ABA Billing:

Helping you get paid

By Medical Billing Management • Topsfield, MA • www.ababilling.com

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Checking eligibility: the first thing you should do

So easy, yet so often neglected...

"Good morning. Are you here for your 10:00 am appointment? Yes? Wonderful. Has there been any change in your insurance?"

Sounds simple, right? On the other hand, have you ever locked your keys in your car? Sometimes, you just get busy and overlook the obvious. But here's what can happen if you don't confirm your patient's eligibility:

- Your reimbursement claim gets denied. It might be a month after you've seen your patient, and now you have to re-submit the claim. Meanwhile, the clock is ticking on your timely filing deadline
- Many insurances will not backdate authorizations or they will make you jump through hoops first.
- If you do not have the correct insurance set up from the time you see the child, you run the risk that those appointments won't be authorized. Worse, you may take on a patient that is not credentialed with your therapists or your practice.

Adding to the complications, of course, is that every plan is different. So there's more for your staff to manage.

To help with this, **we've provided a checklist** that your front desk staff may find helpful. Our checklist is focused on smart things to do for the patient's FIRST visit, but it might be a handy reference for subsequent visits. We've learned that doing this before every visit will streamline your billing practices.

Sometimes, you get busy and overlook the obvious. And then your claims get denied. Our checklist might help.



Industry Updates

News you can use

Do insurances allow a noncredentialed BCBA to act under a credentialed BCBA while their application is processing? This question came from our BCBA friend Julie in North Carolina. Here's the answer: 1) Generally, yes. But the supervising BCBA must be credentialed and named on the auth; 2) the therapy must be billed to the credentialed BCBA's NPI number; 3) this may require you to do some internal accounting to properly credit the BCBA who provided the therapy.

Got a billing question? Send it to <u>bob.jones@medical-</u>

<u>billings.com</u> and we'll get you a straight answer.

Best practices – a checklist

How the best firms handle this

We surveyed our most successful clients, and asked them how they handle the eligibility questions. On the FIRST visit by a new patient, they ask the insurance company these questions:

- 1. Is this your patient? Is the policy active? Is it for a calendar or contract year? (If it's a contract year, what's the start date?)
- 2. Are these codes covered? Is an auth or referral required for these codes?
- 3. Are you primary or secondary for this patient? Are we in or out of network for you?

Have your therapists ask each family on their first visit of each month, "Have there been any changes in your insurance?" Remind the family to read their benefits handbook.

- 4. What is the maximum out-of-pocket cost? How much has been met? What is the deductible? Does it go toward the OOP? Does it apply to ABA therapy?
- 5. Tell me about co-insurance and co-pay
- Our clients who are really buttoned-down with these matters also ask the rep, "What is your name and reference number?" They keep that on file and refer to it if they are challenged later.



A few words about us

Medical Billing Management publishes this newsletter for our clients and friends. Our goal: **"We help you prosper."** We've been providing billing services for more than three decades. Learn more about us at <u>www.ababilling.com</u>, or contact Bob Jones: <u>bob.jones@medical-billings.com</u>. We're located at 460 Boston Street, Topsfield, MA 01983

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