Resolving Billing and Reimbursement Issues for a Behavioral Health Services Provider in Michigan

CASE STUDY

June 2023

Problem Statement

Our client is a licensed master social worker providing behavioral health services in the state of Michigan. The client specializes in providing counseling sessions for autistic adults to help them heal. The client was using billing software to submit claims to insurance providers but was not receiving any payments. The client was unsure if the software was set up correctly to submit claims electronically. Additionally, there was a backlog of 3 months' worth of claims that had not been submitted yet, resulting in $0 reimbursement received to date. The client approached Medisys Data Solutions (MDS) for coding and billing services to resolve these issues and set up robust billing and reimbursement processes to avoid future problems.

- The client was not aware if the EDI and/or billing software was totally set up to submit claims electronically.
- Claims were not getting submitted to insurance through the billing software.
- $0 reimbursement received to date for claims submitted previously.
- Backlog of 3 months claims outstanding to be submitted.

Understanding the Issues

One of the key issues identified by the MDS team was that the billing software used by the client was not integrated with the clearinghouse and payer. This meant that claims were not being received by the payer and that the client was not getting paid for the services they provided. As a result of the lack of integration between the client's billing software and the clearinghouse and payer, claims were not being received by the payer. This meant that the client was not receiving any payments for the services they provided.

Reimbursement Challenge

Despite submitting claims for the services provided through billing software, the client was not receiving any payments from the insurance provider. This lack of payment resulted in a significant financial burden for the client, who relied on this income to support their practice. One of the biggest challenges the client faced was that they did not receive any feedback on the status of their claims. This meant they did not know whether the claims had been accepted, denied, or rejected. Without this information, they were unable to address any issues or errors that might be causing the delays in payment. This lack of payment had put a significant strain on the client's finances and made it difficult for them to continue providing services to their patients.

MDS as Billing Partner

The MDS coding and billing team worked closely with the client to understand their pain points and develop a customized solution to address their billing issues. We were able to identify the root cause of the problem and develop a plan to streamline the billing process and improve the client's cash flow.

MDS Understanding Billing Challenges

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MDS's Solution

Fixing the integration issue was not straightforward, as the client had two different tax IDs under different names. This made it challenging to reconcile the client's billing records and ensure that all claims were being submitted accurately. Instead of trying to fix the integration issue, MDS found an alternate fix that would enable the client to start receiving payments for their services.

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Once the client received their first payment through MDS' billing services, they were able to submit a backlog of around three months' worth of claims. MDS submitted these claims on behalf of the client and ensured that they were processed and reimbursed by the payer. MDS provided comprehensive billing and coding services to ensure that the client's claims were submitted accurately and on time and that they were eligible for reimbursement for their services. With the help of MDS' billing and coding services, the client now receives regular monthly payments from the payer for their services. MDS continues to provide ongoing support to the client, ensuring that their claims are submitted accurately and on time and that they receive maximum reimbursement for their services.

Summary

- The MDS coding and billing team understood the client's pain areas related to the billing process.
- Identified that the client's billing software was not integrated with the clearing house and payer, causing claims not to be received by the payer and uncertainty about claim status.
- Fixing the integration was challenging due to the client having two tax IDs under different names.
- MDS provided an alternate fix by submitting sample claims to the payer via Availity, a healthcare information network.
- The client received their first payment in 15 days after MDS submitted the claims via Availity.
- MDS then submitted a backlog of around 3 months' worth of claims, resulting in the client receiving payments for both the backlog and current claims.
- Currently, MDS's team ensures consistent submission and follow-up of claims, resulting in the client receiving regular monthly payments from the payer.