



## Finding - and Resolving - Problems in the Billing Office

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As a business, there's a lot of money at stake in a medical practice. When mistakes occur in the billing office, it is easy for you to get frustrated. If you're consistently spending time handling the aftermath of blunders, then it is time to shift your focus from problem resolution to problem prevention. These tips can help your team reduce errors while increasing morale:

Focus first on hiring and training. In the heat of the moment, it is easy to make a hasty hiring decision or to rush new employee training, yet these mistakes can add up to lost time and income as well as employee turnover. Take the time upfront to hire top performers; create a pre-employment test to confirm basic skills, check references and always perform a background check before hiring. Provide high-quality training. Likewise, current employees also need continuous training to enhance their skills; ask them what they need and what questions they have. When you make these early and ongoing investments, it will pay off for years to come in the form of employee loyalty and performance.

**Implement a quality improvement culture.** Billing and reimbursement guidelines, as well as processes, are always changing; mistakes can and likely will happen. However, employees should not be so terrified of making a blunder that they fail to share concerns and issues with their supervisor. When you implement a quality improvement program, you provide a safeguard for employees, as well as a training tool. Quality checks are also helpful for new employees during the learning process.





**Use specific adjustment codes.** Whether knowingly or unwittingly, the complexity of billing makes it easy to make mistakes. Regardless of the intent, these often costly blunders can remain hidden. When you mandate the use of specific *adjustment* codes in your billing system, you can, by effectively monitoring adjustments, uncover mistakes that may have otherwise been concealed. Accounts may be unpaid for a variety of reasons, such as having no authorization, the timely filing deadline passed, the service is not medically necessary, and so forth. Too often, employees label all adjustments as *contractual*. Yet, distinguishing a legitimate contractual adjustment – the amount you agree to discount your charge to the payer's allowable – from an error that occurred in your practice is vital to revenue optimization. This approach enables you to determine what issues require further time, technology or a change in workflow to fix, particularly those that are costing your practice a significant amount of money.

Conduct ongoing audits. Regular audits are important, as are more unexpected, random checks. On a monthly or quarterly basis, take the time to review 10 accounts that are due, but have been unpaid for several months. Schedule a meeting with your billing office employees to discuss what has been done thus far, what is wrong with each account and how these accounts can be worked more effectively. This shouldn't be an exercise in blame or shame, rather focus on the positive. Make these discussions all about training and moving forward in the right direction. You can integrate these checks into individual employees' performance reviews as well.

**Take some time to talk**. When was the last time you asked your employees how they were doing? What they were working on? What resources they need to improve the performance of their job? Asking these open-ended questions can lead to process improvements and employee loyalty. Sometimes all your staff needs is a simple tool or answer to improve at their job. Moreover, they will appreciate being asked about their needs, wants and opinions. When you invest time in your employees, the investment typically returns to you tenfold.

Ultimately, investing in good people and practices can prevent unpleasant surprises that can often be costly. Improving your operational processes from the ground floor up will keep wasted money from walking out the door while keeping the best talent inside.

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