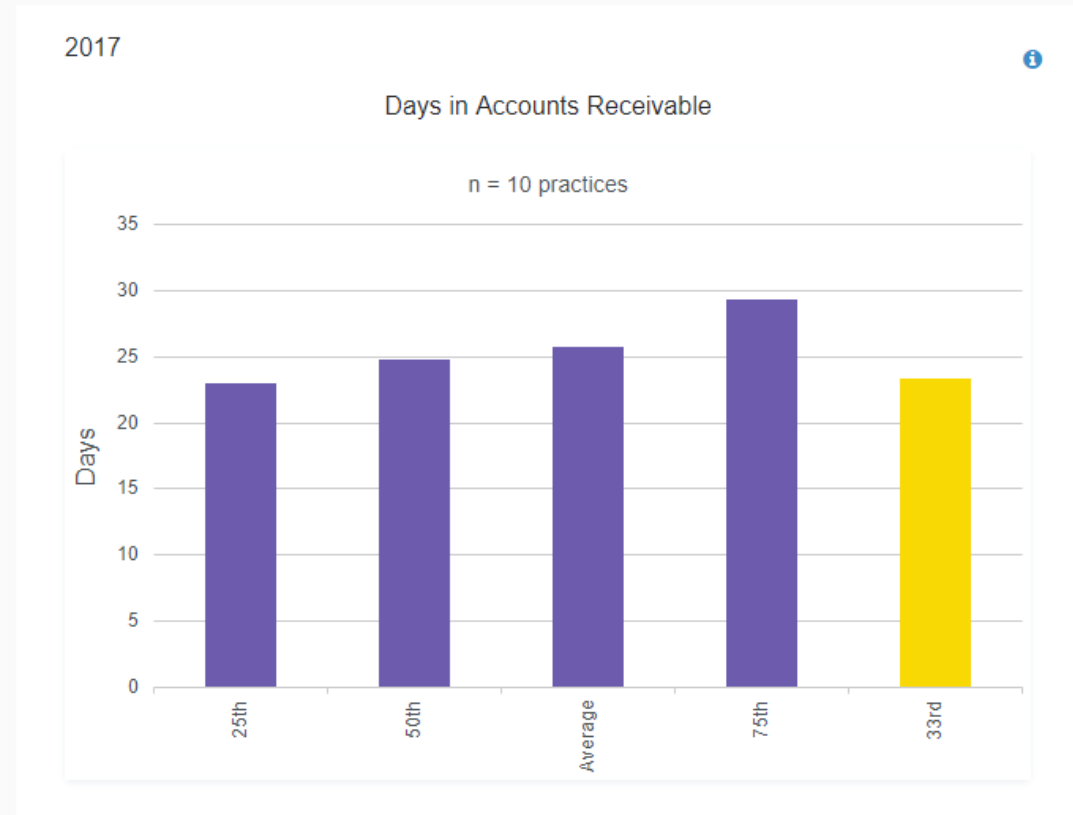
Days in Accounts Receivable

- Overall Days in A/R at end of 2019 was 29.8
- Overall Days in A/R for Medicare was 23.2
- Overall Days in A/R for Anthem was 43.34
- Your team works the Anthem A/R hard
- New days in A/R for Anthem at June 2019 becomes 32.45
- Overall Days in A/R becomes 26.3
- Most practices are between 20 to 30 days
- Hospitals tend to be between 30 to 50 days

