

WORKERS COMPENSATION

Are You Being Underpaid?

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AHIMA Approved ICD-10-CM/PCS Trainer

AGENDA

- Kansas/Missouri Laws for Provider Payment
- Insurer Payment Structures
- Identifying Underpayments
- Disputing Payment Amounts
- Missouri Medical Fee Dispute Process

LAWS FOR PROVIDER PAYMENT

Missouri

- Charges must be fair and reasonable;
- Cannot *charge* greater than the usual and customary fee you receive from a private individual or private health insurance carrier

LAWS FOR PROVIDER PAYMENT

Kansas

- Payments cannot exceed fee schedule;
- Providers *shall be paid their usual and customary charge, or the maximum fee, whichever is less.*

CLAIM PROCESSING

HEALTH INSURANCE CLAIM FORM (F)

1a. INSURED'S I.D. NUMBER

4. INSURED'S NAME (Last Name, First Name)

ADDRESS (No., Street)

CITY

TEL

FECA BLK LUNG (SSN) (ID)

OTHER

RELATIONSHIP TO INSURED

use Child

SEX M F

DATE YY MM DD



BLUE CROSS

EXPLANATION OF BENEFITS

Date: January 8, 2011
 Amount: 22340
 Total: 12.88

Plan To: JOAN M. DOE
 Other Insurer: Seneca Benefits Company
 Policy Holder: JOAN M. DOE
 Policy ID: 1234 56 789
 Effective Date: December 31, 2010

1. Patient Name: JOAN M. DOE
 2. Subcontract Name: JOAN M. DOE
 3. ID Number: 123456789
 4. Group: 45678
 5. Facility: A
 6. Service: A

CLM	UNIT	CLAIMED AMOUNT	ELIGIBLE AMOUNT	DEDUCTIBLE AMOUNT	PAID AMOUNT	COPAY AMOUNT	COINSURANCE AMOUNT	OTHER AMOUNT	PAID AMOUNT	MESSAGE
20100001	20	42.21	0.00	42.21	0.00	0.00	0.00	0.00	0.00	798
20100002	9	30.00	0.00	30.00	0.00	0.00	0.00	0.00	35.00	
20100003	30	50.00	0.00	50.00	0.00	0.00	0.00	0.00	47.50	340
20100004	4	100.00	0.00	100.00	0.00	0.00	0.00	0.00	10.00	

7. Please submit the balance remaining to the other carrier for their assessment.

YOUR'S SHOULD BE MADE WITHIN 30 DAYS

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IDENTIFYING UNDERPAYMENTS

- Determine Jurisdiction
- Know Contracts
- Determine Expected Payments

DISPUTING UNDERPAYMENTS

- Review EOB for Appeals Contacts
- Cite Relevant Law/Contract
- When All Else Fails...

MISSOURI PROCESS

- Request for Information
 - Standard Form
 - Date of Injury
 - Date of Service
 - Injured Body Part
 - Insurer/Employer Name, Address
 - Date of Authorization, Name of Person Who Authorized
 - Request Injury Number, Insurance Carrier, Status Update, and Attorney Information

MISSOURI PROCESS

- Application for Medical Fee Dispute
 - Requires Attorney
 - Describes Services, Charges, Payments, Amounts Disputed
 - Determining Amounts Disputed
 - Employer and Insurer are Served Copies
- Deadline: One Year From First EOB
- Payor Negotiations
 - Precedence
- Evidentiary Hearing

KANSAS PROCESS

- Appeal to Payor
- Contact Adjustor
- Cite Fee Schedule:
<http://www.dol.ks.gov/WorkComp/MedFeeScheduled.aspx>
- Negotiations with Bill Review Companies (Fairpay, Qmedtrix)
- Notify Division

QUESTIONS?

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