

Overcoming Denials & Increasing Reimbursement: *What Payers Don't Want You to Know*

David Klein, CPC, CPMA, CHC

Review key areas of risk when it comes to coding and billing for Chiropractic and physical medicine services. By the end of this program, attendees will be able to identify the key requirements for reduced denials and proper reimbursement.

The primary goal for the proposed curriculum is to teach healthcare providers and their staff proper medical coding, documentation and compliance techniques that will help with reimbursement issues while reducing risk of audit including healthcare fraud and abuse.

Automatic denials, payer recoupment and improper reimbursements are becoming more and more frequent. In many cases, the denial, payment reduction or demand for repayment is unjustified and erroneous. Without taking proper steps, Providers are often left writing off these denials or repaying monies that they should not have to. In this presentation, David Klein, a certified medical coder, and auditor will discuss key concepts in defending against unjust denials and recoupment. He will show Providers how to utilize coding, billing and reimbursement rules, techniques, and resources to limit these erroneous payer tactics.

- Introduction
- What's happening in healthcare
- Diagnosis Coding Refresher and Hierarchy

- Understanding the CMS 1500 form
- Reviewing Denials
- Corrective steps to ensure proper reimbursement