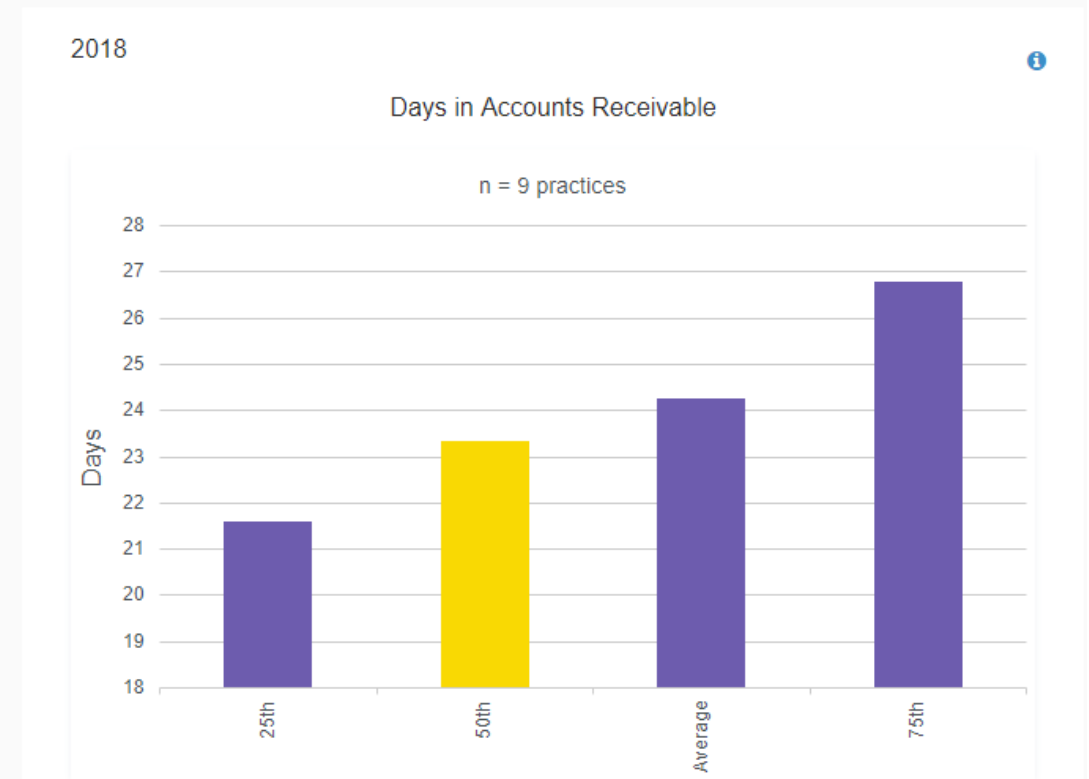


Days in Accounts Receivable - COAnalyzer

Accounts Receivable - 2017



Accounts Receivable - 2018



Technical Denials Report

Transaction SubSubGroup	January	February	March	April	May	June	July	2011
Eligibility								
00000826 - NO AUTHORIZATION (OUTPATIENT)	-496	1,619	-94		-15,665		1,562	-13,074
Total: Eligibility	-496	1,619	-94		-15,665		1,562	-13,074
Med.Records								
00000835 - TIMELY FILING W/O MED RECORDS					-2,881			-2,881
Total: Med.Records					-2,881			-2,881
Pt Accting								
00000260 - CLOSE ACCOUNT	-18							-18
00000262 - SMALL BALANCE W-O	-57	-85	-140	1	-55	-30	-9	-374
Total: Pt Accting	-75	-85	-140	1	-55	-30	-9	-392
Pt Care								
00000907 - MEDICARE LCD	-17,168	3,038		10,322	-4,334	-7,914	-3,180	-19,237
Total: Pt Care	-17,168	3,038		10,322	-4,334	-7,914	-3,180	-19,237
Total: Technical Denials	-17,739	4,572	-234	10,323	-22,935	-7,944	-1,627	-35,584

Review A/R adjustments and write off reports for which you have more control over (such as for timely filing, no preauthorization, appeals being denied, etc.)



