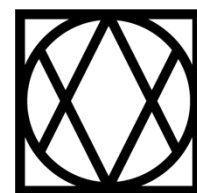


**Jennifer Leotta**

Director of Revenue Optimization

**MaryAnne Jones**

Health and Veterans Affairs Manager



Veterans Affairs Claims

# How to Optimize Your VA Claims Management: **A Blueprint for Success**

## Our Specialized Solutions

1200+ Hospitals

SOC2 Type II Certified

Best in KLAS

HFMA Peer Reviewed

1100+ Experts

45 States

### Complex Claims Solutions



Workers' Compensation



Motor Vehicle Accidents



Veterans Affairs

### Revenue Integrity Solutions



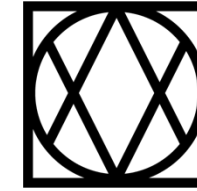
Underpayment Review & Recovery



Denial Recovery & Prevention



Transfer DRG



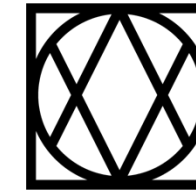
- 1. Standard Process**
- 2. VA Payers & Regional Trends**
- 3. Best Practices**
- 4. Peer Success**
- 5. Key Performance Indicators**

**How to Optimize  
Your VA Claims  
Management:  
A Blueprint for  
Success**

# VA Recovery Process



# VA Recovery Process



Veterans Affairs Claims



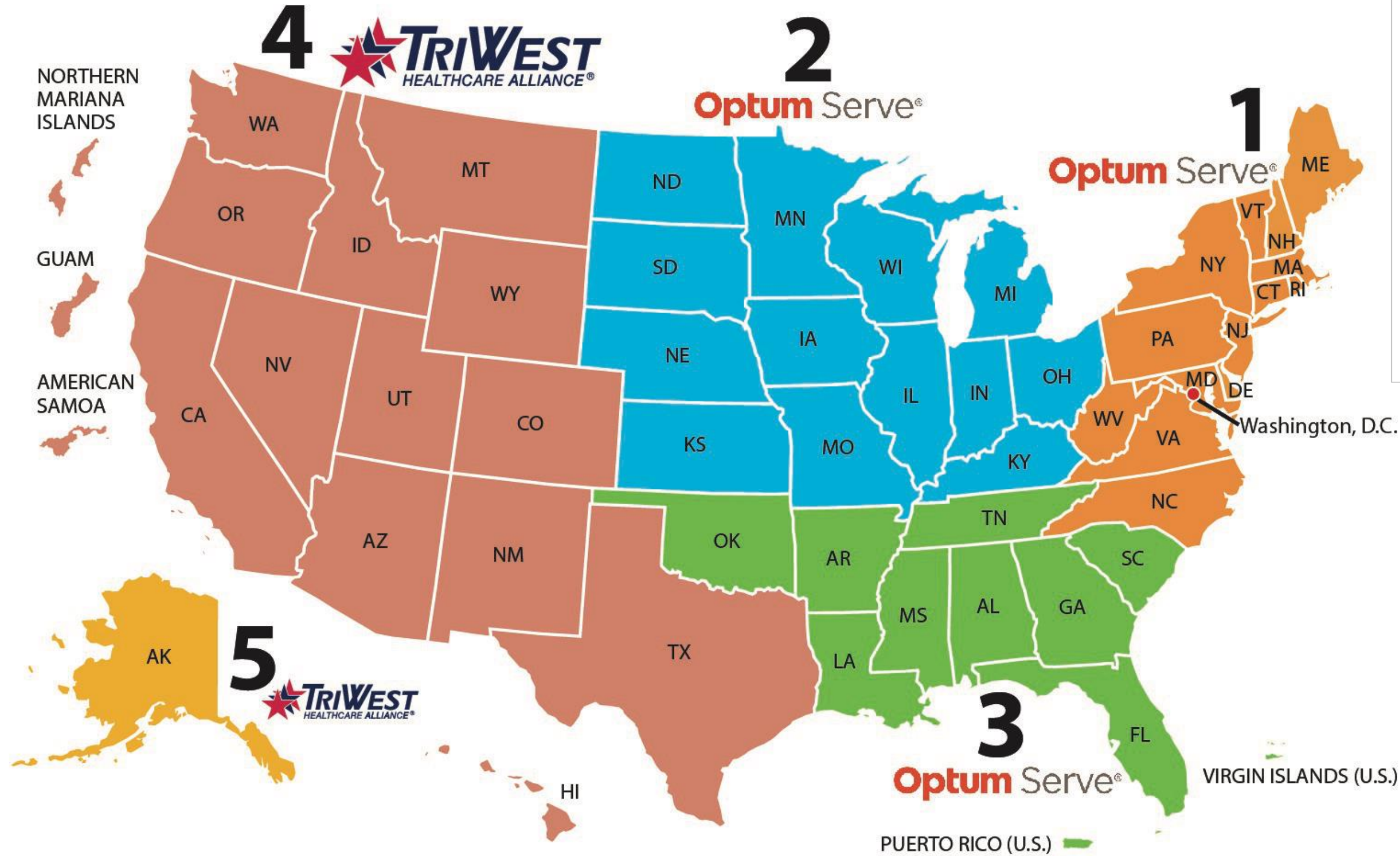
# Top Reasons For Claim Denial

1. Missing/incomplete/invalid insured ID
2. Outpatient claim has missing “Admission Type” code
3. Missing admission code when admission date present
4. Referring and attending physician NPI are equal
5. Missing/incomplete/invalid billing provider address
6. Missing/invalid patient status
7. Claim contains ICD 9 Principle Dx code  
(ICD10 codes must be used for DOS after 9/30/2015)
8. Missing/invalid “Patient Reason” diagnosis code
9. Missing patient account number
10. Invalid “Type of Bill” code

