Provider Internal Tracking of State Denials and Claim Corrections

SAPC is in the process of loading 835 files from the State which include State Denials. For claims which have been denied by the State and recouped by SAPC, providers will have visibility through Retro Explanation of Benefits (EOB) and the State Denial View in MSO KPI Dashboards 2.0. It is the responsibility of the provider to review these denied claims and correct them if possible. To track the identification and correction process SAPC has developed a recommended, though not mandatory, tracking process.

Step 1. **Create a Base Sheet for internal tracking**: This Base Sheet will be an excel document that is initially populated by the State Denial View- Procedure Overview and updated periodically.

    A. Go to the State Denial View and export the Procedure Overview table.
        a. If the object does not populate due to too many items, you will need to drill down.

> Please narrow your selections to less than 100,000 Procedure records for this chart to appear.

            i. Drill down on FY 18/19
                1. If this populates the view then proceed to "b."
                2. If this does not populate the view then select a quarter or 6 months from the FY-month.
        b. Focus on FY 18/19 to present as these fiscal years are not yet in the Cost Reporting process.
    B. Use the "Export data" function export the sheet to excel
    C. Save to Excel by renaming the file to end with ".xlsx"
        a. Do not change the number or order of columns
    D. If you had to drill down to populate the Procedure Overview, repeat the drilldown process to ensure all of FY 18/19, FY19/20, and present FY are included in the Base Sheet.
    E. Add columns at the end of the exported Data
        a. Claim corrected (Y/N)
        b. Date corrected
        c. Corrected by
        d. Date re-billed to SAPC

Step 2. **Update the Base Sheet**: SAPC recommends updating at minimum on a weekly basis.

    F. Go to the State Denial View-Procedure Overview
    G. To include only the most recently retro'd claims, begin by drilling down by Takeback Date.

Provider Name	Contracting Provider Pro...	Retro EOB ID	State Denial Reason	Fiscal Year	Fiscal Year-Month	Takeback Date

   H. Scroll or enter the date of the last time this sheet was exported.
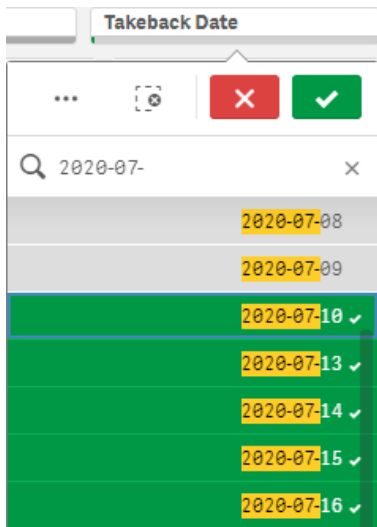
Note: KPI refreshes nightly, so if the last data export was on 7/10/2020, the most recent data would have been from 7/9/2020 if a takeback was done on that day. Therefore, the next time you update your Base Sheet you would drill down to 7/10/2020 and select that and any other date thereafter.

Example: Base Sheet was exported on 7/10/2020.
If the State Denial View sheet is then looked at on 7/17/2020, then the Take Back Date should be filtered to only show 7/10/2020-present.

a. An alternative way to drilling down on the Procedure Overview Sheet through the Takeback Date.

     i. Click on the magnifying glass on the Takeback Date column. Select all dates since you last reviewed and exported the sheet. You may scroll or enter in the date since your last export.

     ii. Note the downward arrow below "Takeback Date." This indicates the sorting order is from newest to oldest. If the arrow was facing upward, this would indicate oldest to newest.