INSURANCE COMPANIES ACCOUNT AGING REPORTS

	<u>OVERPAID</u>	<u>CURRENT</u>	<u>31- 60</u>	<u>61- 90</u>	<u>91- 120</u>	<u>120 - 150</u>	<u>>150</u>	<u>TOTAL</u>	<u>>60</u>
FEBRUARY	-3,815 -0.35%	1,002,310 91.46%	79,177 7.22%	13,980 1.28%	4,109 0.37%	126 0.01%	1 0.00%	1,095,888 99.99%	18,216 1.66%
MARCH	-9,955 -0.86%	1,089,917 93.67%	49,670 4.27%	11,704 1.01%	18,256 1.57%	3,954 0.34%	1 0.00%	1,163,547 100.00%	33,915 2.91%
APRIL	-5,439 -0.51%	979,756 91.07%	43,050 4.00%	32,522 3.02%	8,112 0.75%	13,993 1.30%	3,838 0.36%	1,075,832 99.99%	58,465 5.43%
MAY	-6,006 -0.43%	1,298,951 93.75%	71,889 5.19%	7,801 0.56%	1,133 0.08%	348 0.03%	11,195 0.81%	1,385,311 99.99%	20,477 1.48%
JUNE	-6,959 -0.63%	994,191 90.09%	103,818 9.41%	10,807 0.98%	1,502 0.14%	338 0.03%	30 0.00%	1,103,727 100.02%	12,677 1.15%
JULY	-6,281 -0.52%	1,152,745 95.93%	37,908 3.15%	14,259 1.19%	2,060 0.17%	837 0.07%	159 0.01%	1,201,687 100.00%	17,315 1.44%
AUGUST	-4,938 -0.46%	1,017,155 95.18%	23,245 2.18%	19,560 1.83%	7,118 0.67%	822 0.08%	5,633 0.53%	1,068,595 100.01%	33,133 3.10%
SEPTEMBER	-6,267 -0.60%	950,606 90.44%	98,950 9.42%	6,491 0.62%	78 0.01%	864 0.08%	245 0.02%	1,050,967 99.99%	7,678 0.73%
OCTOBER	-6,545 -0.56%	1,026,980 88.59%	120,658 10.41%	16,191 1.40%	843 0.07%	40 0.00%	1,066 0.09%	1,159,233 100.00%	18,140 1.56%
NOVEMBER	-6,906 -0.60%	1,063,303 92.22%	88,694 7.69%	7,178 0.62%	293 0.03%	0 0.00%	421 0.04%	1,152,983 100.00%	7,892 0.68%
DECEMBER	-7,627 -0.75%	930,164 91.13%	84,991 8.33%	12,522 1.23%	474 0.05%	57 0.01%	94 0.01%	1,020,675 100.01%	13,147 1.29%
JANUARY	-3,096 -0.22%	1,270,458 90.48%	127,691 9.09%	8,533 0.61%	330 0.02%	110 0.01%	105 0.01%	1,404,131 100.00%	9,078 0.65%



Total Aged Accounts Receivables

Patient Total		(\$6,010.19)	\$6,177.45	\$5,234.65	\$4,767.60	\$6,325.68	\$22,925.47	\$39,420.66
	%	(15.25)	15.67	13.28	12.09	16.05	58.16	3.44
Insurance Total		\$0.00	\$927,126.26	\$168,565.64	(\$1,041.25)	\$8,640.05	\$2,762.96	\$1,106,053.66
	%	0.00	83.82	15.24	(0.09)	0.78	0.25	96.56
Total		(\$6,010.19)	\$933,303.71	\$173,800.29	\$3,726.35	\$14,965.73	\$25,688.43	\$1,145,474.32
	%	(0.52)	81.48	15.17	0.33	1.31	2.24	

- Insurance balances over 90 days – If number is high then think of hiring an outside company to catch your staff up and then hold your staff accountable
- Refunds found after 60 days should be refunded immediately

Accounts Receivable Aging Report - COAnalyzer

ACCOUNTS RECEIVABLE AGING REPORT 2018

	Per Hematologist/Oncologist	Practice %tile	25th %tile	50th %tile	Average	75th %tile
0-30 Days	\$ 720,187	11%	\$ 829,755	\$ 1,048,455	\$ 947,979	\$ 1,131,597
31-60 Days	\$ 240,595	75%	\$ 144,878	\$ 179,287	\$ 223,386	\$ 240,595
61-90 Days	\$ 164,609	100%	\$ 52,984	\$ 59,262	\$ 82,421	\$ 79,919
91-120 Days	\$ 144,591	100%	\$ 26,548	\$ 38,241	\$ 51,851	\$ 56,616
120+ Days	\$ 112,500	25%	\$ 112,500	\$ 127,129	\$ 223,238	\$ 194,364



Order Summary (Includes all orders for this client)

Cost Per Account :	
# Assigned:	215
Avg Balance:	\$524.92
Avg Age of Accounts Assigned (Months):	4.2

Recovery Rate

Total Dollars Assigned:	\$112,857.62
Less mail skips:	- \$12,780.08
Less accounts still active:	- \$460.18
Net Dollars Assigned:	\$99,617.36

Total Performance:

Total Performance:	\$11,271.06
Paid in Full:	\$5,533.65
Cancelled (Fully Resolved):	\$4,125.93
Suspended:	\$1,149.51
Partial Payments:	\$461.97

% Recovery Rate on Net Dollars Assigned:	11.3%
% Recovery Rate on Total Dollars Assigned: (less mail skips)	11.3%
% Accounts Responding:	32.56%

