

**OUTLINE OF CONTENT OF WEBINAR IN CONJUNCTION
WITH PENNSYLVANIA CHIROPRACTIC ASSOCIATION
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I. How to Bill Properly

A. Universal billing concepts

1. Documentation of services
2. Who can provide/delegation of services
3. Coding properly
4. “Clean claims”
5. Timely submission of claims
6. What is a “false claim” versus a billing error?
 - a. Getting questions about how to bill answered
 - b. Documenting the answers you are given
 - c. Published guidance
7. Collection of copays, deductibles and co-insurance from patients
8. Obligations regarding overpayments
9. Ultimate responsibility

B. Understanding Payors’ Rules

1. Coverage of chiropractic services
 - a. Medical policy on coverage
 - b. Benefit limitations – vary by plan
2. Medical necessity

C. Specific payors

1. Medicare
 - a. Limited coverage
 - b. Expansion of Medicare Coverage for Chiropractic Services Demonstration
2. Medicaid
 - a. Coverage/Medical Policy
 - b. HealthChoice managed care program subcontractors
3. Private payors
 - a. Coverage/Medical Policy
 - b. Individual plan benefit limitations
 - c. Commercial products vs. MA products

D. Consequences of Improper Billing

1. Mail fraud
 - a. Potential penalties/incarceration
 - b. Affect on Licensure
2. Health care fraud (HIPAA) and consequences
 - a. Felony charges/US Attorney vs. civil settlement
 - b. Applies to both private and governmental third party payors
 - c. Conviction results in:
 - i. Mandatory exclusion from Medicare
 - ii. Listing in HIPDB
 - iii. Possible jail time
 - iv. Loss of participating provider status
 - d. Plea agreements
 - e. Affect on Licensure.

II. Dealing with Audits

A. Audit Triggers

1. Outlier/overutilization or change in practice pattern
2. Complaints
3. Competitors
4. Disgruntled employees (current and former)

B. Payors' rights to audit

1. Medicare & Medicaid (statutory/regulatory)
2. Private payors (contract rights)

C. When to get a lawyer involved

D. Limitations of look-back

- a. Highmark:
 - i. Love & Grider Settlement Agreements: 18 month look-back limit for physicians
 - ii. Application to other licensed providers?
- b. Governmental payors
 - i. Medicare contractors
 - ii. Medicaid - MFCUs

E. Your rights during an audit

- a. Due process?
- b. Right to sue

F. Recoupment/set-off vs. repayment

G. Challenging extrapolations

H. Challenging medical necessity denials