

Using the Discussion Period 2 years of experience

Jeannine Engel, MD FACP

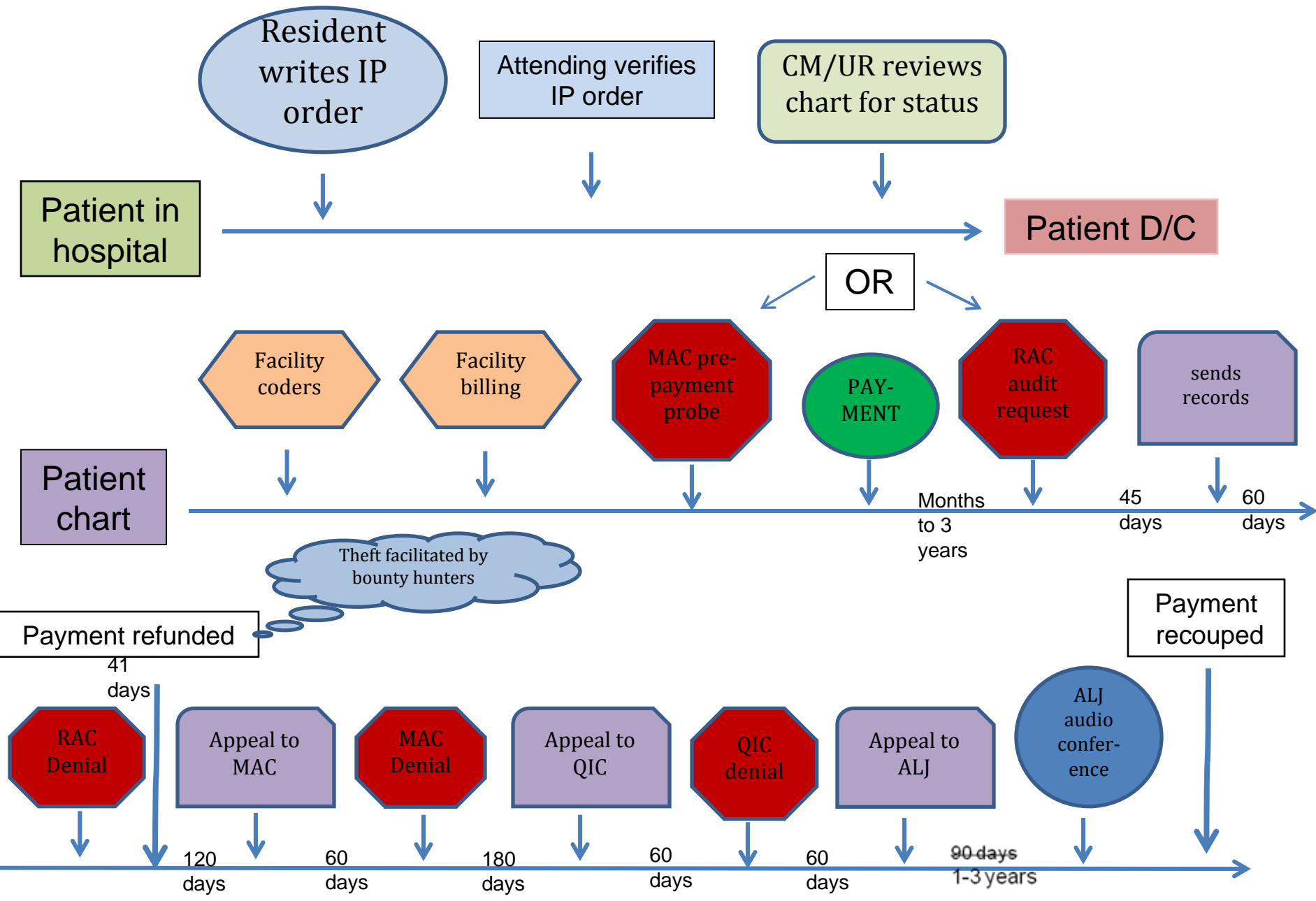
Physician Advisor

University of Utah Health Care

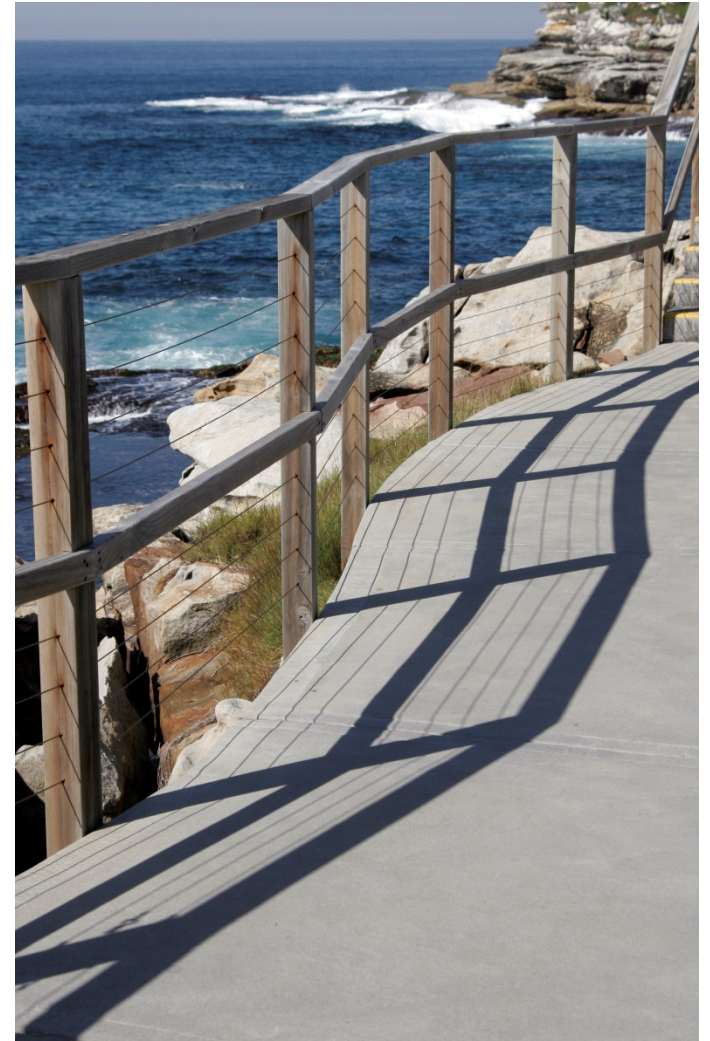
