Top 9 things you need to know about Anesthesia Revenue Cycle Management

 Anesthesia billing is tremendously complicated. Small errors can result in delays and a failure to collect. At Medical Business Management, we specialize in revenue cycle management. We are sharing "The Top 9 Things You Need to Know About Anesthesia Revenue Cycle Management" to help anesthesiologists understand all of the factors that are impacting their billings and collections.

Do you have questions specific to your situation? Contact your anesthesia billing specialist at Medical Business Management by calling **(800) 477-4544** or email us at info@mbmps.com.

Here are some things that we share with our clients as we work with them to improve their revenue cycles.

The Top 9 Things to Know About Revenue Cycle Management

#1: How is the charge established?
There are a number of factors that can affect anesthesia billings, but the process can be broken down to a relatively simple formula. Charges are established by adding base units, time units, and modifiers, and then multiplying by your fee per unit. In other words:

(Base Unit + Time Units + Modifiers) x Fee Per Unit= Charge Amount

We will talk more in this white paper about factors that affect each component of this formula.

#2: Accurate Start and Stop Times
The industry follows Medicare's definition for anesthesia billing start and stop times. Anesthesia billing start and stop times are based on the continual presence of an anesthesia provider. It is critically important to record accurate start and top times. Do not round your time, and never guess.

#3: Understanding Billing Modifiers

Billing modifiers have a big impact on your charge amounts. There are a number of modifiers that come into play including:

- Physical Status
- Medical Direction
- Anesthetic Type
- Add-on Codes (age, emergency, guidance for example)

These modifiers can affect your charge amounts in a variety of ways. Contact an anesthesia billing specialist at Medical Business Management for more information about how how these modifiers impact your specific billing situation.

#4: Documentation is Critical

Accurate documentation is the difference between successful and failure in generating cash-flow. You can have the best systems available, but if the information that you feed into the system is inaccurate or incomplete, your billings and collections will suffer. Pay close attention to your start and stop times, and record them accurately. Keep up with the billing modifiers that we discussed in #3. If you log these accurately, your revenue cycle management is set up for success.

#5: Coding, CPT and ASA coding

The American Medical Association sets CPT (Current Procedural Terminology) codes for all surgical procedures. The American Society of Anesthesiologists sets and maintains ASA codes separately. One of the most important steps in revenue cycle management is converting CPT surgical codes to the correct ASA codes. Mistakes in converting these codes can result in long delays in payment. Sometimes it can even render charges ineligible for payment.

#6: Use Anesthesia Specific Software

At this point, you may be thinking that anesthesia revenue cycle management is an overwhelming challenge. The process to accurately calculate start and stop times, billing modifiers, and coding is tremendously complicated.

Fortunately, there are tools designed specifically for anesthesia providers to streamline this process.

Billing software specific to the anesthesia has room for multiple modifiers, concurrency checks, and it can handle multiple providers per case. These tools are designed to log the data that is critical to revenue cycle management, and they have built in safeguards to check accuracy and eliminate common errors.

#7: Provider Credentialing

Provider credentialing is critical to revenue cycle development. Claims cannot be filed until the insurance carrier approves the provider. Credentialing is a time consuming and tedious task. Medical Business Management utilizes medical credentialing software and employs dedicated credentialing specialists in order to complete our credentialing accurately and efficiently.

Proper credentialing involves verifying accurate data, submitting it to the appropriate parties, and verifying that your group has been updated, approved, and credentialed. Some of the data includes:

- NPI numbers
- Provider numbers
- Electronic Funds Transfer (EFT)
- Electronic Data Interchange (EDI)
- Request and complete contracts
- Name changes
- Additional locations
- Re-credentialing
- Participating membership with HMOs/PPOs

It is important to track this process from start to finish to verify that your practice is properly credentialed BEFORE it is time to request payment.

#8: Extensive insurance follow up

Securing payment from insurance companies can be a tedious process. Following up with "no pays", "slow pays", and "low pays" is necessary in order to effectively manage your revenue cycle. This is a time consuming process, but it is necessary to maximize revenue.

Simply following up is not enough. The person contacting payors should be an expert in anesthesia billing. An expert will understand common reasons for non-payment, delayed payment, and underpayment. They will know how to present the required documentation to the insurance company to secure payment as quickly as possible.

#9: MACRA

Anestheisa providers are eligible for MACRA reporting. The Medicare Access and Chip Reauthorization Act of 2015 (MACRA) is the legislation that created the Quality Payment Program (QPP). The QPP unites 3 more familiar programs: PQRS, Value Payment Modifier, and Meaningful Use Incentive. It is a system of quality reporting requirements associated with ever increasing penalties and bonuses for eligible providers (i.e. Anesthesiologists and CRNAs).

There are 2 pathways for compliance: Merit-based Incentive Payment System (MIPS) or the Alternative Payment System (APM). Understanding how to report the quality measures that affect payments is a critical component of maximizing revenue.

Conclusion

Anesthesia Revenue Cycle Management is complicated, but the tools and personnel exist to manage the process accurately and efficiently.

Medical Business Management is committed to delivering return on investment for our clients. To find out more about how efficient revenue cycle management with a partner like MBM pays for itself, call us at **(800) 477-4544** or email us at info@mbmps.com.