

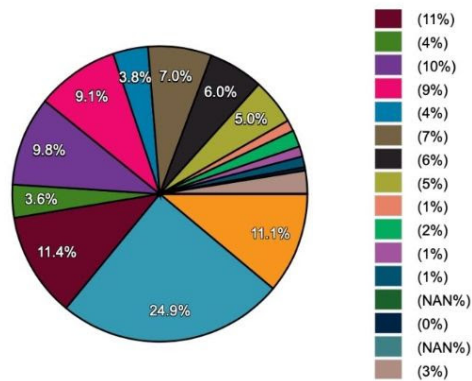


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# ADVANCED NEWS

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## Pieces of the Pie



*What does your "pie chart" look like in your practice?*

I have used the same practice management software for over 15 years now and one reason I have continued with the same product is the amazing analytics they provide in the reports module.

Reports show where the payments are coming from, which adjustments are made and rendering provider reports that are also sent to CPA's for payroll purposes. It could be anything you could think of that can and should be measured.

One of my favorite parts of these reports are the pie chart graphs that show how much of the piece of the pie each insurance is from the previous month. **You want the pieces of the pie to be equal in size to prevent any issues that could arise if an insurance company has a major issue.** Some

have gone into bankruptcy, held money due to fiscal year budgets, or had legislative changes.

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# Cognitive Assessment & Care Plan Services



If your patient shows signs of cognitive impairment during a routine visit, Medicare covers a separate visit to more thoroughly assess your patient's cognitive function and develop a care plan – use CPT code 99483 to bill for this service.

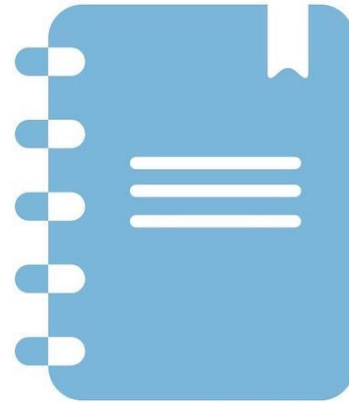
Effective January 1, 2021, **Medicare increased payment for these services to \$304** when provided in an office setting, added these services to the definition of primary care services in the Medicare Shared Savings Program, and permanently covered these services via telehealth. Use CPT code 99483 to bill for both in-person and telehealth services.

Click the button to see how to get started. CMS also offers a nice video on the basic information!

[Learn More](#)

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# Case Study: Getting Claims Paid



As a medical billing company, we are given the task to follow up with insurance companies to get the claims paid for *any* charges turned in to us. Some insurances - like Medicare - make that task easy by having strict regulations in place that we follow and, by doing so, they pay easily and on time. Others will loosely follow guidelines and hold or deny the same claims...

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# Quoting Insurance Benefits



We are often asked to be able to "quote" what the benefits will be for a patient's insurance coverage prior to treatment with a provider. That process has changed dramatically over the years and it is now almost impossible to pin down.

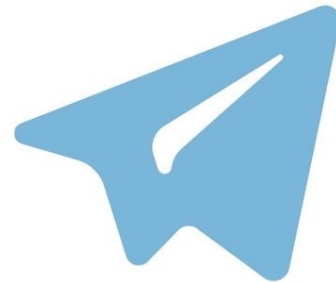
Insurance cards sometimes list an office copay benefit but that would only apply to a regular physician's office visit and not any type of specialty, like Psych. On-line access to benefits is an option for some insurances and will usually spell out the regular coverage. Some require a username and

password to be set up to be able to go on-line and those also expire every 90-days or so and have to be kept in a secure location for HIPAA requirements. We actually have devoted entire shared, secured documents to just the handling of on-line usernames and passwords.

[Read More](#)

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# The Power of Resources



Way back in the day, I used to do a lunch & learn session called "how to hang a shingle" for providers. It was targeted to new providers coming out of residency or coming from a salaried job and into private practice. We would review everything you would need to do to set up a new medical practice. Looking for a leased space or renting a space, applying to insurance contracts, interviewing staff to hire, getting a business license, applying for malpractice insurance, learning how to code ICD-10 diagnosis codes, reading about CPT codes and learning how to document them in the chart or EMR, etc. The etc part included a lot more

These were a great way to start the conversation "before" starting to see patients. I can't tell you how many times I have received a call that a provider has already started seeing patients before any of this was begun!! That conversation goes a bit different as you can imagine. Insurance companies take months to get contracted and do not go back in time to when you already treated the patients.

Also over the years, I have found a host of resources and contacts that I can refer clients to to help with the steps. CPA's, Corporate Attorneys, Retirement income managers (for when the "Roxanne I made too much money and need

to put it somewhere" call comes in), credit card processing services and anything else that comes up. Just let me know if you need the contact information for any of these people.

I have been an big advocate of reading everything I can in the healthcare industry to send that along to my clients in newsletters, emails and post on my website as reference so they can go back and look it up when needed, The industry changes every hour so I need to read at least every 2 hours to keep up.



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**Thank you,**

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