jeannine.engel@hsc.utah.edu

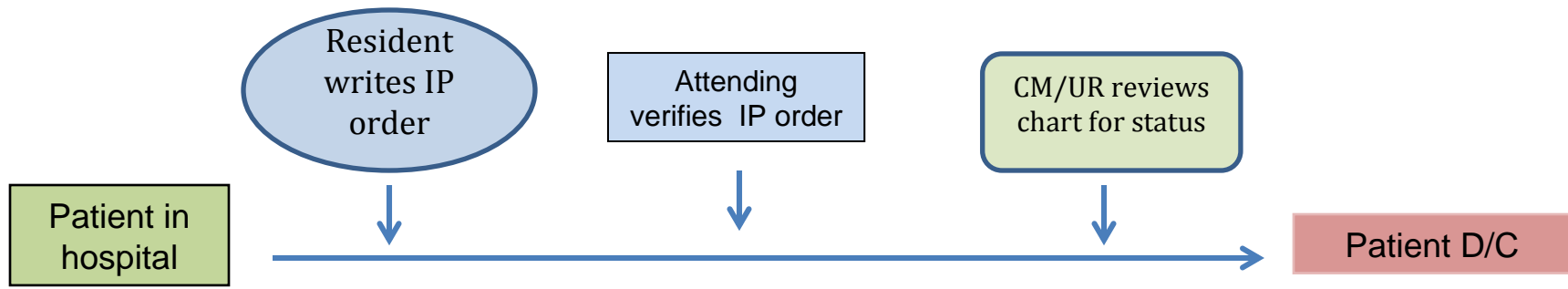


"Ok, Ms. Feldman, it says on your chart that you were discharged yesterday."

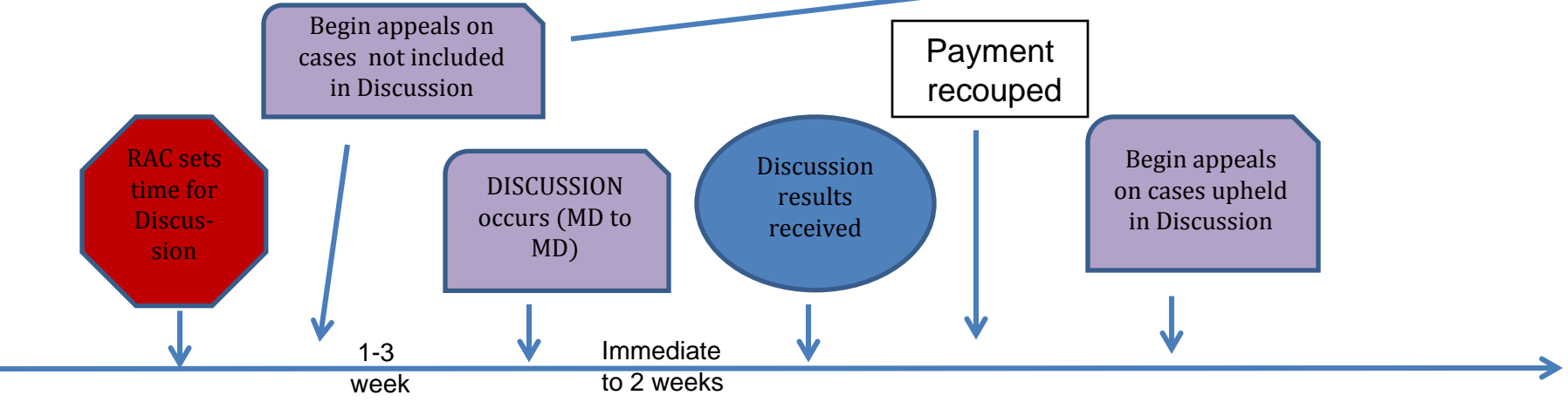
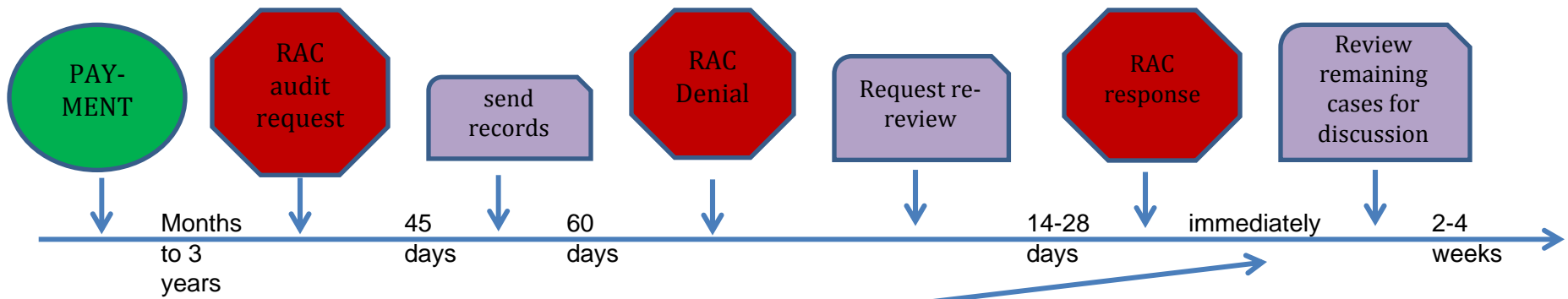


