

# Denials/Appeals with Part C Medicare Advantage Plans

## ProMedica and Humana

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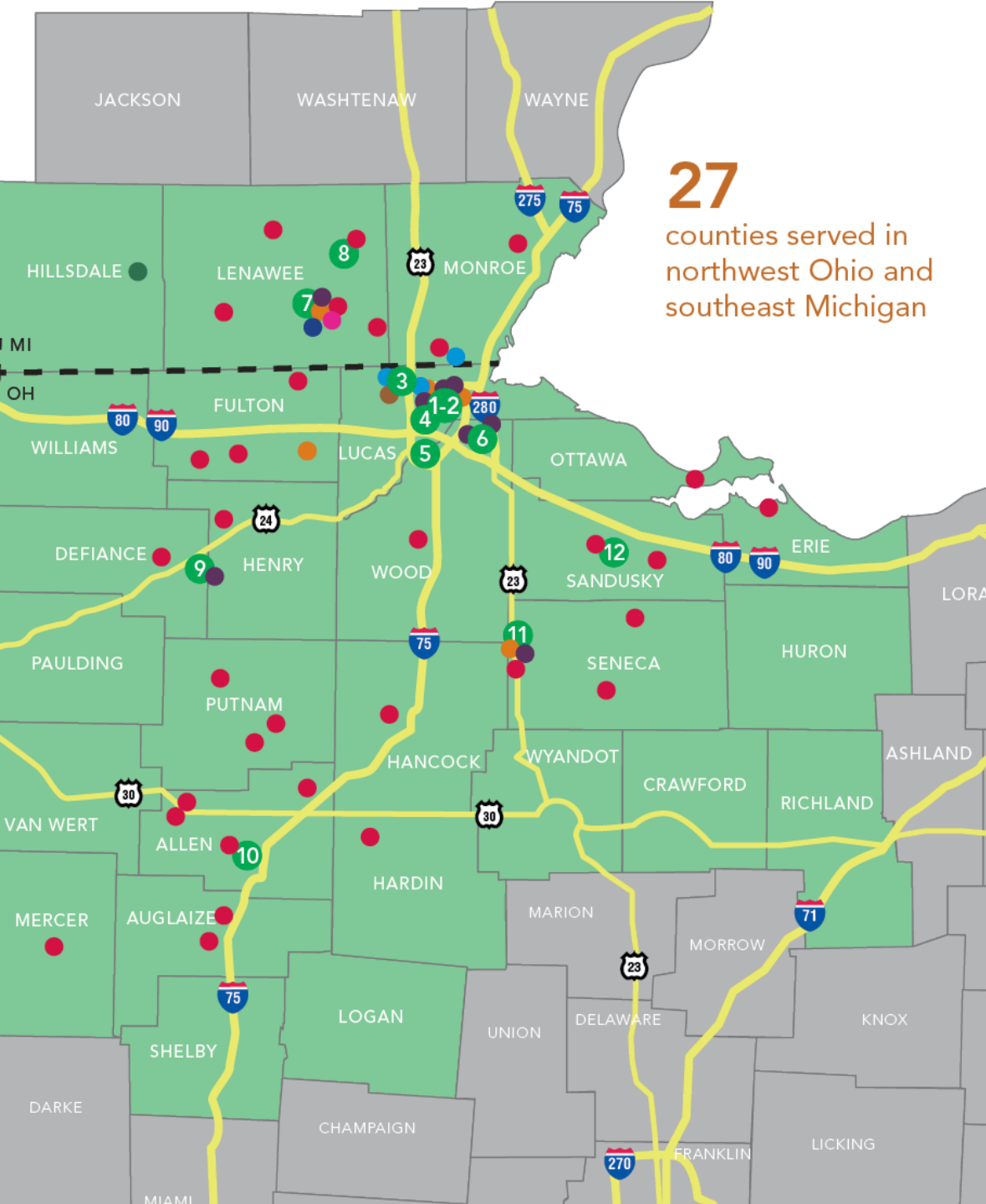
ProMedica Health System

# ProMedica is ...

- Community-based
- Mission-driven
- Not-for-profit
- Participative culture – governance and employee
- Strategically focused
- Financially sound

**We believe a healthcare system should take a leadership role ...**

**Clinically | Socially | Economically**



**27**  
counties served in  
northwest Ohio and  
southeast Michigan



**2** STATES,  
Ohio and Michigan

**306** sites

- |  |  |
|--|--|
| <span style="color: green;">●</span> Hospital              | <span style="color: brown;">●</span> Long-Term Care                      |
| <span style="color: blue;">●</span> Hospice                | <span style="color: purple;">●</span> Pharmacy                           |
| <span style="color: orange;">●</span> Home Care            | <span style="color: pink;">●</span> Assisted Living                      |
| <span style="color: red;">●</span> Clinical Health Centers | <span style="color: darkblue;">●</span> Rehabilitation & Skilled Nursing |

- 1 ProMedica Toledo Hospital
- 2 ProMedica Toledo Children's Hospital
- 3 ProMedica Flower Hospital
- 4 ProMedica Wildwood Orthopaedic and Spine Hospital,
- 5 ProMedica St. Luke's Hospital
- 6 ProMedica Bay Park Hospital
- 7 ProMedica Bixby Hospital
- 8 ProMedica Herrick Hospital
- 9 ProMedica Defiance Regional Hospital
- 10 JOC
- 11 ProMedica Fostoria Community Hospital
- 12 Fremont Memorial Hospital

# By the numbers\* ...

**4.4 million**  
patient encounters annually



**1,900+**  
physicians with privileges

- 779 employed healthcare providers – as of April 1, 2014
- 15,000 employees
- 2,268 licensed inpatient beds
- 81,632 inpatient discharges
- 57,235 surgeries
- 8,628 births
- 337,035 emergency room visits

**A MILLENNIUM**  
*of Care*

\*As of Dec. 31, 2013

# 2013 ProMedica awards



HEALTHGRADES®



*Reducing healthcare costs. Improving healthcare quality.*



United Way  
of Greater Toledo



# Payors and Providers

- Paramount
- Medical Mutual
- Humana
- Anthem
- Aetna
- United Health Care
- Buckeye

# Payors and Providers

"Keep your friends close and your payors closer"

Do you know your contract?

Do you know your medical directors?

Have you met them personally?

Do you know how to escalate cases to them ?

How responsive are they to your needs?

# Humana and Pt care

- **Front end process:-**
  - The Managed Care Team is very influential
  - Notification/ Status and Criteria assignments
- **Continued stay process:-**

report accurate but complete information
- **Post acute care transitions:-** ensure correct placement for pt to promote safe healing and reduce readmissions



# Know thy Denials First!!!

- Reason
- Medical Necessity

Interqual or Milliman

- DRG coding

Coding guidelines ??

Documented vs treated along the continuum

# Appeals

- We have a overall rate of 72% overturn rate
- Excellent Managed Care Contracting Team
- Strong team of UR floor/ appeal nurses
- Responses

Well crafted

Evidence based

Documentation is legible

Criteria driven yet individual

# Research

- Kind of denials
  - Type of response
  - Timeliness of response
  - Learn and evolve
  - Explore alternate options with payor
  - Get them to help with post acute care
- \*\*\*\*\*Readmissions help no one

# Specifics

- Coding : 77 drg's / codes are auto scrubbed to check for denials and med necessity by humana and their auditing agencies
- Status must match order
- Timelines for retrospective appeals

# The Quest continues

Health care is a team  
sport with rules and  
players changing all the  
time!

Stay vigilant

Questions?