

CPR Announces Payor Report Tool

The CPR Committee has just introduced its “CPR Reporting Tool” to HBMA’s website. The tool was developed as a resource for CPR communications with payors by documenting significant quantifiable issues in order that CPR and payors can work collaboratively to solidify reasons for change or improvement on behalf of our membership .

Originally the tool was designed to address only commercial payor claims issues, but was expanded to include all payors including Medicare and Medicaid and provider enrollment issues.

CPR used the HBMA Heal The Claims survey that was done in April, 2009 to develop a Top 10 List of payor issues. The reporting tool evolved from the Top Ten List as a dynamic real-time survey approach to collecting information from our membership. It has been designed using radio buttons and drop down menus for quick entry. A “Comments” field is also available to further describe your situation or to document something other than a claims denial issue, e.g. provider enrollment issue.

A key field in the reporting tool for claims denials is “Frequency” field. This field is intended to capture the number of times that you experience a particular recurring denial problem that most often represents a programmatic issue with the payor’s adjudication system.

WHERE TO FIND CPR REPORTING TOOL: Login to HBMA website. Under **Resources**, click on **Commercial Payor**, then click on **Report Payor Denial Issues**.

The screenshot shows the 'Report Payor Denial Issues' form on the HBMA website. The form is titled 'REPORT PAYOR DENIAL ISSUES' and includes instructions: 'Instructions: Content on this page simulates information on your explanation of benefits. Please complete the entire form to ensure accurate reporting. If you would like to add additional comments or have issues with provider enrollment, please document your comments in the comment text box below.' The form contains several sections: 'Type of Issue Being Reported' with radio buttons for 'Inpatient', 'Outpatient', 'Commercial', and 'Provider Enrollment'; 'Payor' information including 'Date of Service', 'Place of Service', and 'Provider of Service'; 'State' and 'CPT' fields; 'Mod', 'Mod2', 'ICD Primary', 'ICD', 'ICD2', and 'ICD3' fields; 'Remark Code 1' through 'Remark Code 5' fields; a 'Frequency' field with a black arrow pointing to it; 'Date of Receipt of B35 transactions or paper' and 'Clearinghouse' fields; and 'Network Status' with radio buttons for 'In Network', 'Paid at contracted rate?', and 'Out of Network'. There is also a 'Comments (Denial code explanations, etc.)' text area and 'Submit' and 'Submit Another Denial' buttons at the bottom.

The Commercial Payor Relations committee has made significant progress in developing meaningful and productive relationships with the major payors. By using this tool to report significant issues, you have the opportunity to affect positive change. In the event you have questions on how to use the tool or suggestions for modification, please contact zfuller@hbma.org.