Patient balances over 6 months without a payment – Use other billing companies to follow up on collections of these balances

For every dollar invested,	\$4.20
For every account assign	\$52.42



Assignment Summary	# Assigned	\$ Placed	\$ Recovered
Transferred from TSI (Phase 1)	102	82,806.26	961.31
Direct Assign to CMS (Phase 2)	9	8,419.80	277.97
Total CMS Placements	111	91,226.06	1,239.28
Average Balance Assigned		821.86	
Performance Summary	# Assigned	\$ Placed	\$ Recovered
Total Assigned	111	91,226.06	1,239.28
Placed in Error, Deceased, Bankrupt	8	11,518.46	0.00
Less Active Accounts	33	30,356.50	81.58
Net Assigned	70	49,351.10	1,157.70
Performance			
Total Recovered			1,239.28
Recovery Rate on Net Assigned			2.51%
Recovery Rate on Total Assigned			1.36%
Account Detail Summary	# Assigned	\$ Placed	\$ Recovered
Paid Accounts			
Paid In Full	5	1,057.10	1,057.10
Settled In Full	0	0.00	0.00
Paid Service Fee	0	0.00	0.00
Returned Merchandise	0	0.00	0.00
Open Accounts			
Collection Efforts Continuing	30	24,114.06	81.58
Forward to Phase 3	2	3,898.16	0.00
Legal	1	2,425.86	0.00
Closed Accounts			
Collection Efforts Exhausted	59	46,575.76	100.60
Less: Skip-Cannot Locate	6	1,636.66	0.00
Deceased	4	8,488.17	0.00
Bankrupt / Defunct	2	98.75	0.00
Placed In Error	2	2,931.54	0.00
Disputed-Suit Not Advisable	0	0.00	0.00
Other	0	0.00	0.00

**ACCOUNTS PLACED IN COLLECTIONS –
PATIENTS WHO HAVE BEEN DISCHARGED FROM PRACTICE**



Missed Drug Report for Supportive Care

Office Location 1

	INVENTORY BALANCE May	PURCHASES May	INVENTORY BALANCE May	TOTAL USED May
PROCRIT 60K				0
PROCRIT 40K	0	4	2	2
PROCRIT 20K				0
ARANESP 200 MCG	1	4	3	2
ARANESP 300 MCG	1		1	0
ARANESP 100 MCG	2	4	3	3
ARANESP 150 MCG				0
ARANESP 500 MCG	1	1	1	1
ARANESP 25 MCG				0
ARANESP 40 MCG	1	4	5	0
ARANESP 60 MCG	3	4	2	5
NEULASTA 6MG	8	32	9	31
NEUPOGEN 300MCG	1		1	0
NEUPOGEN 480MCG	4		2	2

	TOTAL BILLED OUT	TOTAL USED	DIFFERENCE
J0885 PROCRIT 1K	80	80	0
J0881 ARANESP 1MCG	1500	1500	0
J2505 NEULASTA 6MG	31	31	0
J1442 NEUPOGEN 1MCG	0	960	-960

Office Location 2

	INVENTORY BALANCE May	PURCHASES May	INVENTORY BALANCE May	TOTAL USED May
PROCRIT 60K				0
PROCRIT 40K				0
PROCRIT 20K				0
ARANESP 200 MCG	3	2	2	3
ARANESP 300 MCG		3	1	2
ARANESP 100 MCG				0
ARANESP 150 MCG				0
ARANESP 500 MCG		2		2
ARANESP 25 MCG				0
ARANESP 40 MCG	2		2	0
ARANESP 60 MCG	3		2	1
NEULASTA 6MG	1	20	9	12
NEUPOGEN 300MCG	1		1	0
NEUPOGEN 480MCG	1			1

	TOTAL BILLED OUT	TOTAL USED	DIFFERENCE
J0885 PROCRIT 1K		0	0
J0881 ARANESP 1MCG	2260	2260	0
J2505 NEULASTA 6MG	12	12	0
J1442 NEUPOGEN 1MCG	1440	480	960



Payer Contracting

- Private Payers
 - Focus on the 5 biggest private payers
 - Focus on the CPT codes that are billed out the most when contracting (In the infusion center focus on 96413, 96415, 96367 & 96372) (Office 99204, 99205, 99214 & 99215) (Hospital 99223 & 99233)



