

Part B Insider (Multispecialty) Coding Alert

PART B REVENUE BOOSTER: Your Front Desk Is On The Front Lines Of Capturing Reimbursement

Practice 'concurrent audits' to make sure you're not missing services

Improving your practice's financial picture starts with the information your practice collects from patients at the beginning. So you need to focus on both your front desk and your back office to improve your revenue, says **Catherine Brink**, president of **Healthcare Resource Inc.** in Spring Lake, NJ.

Your practice will be sunk without clear-cut policies and procedures spelling out who does what, says Brink, who's launching a new seminar on maximizing your revenue.

Revenue maximization -starts from the time your patient calls to make the appointment,- Brink adds. Your front-desk people should be checking on insurance information and whether your physician participates with that payor, plus whether the claim is related to motor-vehicle or workers- compensation insurance.

At the visit, your staff should be examining a photo ID to make sure the patient is who he says he is, as well as obtaining a copy of the patient's insurance card. For motor-vehicle or workers- compensation claims, you'll need to collect a whole set of documents from the patient up front. And of course, there's the copayment and deductible, if any.

At the back end, you should make sure your coding staff members are linking the correct ICD-9 codes to each CPT code, Brink adds. Soon, Medicare carriers will have to consider up to eight ICD-9 codes on each claim, so you should make sure you're noting all your the relevant diagnoses for patients with many long-term illnesses.

For example: A patient might come in with diabetic retinopathy, so you should note the retina problem plus the diabetes and any high blood pressure. These diagnoses could add to the level of complexity of an E/M visit.

You should start doing -concurrent auditing,- looking at your claims before they go out the door, Brink urges. That way, you can make sure the coders captured every service the physician performed--and also that you didn't bill for things the physician failed to document.