

ALLERGY

ARE YOU BEING **PAID FOR YOUR EXPERTISE?**

With the ever-changing government mandates, new and changing Allergy CPT codes, complex ICD, physicians of all allergy subspecialties are left with a major burden of handling their billing operations and obtaining reimbursement. Practices of all sizes have chosen to outsource these billing complexities to experts who can manage their operations, while they focus on their patients. Our goal is to solve a problem, not just sell a service, as billing is not a 'one size fits all' solution. Physicians are often not aware of the billing issues they may have such as:

1. Billing the correct units for allergy testing
2. Ensuring the allergy tests are tracked to avoid duplicate billing
3. Understanding payer coverage for allergy and immunology tests
4. Knowing the correct way to document each procedure

Billed
200+ MILLION in 2020



DAYS IN AR **24**

TAT Hours **48**

TAT for Payment **26** DAYS

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5. Being aware of the supervisory level required for allergy and immunology tests
6. Handling the intricate details of payer requirements when appealing denials

These are just the common pain areas we were able to successfully resolve for Allergy practices. Whether your specialty is classical immunology, clinical, immunotherapy or diagnostic, we know how to assist you throughout the entire billing cycle.

THE **BILLED RIGHT** EXPERIENCE

Partnering with an outsourced Revenue Cycle company has many more benefits, but one of ours stands out the most to our clients. Feasibility studies... we help physicians do these on all procedures performed as knowing your cost vs. the reimbursement is critical. Obtaining the correct reimbursement requires a review of your contract, analyzing the payer's Explanation of Benefit (EOB) to ensure if you are paid correctly. Submitting the right procedure code for correct reimbursement requires specialty experience. Our team of certified AAPC coders and appeal specialists are key players on our RCM team making this process successful for our providers. We have helped our physicians to effectively code and understand the many nuances of medical encounter documentation, to capture primary and comorbidities. All the above seems to be complex for many RCM companies, but it is just one of our unique solutions that have helped save thousands of dollars for our clients.

WHAT WE **SPECIALIZE IN**



| Multiple procedure billing, modifier usage, and advanced payment analysis



| Accurate coding resulting in >98% first pass rate



| Latest updates on billing & coding trends to maximize reimbursement



| Appeal expertise based on type of denial



| Increase in collections up to 97%



| Reduction in days in AR to < 30 days