# VA Payers & Regional Trends



# VA Payers



Region 1	Region 2	Region 3	Region 4	Region 5
<p>Region 1 map</p> <ul style="list-style-type: none"> <li>• Connecticut</li> <li>• Delaware</li> <li>• District of Columbia</li> <li>• Maine</li> <li>• Maryland</li> <li>• Massachusetts</li> <li>• New Hampshire</li> <li>• New Jersey</li> <li>• New York</li> <li>• North Carolina</li> <li>• Pennsylvania</li> <li>• Rhode Island</li> <li>• Vermont</li> <li>• Virginia</li> <li>• West Virginia</li> </ul>	<p>Region 2 map</p> <ul style="list-style-type: none"> <li>• Illinois</li> <li>• Indiana</li> <li>• Iowa</li> <li>• Kansas</li> <li>• Kentucky</li> <li>• Michigan</li> <li>• Minnesota</li> <li>• Missouri</li> <li>• Nebraska</li> <li>• North Dakota</li> <li>• Ohio</li> <li>• South Dakota</li> <li>• Wisconsin</li> </ul>	<p>Region 3 map</p> <ul style="list-style-type: none"> <li>• Alabama</li> <li>• Arkansas</li> <li>• Florida</li> <li>• Georgia</li> <li>• Louisiana</li> <li>• Mississippi</li> <li>• Oklahoma</li> <li>• Puerto Rico</li> <li>• South Carolina</li> <li>• Tennessee</li> <li>• Virgin Islands (U.S.)</li> </ul>	<p>Region 4 map</p> <ul style="list-style-type: none"> <li>• American Samoa</li> <li>• Arizona</li> <li>• California</li> <li>• Colorado</li> <li>• Guam</li> <li>• Hawaii</li> <li>• Idaho</li> <li>• Montana</li> <li>• New Mexico</li> <li>• Nevada</li> <li>• Northern Mariana Islands</li> <li>• Oregon</li> <li>• Texas</li> <li>• Utah</li> <li>• Washington</li> <li>• Wyoming</li> </ul>	<p>Region 5 map</p> <ul style="list-style-type: none"> <li>• Alaska</li> </ul>

# Trends

## VA Denials & Rejections

- ✘ • NDC Denial
- ✘ • Invalid CMG Codes
- ✘ • DRG Not Groupable
- ✘ • Invalid NPI
- ✘ • No Authorization # on Claim
- ✘ • Claim Denies as Duplicate
- ✘ • Incorrectly Denied for Timely Filing

# Trends

## VA Denials & Rejections

Top Reasons for HCFA/CMS-1500 Rejections		
Rank	Code	Reason/Detail
1	016	Missing/Incomplete/Invalid Insured ID <i>Requires the 17 alpha-numeric internal control number (ICN) [format: 10 digits + "V" + 6 digits] or 9-digit social security number (SSN) with no special characters.</i>
2	086	Missing Insurance Plan Name or Program Name
3	092	Missing/Invalid Admission Date for POS 21 Refer to Box 18
4	088	Invalid Service Facility Address. Must be a valid street address.
5	005	Missing NDC Units
6	002	Claim contains one or more missing/incomplete/invalid/inappropriate "Place of Service" codes.
7	081	Invalid Rendering NPI
8	034	Claim contains ICD9 Principal Dx code <i>ICD 10 codes must be used for DOS after 09/30/2015.</i>
9	105	Invalid Service line Provider Taxonomy code
10	004	Invalid/Incomplete CPT/HCPCS codes

Top reasons for HCFA/CMS-1500 rejections

Top Reasons for UB/CMS-1450 Rejections		
Rank	Code	Reason/Detail
1	016	Missing/Incomplete/Invalid Insured ID <i>Requires the 17 alpha-numeric internal control number (ICN) [format: 10 digits + "V" + 6 digits] or 9-digit social security number (SSN) with no special characters.</i>
2	125	The outpatient claim has a missing "Admission Type" code
3	097	Missing Admission Type when Admission Date is Present
4	108	Referring and Attending Physician NPI are equal
5	007	This claim contains a missing/incomplete/invalid Billing Provider Address
6	013	Claim contains missing or invalid Patient Status
7	034	Claim contains ICD9 Principal Dx code <i>ICD 10 codes must be used for DOS after 09/30/2015.</i>
8	031	Claim contains invalid or missing "Patient Reason" diagnosis code
9	021	Missing Patient Account Number
10	117	Invalid "Type of Bill" code

