

# REDUCE INSURANCE CLAIMS DENIALS

## Increase Profits by Decreasing Insurance Denial Triggers and Appealing Denials More Effectively

Denied medical claims drain critical financial resources away from patient care, putting unnecessary strain on cost control and your revenue cycle. Most health systems in the United States lose significant net revenues as a result of payment denials from private and government payers. With a formal denial management program that includes a rigorous training curriculum, your facility can reduce the potential for loss. The **Mastering Patient Access Library** from the Healthcare Financial Management Association was designed specifically to provide revenue cycle staff with the tactics necessary to improve denial management. With this library, your staff will learn how to decrease insurance claim denials by correctly securing more of the critical required information in advance, obtaining precertification when necessary, understanding payers' contracted requirements, and appealing denials more effectively. With better denial management processes in place, your bottom line will improve along with both HCAHPS ratings and employee satisfaction.

The training program of choice by Revenue Cycle Directors at many of the nation's largest healthcare systems.

### Impact:

#### Submit More Clean Claims

- Collect more accurate coordination of benefits data
- Obtain and document precertification
- Screen for medical necessity and eligibility efficiently
- Ongoing revenue cycle staff training
- Spend less time and resources researching and correcting denied claims
- Create more efficient and effective work flow processes

#### Increase HCAHPS Ratings and Patient Satisfaction

- Help patients understand insurance concepts such as precertification

### Features:

- Comprehensive library totaling over 20 hours of material
- Suitable for both new-hire and refresher training for experienced staff
- Industry, peer-reviewed education from the healthcare industry leader
- Complemented by HFMA's Mastering Medicare Billing library and other content libraries

### Educate Staff in Key Areas:

- Patient Intake
- Insurance Verification
- Coordination of Benefits
- Bill Validation
- Third Party Follow-up

Reduce Claim Rejections and Denials

Get Paid Sooner

Improve Cash Flow

This library will help your front line staff reduce claims rejections and denials, resulting in more timely and accurate payment.

Developed by:



hfma

healthcare financial management association

**This library is essential for:**

- New-hire orientation programs
- Ongoing revenue cycle staff training

**This library supports:**

- Professional development programs
- Employee retention improvement initiatives

**Courses in Library:**

This comprehensive library includes the following courses:

- Scheduling Part 1
- Scheduling Part 2
- Pre-Registration
- Registration Part 1
- Registration Part 2
- Registration Part 3
- Validation of Demographic and Insurance Information
- Insurance Verification
- Precertification
- Claims Denial Management Part 1
- Claims Denial Management Part 2
- Claims Denial Management Part 3

**Subject Matter Experts:**

The Mastering Patient Access library was developed by the experts at the Healthcare Financial Management Association.

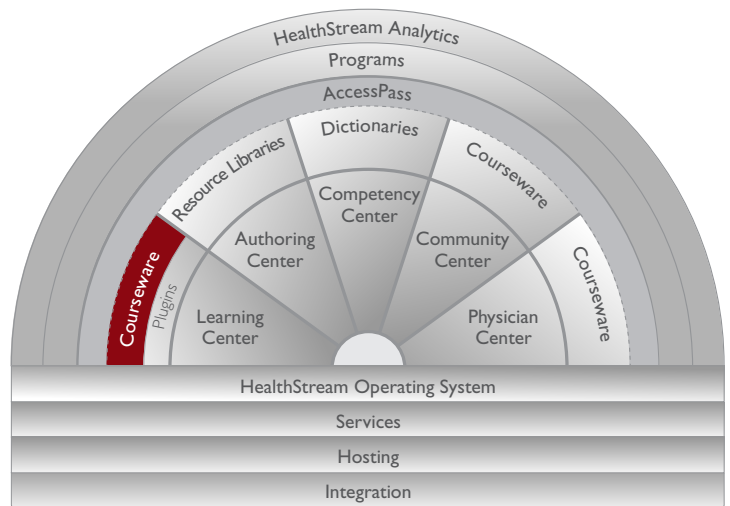
**User Scale**

- novice
- advanced beginner
- competent
- proficient
- expert

**Recommended For:**

- Billing Personnel
- Account Representatives
- Customer Service
- Patient Access
- Patient Accounts

**HealthStream's Integrated Solutions**



**About HealthStream**

HealthStream (NASDAQ: HSTM) is a leading provider of research and learning solutions for the healthcare industry. HealthStream focuses on turning “Insight into Action” for leading healthcare providers and suppliers through continuous measurement and adaptive learning.