From time of denial to recoupment if win at the ALJ : 2+ years





Payment refunded at 41 days from denial



Time from denial to discussion results (and recoupment of payment): 8-12 weeks



Practical Tips

- The issue of additional documentation
 - From Dictionary.com: “added; more; supplementary”
 - The letter we submit requesting the discussion is our additional documentation (unless we actually have something more)

Please review the attached additional materials and re-evaluate the original improper payment determination for:

RAC Audit Number: XXXX

Claim Number: XXXX

Provider Name: XXXX

Provider Number: XXXX

Dear RAC,

The Provider respectfully disagrees with the original determination by RAC, stating that the care provided to the above mentioned patient could have been provided in a less intense setting than the inpatient setting. As such, we officially request that a follow up review of the claim be performed on the documentation that was originally sent for review.

Please feel free to contact me at the below written telephone number.

Thank you,



Practical Tips

- Preparing your cases for discussion
 - Review everything about the case
 - MD documentation: clinic notes prior; Outside records
 - Nursing notes; vital signs; anesthesia pre-op
 - Case Management
 - Focus on information available at the time of admission....but
 - “what happened to the patient next?”
 - When you are not sure, ask the provider
 - Surgical cases for instance

Practical Tips

- The actual discussion session
 - Be factual and be prepared
 - Kindergarten again: respect, share, no hitting
 - Point out inconsistencies in the RAC review
 - Ask questions!
 - “can I tell you anything else about this patient?”
 - “what is your opinion about this case?”
 - Learn as much as you can about the physician who is discussing the cases
 - RAC employee? Consultant? Location? Specialty? Age?

Practical Tips

- Subsequent Discussion Sessions
 - Track your results, these will inform future discussion choices
 - Don't be discouraged by seemingly poor results
 - Be willing to give yourself a learning curve for success!!
 - Negative results are still results
 - When possible, request the same discussing MD

University of Utah data



	Total cases	MN cases	MN denials	OT phase 1	Take to P2P	OTP2P	Total OT	P2P OT rate	Discussion Success rate
Nov 11	192		63	14	18	4	18	22.2%	28.57%
Jan 12	193	167	49	12	24	0	12	0	24%
Feb 12	207	193	72	9	10	3	12	30%	15.19%
April 12	385	55	20	6	4	3	9	75%	40.91%
June 12	400	392	105	21	25	10	31	40.0%	26.55%
July 2012	400	391	102	25	21	5	30	23.81%	28.57%
Sept 12	400	145	48	17	18	8	25	44.44%	52.08%
Nov 12	390	322	112	11	25	13	24	52%	21.42%
Jan 13	173	153	44	6	12	7	13	58.33%	29.55%
Feb 13	124	107	67	9	18	11	20	61.11%	29.85%
						Average thru Feb 13		36.57%	28.45%

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Feb 13	124	107	67	9	18	11	20	61.11%	29.85%
April 13	400	397	202	19	54	47	66	87.04%	32.67%
May 13	379	229	154	23	2	1	24	50%	15.58%
						\$ recouped April/May		\$407,945	

Summary

- Using the Discussion is an opportunity to rapidly stratify your denied cases
- The work involved in preparing for Discussion will be used for writing any appeals
- Overturned cases from Discussion will be CLOSED in under 3 months

Acknowledgements:



**Lisa Whittaker, RN,
BSN**

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QUESTIONS??