



# Denials & Downcoded Claims in Today's Emergency Department

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# Objectives

- Discuss changing denials landscape
- Understand challenges with facility Level of Service in the ED going forward
- Develop a game plan for responding to denials / under payments



# Poll

**DENIED**



HIM



Business  
Office

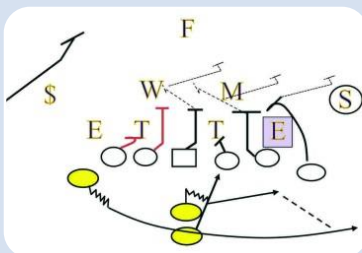


Outsource





Scouting



Play Calling



Blocking &  
Tackling



Scoreboard





# Scouting

- Denials are not new
  - 2 – 3% of net patient revenue
  - 9% of all claims
- Denials are expensive
  - Healthcare providers spend over \$9B annually appealing denials



# Scouting

- Denials are increasing due to recent payer changes  
... especially in the Emergency Department



Some Recent Headlines ...

## **UnitedHealth Group plans more**

UnitedHealthcare clamps down on insurance claims for  
costly emergency room visits

Anthem's effort to p  
bust--but still burden Texas allows Blue Cross Blue  
Shield to deny payments for

Ar  
Uni If it's not an emergency, Blue its  
ies

Blue Cross Blue Shield won't pay

emergency room

coverage denials

draw scrutiny

**Anthem among health insurers  
refusing to pay ER bills, doctors say**



# Trends & Payer Oversight

- Utilization of 99285
- PEPPER
- RAC
- Target Probe Educate
- Use of case rate payments
- MedPAC recommendation to create new national guidelines for the ED by 2022

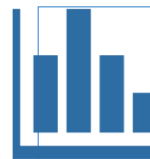




# Criticisms of Payer Specific Guidelines



Claims data misses resource utilization covered in documentation



CMS asks for consistent coding methodology across all patients



CMS guidance on developing internal guidelines for each facility



Hospital demographic challenges not accounted for in tool



Inconsistent application of practices across hospitals and geographic areas



“What is an emergency” burden falls to a sick patient



# Scouting

- Understand denial rates and their causes
- Gather & analyze data to understand the impact to your organization
  - Proactive
  - Reactive



# Play Calling

- Who & what are you going to fight?
  - \$\$\$ thresholds
  - Payer specific
  - Service location(s)
- How are you going to fight?
  - Denial by denial
  - First level only
  - Litigation
- What team are you putting on the field?
  - Internal resources
  - Outsourcing



# Blocking & Tackling

- Inside and outside your organization
- Payer relationships
  - Meet with plan liaison(s)
  - Processes
  - Contract reviews
  - Consistency of policy enforcement
  - Expectations/understanding of their policies (automated review vs. manual review)





Front End  
Processes



Clinical  
Documentation  
& Coding



Fight  
Denials/Payment  
Reductions





# Front End Processes

- Registration
- Use of quick care / urgent care within ED space for non-emergent visits





# Clinical Documentation & Coding

- Understand how you are determining Level of Service in the ED
- How are documentation deficiencies being addressed?
- Address the problem list





# Denials Management

- Implement process improvements throughout the patient encounter
- Now is not the time to throttle back on revenue initiatives





# Scoreboard

- Establish goals (short term/long term)
- Evaluate success rate(s)
  - Internal trending
  - Via network connections
- Leverage internal/vendor metrics
  - Coding accuracy
  - Provider queries
  - Denial rates





# Contact Information

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