b. Lastly, data may also be sorted by the retro date by using the Date Sort feature that was recently added to this sheet.
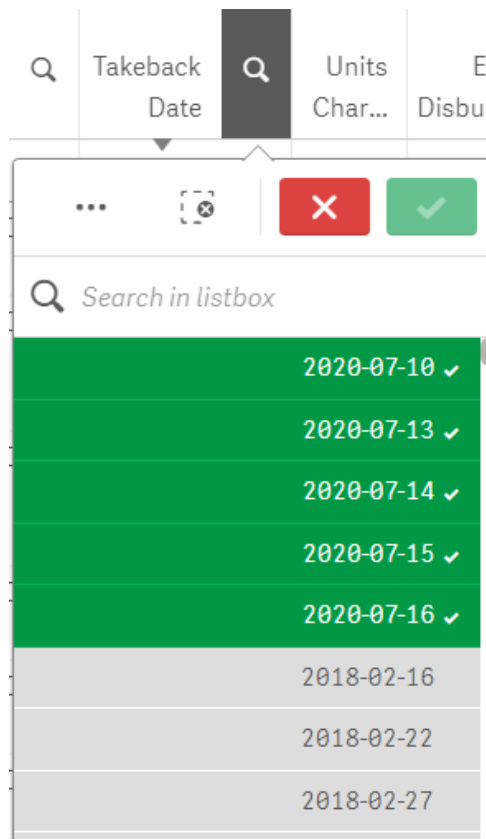
To select your desired dates, you may need to scroll and click on "load more" until you get to the most recent take back dates. Then select the dates since your last export.

1.

   c.   Export the Procedure Overview Table

   d.   Copy the rows with the new Takeback Date(s) and paste them on your base sheet.

           i.   By only adding the most recently recouped claims, any updates on the Base Sheet such as corrected and rebilled claims are retained.

Step 3. Verifying Replaced/Resubmitted Claims: The Payment Reconciliation Sheet has been updated to include two new fields that will assist in pattern identification. One of the easiest way to find corrected claims is by identifying the claims on the State Denial View.

     I.   From the Base Sheet, identify the corrected claims have been submitted for rebilling.

     J.   Find these claims on the State Denial View.

        a.   Select the patients and date(s) of services you are verifying have corrected claims.

           i.   This selection will limit the information that populates the payment reconciliation view.

     K.   Transfer sheet to Payment Reconciliation View

     L.   If you skip J and start at the Payment Reconciliation View, filter the Payment Reconciliation View by date of service (DOS) and client name to match the identified corrected claims.

        a.   Due to the amount of information the Payment Reconciliation View pulls, it may selections/drill downs for the sheet to populate.

    M. Look for the pattern of two rows with the same Client Name, DOS, Performing Provider Name, procedure, Auth #, APPROVED Claim Status and Total Charge. The difference you are looking for is one row will have a dollar amount in the Total Disbursement Column, and the other row will have a Takeback dollar amount, a Takeback Date, and if the Retro Reason begins with "Denial,"

this is a State Denial. This pattern of these two rows next to each other indicate the State Denied Claim has been replaced/resubmitted.

Client Name	DOS	Performing Provider Name	Procedure	Auth #	Claim Status	Total Charge	Total Disbur...	Total Takeback	Takeback Date	Retro Reason
						$80.94	$40.47	$40.47		
Test, Client	2020-10-28	Schwarz, Greg	Group Counseling (H0005:U8)	65432	Approved	$23.43	$23.43	-	-	-
Test, Client	2020-10-28	Schwarz, Greg	Group Counseling (H0005:U8)	65432	Approved	$23.43	$0.00	$23.43	2020-01-29	Denial CO177
Test, Client	2020-10-28	Orellana, Esther	Group Counseling (H0005:U8)	65432	Approved	$17.04	$17.04	-	-	-
Test, Client	2020-10-28	Orellana, Esther	Group Counseling (H0005:U8)	65432	Approved	$17.04	$0.00	$17.04	2020-01-29	Denial CO177

> a. *Note: if a correction was made to DOS, Performing Provider Name, Procedure, or Auth#, the rows may not be near each other to determine a pattern. However, these fields are not expected to make up a significant number of corrections.*
> > i. *If your agency has State Denial requiring changes to these fields or an adjustment to units, which would impact Total Charge, then a notes section may be beneficial on the Base Sheet to help identify how replaced/resubmitted claims may be different.*