Contract Negotiation Example with Anthem

CPT CODE	DESCRIPTION	COST PER CPT CODE	# OF TIMES PERFORMED Anthem	TOTAL REIMB VS COST-Anthem	New Negotiated Rates	TOTAL New REIMB VS COST-Anthem
38221	BONE MARROW BIOPSY	357.49	2	-374.60		-374.60
99201	Office/outpatient visit, new	109.75	0	0.00		0.00
99202	Office/outpatient visit, new	195.42	0	0.00		0.00
99203	NP DETAILED, LOW COMPLEX	279.05	12	-2,040.00		-2,040.00
99204	NP COMPREHENS, MOD CMLPX	318.27	63	-9,599.31		-9,599.31
99205	NP COMPREHENS, HIGH	413.33	56	-11,473.28		-11,473.28
99211	ESTAB PT-NP PHYSICIAN	39.64	98	-1,922.76		-1,922.76
99212	PROB FOCUSED, STRTFWD	81.39	169	-6,322.29		-6,322.29
99213	EXPANDED, LOW COMPLX	115.41	276	-11,721.72		-11,721.72
99214	DETAILED, MOD COMPLX	184.56	644	-49,085.68	135.43	-31,639.72
99215	COMPREHENS/HIGH COMPLX	280.78	385	-51,797.90	182.80	-37,722.30
99221	H&P/LOW	179.09	2	-152.94		-152.94
99222	H&P/MODERATE	298.48	40	-6,404.40		-6,404.40
99223	H&P/HIGH	416.65	43	-9,106.54		-9,106.54
99231	HOSP/PROB FOCUS/LOW	89.68	85	-4,279.75		-4,279.75
99232	HOSP/EXPANDED/MOD	147.82	163	-12,205.44	91.18	-9,232.32
99233	HOSP/DETAILED/HIGH	210.30	137	-14,409.66	131.40	-10,809.30
96360	IV infuse hydration, initial	89.30	10	-313.80		-313.80
96361	Each additional infuse hour	30.01	21	-307.44		-307.44
96365	IV infusion therapy/diagnost	109.53	215	-8,481.75		-8,481.75
96366	Each additional hr up to 8hr	43.86	173	-4,309.43		-4,309.43
96367	Additional sequential infuse	64.27	593	-20,090.84	37.99	-15,584.04
96368	Concurrent infusion	41.20	240	-4,910.40		-4,910.40
96372	Therapeutic/diagnostic injec	37.72	478	-5,893.74	31.74	-2,858.44
96374	IV push, single or initial dru	85.60	4	-113.56		-113.56
96375	Each addition sequential IV	39.86	99	-1,715.67		-1,715.67
96401	Chemo adminisrate subcut/IM	90.10	30	-450.60		-450.60
96402	Hormonal anti-neoplastic	68.47	9	-323.37		-323.37
96409	IV push single/initial subst	168.64	20	-1,148.80		-1,148.80
96411	IV push each additional drug	101.39	9	-352.62		-352.62
96413	Chemotherapy IV one hr initi	230.04	434	-40,869.78	169.84	-26,126.80
96415	Each additional hr 1-8 hrs	60.08	407	-12,954.81	35.31	-10,081.39
96416	Prolong chemo infuse>8hrs pu	241.66	13	-1,310.27		-1,310.27
96417	Each add sequential infusion	117.68	205	-11,223.75		-11,223.75
Total loss for on all E&M codes from Anthem patients				-305,666.90		-242,413.36
Total savings if you negotiate 8 E&M codes as shown above						\$63,253.54

\$305,667 Actual Anthem loss on E&M codes

\$63,254 Savings on having Anthem increase 8 highly utilized codes



Avoiding Embezzlement

- **No matter who you are embezzlement can happen right under your nose just as it did with me and my practice**
- **Do background checks on your employees before hiring them**
- **Do credit checks on employees working with money especially those in billing**
- Watch for employees who become defensive when asked questions about their areas of responsibility
- Watch for employees who take a long time to get back with answers and information to your questions
- When management or financial/operational issues change to make things tighter and more in compliance watch for any employee that leaves at that time
- If an employee in the financial/billing part of the practice never takes off time and keeps it all close to their chest not allowing others to help or learn can be a sign of covering up information – Make sure there is a back up and require time off to allow back up to fill in and see that everything is working smoothly in that position
- Look at monthly bank statements and accounting entries each month for consistency in historical trends



Questions???