Top reasons for UB/CMS-1450 rejections

Best Practices



# Best Practices

- ✓ Correct First-Time Billing
- ✓ Leverage Automation
- ✓ Ensure Timeliness
- ✓ Follow Up
- ✓ Stay Current



# Peer Success



## To achieve correct first-time billing:

- Leverage automation
- Ensure timeliness
- Identify and correct reasons for denials



## To follow up, verify:

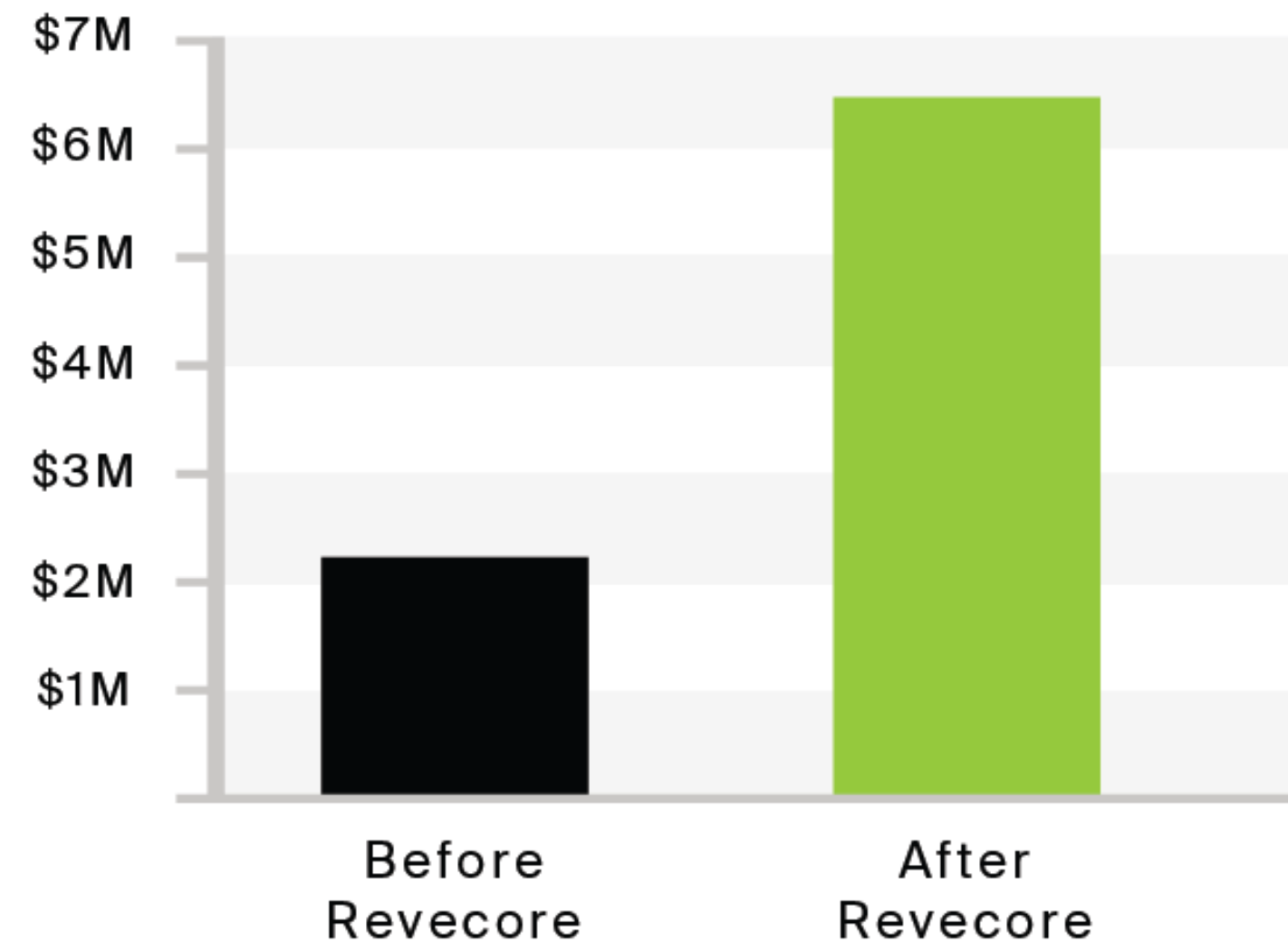
- That each claim is on file with the payer
- That no line items were denied
- That all claims were paid correctly



## To stay current:

- Keep abreast of VA changes
- Take note of changes within the VA system
- Make time for process improvements

## Correct first-time billing enables faster reimbursements



# KPIs for VA Claims



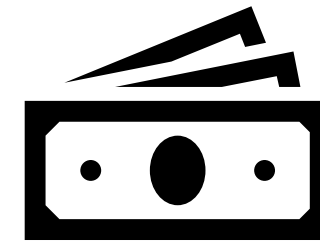
**Success  
Rate**



**Days  
to Pay**



**Compliance  
& Accuracy**



**Cost  
Optimization**



**Trends  
Recovery Rate**

## Contact:

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# Thank you!



Recover More™