

Appeals, Refunds & Recoupment Requests

Stand up to denials and win!

Whether the issue is inadequate payment, denial or rejection, participants will return to the office well-equipped to handle the toughest denials.



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Reasons to Attend

- 1 Know what you should be getting paid and pay attention to your EOBs.
- 2 “No” doesn’t always mean “No” - you don’t have to stop at the first level of appeal.
- 3 Persistence and familiarity with federal and state laws will provide ammunition when appealing claims.
- 4 Understand the claims rejection methodologies that third-party payers use to deny claims.
- 5 Receive sample appeal letters and step-by-step instruction on the five levels of appeal.

Protect the practice's bottom line with specialized appeals training for your billing staff.

When correctly-submitted claims are inappropriately reduced, delayed or denied, it is imperative to appeal claims in a timely manner with as much supporting documentation as possible. It is just as important to properly write an appeal in order for your claim to be reconsidered and result in your favor.

This class will explain your rights and responsibilities when appealing claim denials. Receive tools and expert guidance on how to second-guess denials and recoup dollars rightfully due to the provider. The instructor will address questions head-on and provide new insight and tools to help billing staff successfully handle all your appeals, refunds and recoupment requests.

Class Highlights:

- Understand the reasons claims are delayed/denied
- Efficient methods for combating denials
- Modifiers, bundling, downcoding, and other situations that cause a claim to be rejected
- Appealing bundled or downcoded claims
- Working within claim guidelines to avoid further delays
- Write results-oriented appeal letters
- Effectively respond to inappropriate recoupments
- Handling payment inconsistencies
- State and Federal Guidelines for refunds/recoupments
- Guidance on Prompt-Pay laws
- Troubleshooting repeat denials
- Accessing legal guidance if needed

Who Should Attend

This class is ideal for billing and claims processors, physicians, consultants and anyone seeking solutions and for claim denials.

Prerequisites

The content covered in this course assumes basic to intermediate knowledge of outpatient billing and carrier reimbursement.

What to Bring

A course manual will be supplied. No supplementary materials are required for this course. Bring questions and get guidance for handling some of your toughest claim denials.

Continuing Education



Continuing Education credits are awarded for attendance at this program. See PMI's web site for further details.

Practice Management Institute

Practice Management Institute® (PMI) teaches physicians and their staff how to properly navigate complex health care issues and secure every dollar rightfully due. PMI programs focus on solutions for coding, reimbursement, compliance and practice productivity issues. These training programs have been hosted in leading hospitals, medical societies and colleges across the U.S. for more than 30 years.

PMI awards certification by exam in four administrative areas:



Certified Medical **Coder** (CMC)®



Certified Medical **Insurance Specialist** (CMIS)®



Certified Medical **Office Manager** (CMOM)®



Certified Medical **Compliance Officer** (CMCO)