Effective Appeals Management

A CEU Training Program



Earn 8 AIHC Preapproved Continuing Education Units

Sponsored by



American Institute of Healthcare Compliance, Inc.

431 W. Liberty Street, Medina, Ohio 44256 Toll Free: 866-571-5635 / Cleveland/Akron Area: 330-241-5635 Fax: 330-952-0716 / Contact Us



Visit our website at www.aihc-assn.org
An Internationally Recognized Compliance Training & Certification Leader in Health Care 501(c)(3)Non-Profit Organization

Who should take this course?

This course is designed for advanced professionals, such as Revenue Cycle Managers, Nurses, Appeal Managers, Nurse Reviewers, Coders, Medical Appeals Specialists, Medical Claims Specialists, Patient Financial Services Managers, Reimbursement Specialists, Auditors, and Clinical Documentation Improvement Specialists. This course is also beneficial for other individuals who are learning revenue cycle management in a medical office, clinic, surgery center, or health care facility, or who are working for a health insurance payer.

What is eLearn training?

eLearn training courses are online instructor assisted programs. There are no scheduled classes to attend. You may work at your own pace and will have the ability to login to your information 24 hours per day. Your instructor will be available to communicate by phone and e-mail to assist you throughout your training program. Instructors provide online access, technical support, and course instruction as needed to help in your educational efforts.

What will I learn from this course?

Start from the Beginning – The Basics of a Formal Appeals Management Program

- Learning the Language, Acronyms, and Abbreviations of Disputes and Appeals
- How to Avoid Unnecessary Denials
- What Constitutes a "Clean Claim"
- Prompt Pay Law
- Managing the Internal Scrubbers and Edits Process

Understand Why the Claim Was Denied

- Obtaining the Authority to Match Accountability
- Understanding the Remittance Advice
- Filing Deadlines
- Appealing Timely Filing Denials
- Payer Coverage Guidelines
- Review for Annual Deductibles and Out-Of-Pocket Requirements

HIPAA Title I - Understanding Pre-Existing Exclusion Denials

- Understanding Pre-Existing Exclusions Related to Denied Claims
- Credible Coverage
- When to Appeal Versus Transferring Balance to Patient Responsibility
- How HIPAA Will Strengthen Appeal Argument Using Title 1

Audit Documentation and Coding Before Deciding to Appeal

- Understanding HIPAA: Transactions, Code Sets and Identifiers
- Analyzing the Denied Claim for Compliance and Ability to Appeal
- Audit Documentation According to Coding Guidelines
- Resources for ICD Diagnosis Code Lookup Tool

Medical Necessity – What You Need to Know to Appeal

- Defining Medical Necessity
- "Hold Harmless"
- Medicare and Medical Necessity
- Documentation Requirement for Medical Necessity
- Using Medicare Policy to Argue Medical Necessity When the Payer is not Medicare

ERISA: Summary of Self-Funded (i.e., Self-Insured) Group Health Plan Appeal Process

- Understanding How to Appeal an ERISA Denial
- ERISA Appealing Self-Funded Plans Under the Employee Retirement Income Security Act of 1974
- ACA and ERISA
- Three Basic ERISA Rules
- Claims Determination & Claim Type
- Adverse Benefit Determination

Appeal and Argue Your Case

- Getting Organized and Managing the Process
- Records Preparation
- Appeal Forms
- Drafting the Cover Letter Stating Your Argument
 - o General Letter Writing Tips
 - o Sample Appeal Letters
- Follow-Up Procedures
 - Keeping Track of the Denials Process
 - o Tips for Being Persistent and Going to the Next Level
- Managing High-Volumes Of Denials
 - Working Smart
 - Pareto Principle

Appeal Consideration Related to Investigations and Probes

- When Billing Mistakes Happen
- Prerequisites to Using Statistical Extrapolation
- Government Provider Tracking System (PTS)
- Avoiding Special Investigation Units (SIU)
- Review Trends Found Through RAC and CERT Reports
- Types Of Government Reviews (Complex Versus Non-Complex)
- Comprehensive Error Rate Testing (CERT)
- Recovery Audit Contractors Program (RAC)
- Rules & Regulations Related To Fraud & Abuse
- Exclusions
- Civil Monetary Penalties Law

Can I earn Continuing Education Units (CEUs)?

Yes! Earn 8 Continuing Education Units



8 CEUs: This program has been approved for 8 continuing education units by the American Institute of Healthcare Compliance for AIHC Certified Professionals. These CEUs may apply to the following AIHC credential renewals: CHA, CIFHA, OHCC, CHBS, CHCM, CMDP, and ICDCT-CM

Click Here to access the online CEU renewal chart.

What is included in this course?

- Online Course Manager assigned to each professional enrolling in the program to provide professional guidance, technical website support, and assist in the learning experience.
- Training materials and access to the online course page are provided.
- Online quizzes are accessed through your online course page.
- Downloadable information that can be used for future reference.
- AIHC Membership for 3 months (for first time members only).
- A Certificate of Completion is awarded for passing the online quizzes with a minimum score of 80%

Are there specific computer requirements needed for this course?

Yes! You will need high-speed internet access, email, Microsoft Word and Excel, and Adobe Reader.

Is there a time limit to complete this course?

Yes! You have access to the online course page for three months. You must complete the course within that time.

What is the cost? Full Tuition: \$195

Non-Members: Click Here to register online

AIHC Members: Register through the AIHC Member Store and pay only \$125!

OR scroll down for hard copy registration form

What are my payment options?



We accept registration payment via credit card or corporate check. You are able to submit your payment information online, by mail, or via fax. See the Enrollment Form below for more details. Visit our website for more information about our **Available Payment Options** or to view the **AIHC Refund Policy**.



Effective Appeals Management CEU Training Program

Enrollment Form

Enrollment Date:	Tuition (Check Appropriate Box)	
	Effective Appeals Management Training	
Print Name & Credentials: (one form per person)	Program:	
	☐ Full Tuition: \$195.00	
Employer Name & Address:	☐ Coupon Code:(if applicable)	
	AIHC Member?	
Home Address:	☐ AIHC Member Tuition: \$125.00 ☐ Coupon Code:(if applicable)	
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Highest Level of Education:	☐ High School ☐ Associate Degree ☐ Diploma Program ☐ Bachelor Degree ☐ Masters or Higher	
Clearly Print Your Email Address(es): (For website administration & confirmation of registration)	Work Phone Number:	
Primary:	Alternate Phone / Cell Number:	
Alternate:		
Charge My Credit Card: [] MasterCard [] VISA [] Discover		
Amount Approved on Credit Card: \$		
Card #:	Sec. Code Exp. Date	
Billing Address for Credit Card:		
Name As It Appears on the Card:		
Authorized Signature & Date:		
Paying by Corporate Check? Amount Due: \$ Please make checks payable to: AIHC		
Mail to: American Institute of Healthcare Compliance 431 W. Liberty Street, Medina, OH 44256 PHONE: 330-241-5635 / FAX: 330-952-0716		
Please visit our website at www.aihc-assn.org for more information about our company. Inquiries should be made to Contact Us		
How did you hear about us? □ Mailing □ Email □ Co-worker □ AIHC website □ AHIA website □ Social Media □ Other		

American Institute of Healthcare Compliance, Inc.

Membership Application ~ Required for non-members enrolling in this program

(Membership is included in the price of tuition for *new members only*)

Job/Position (title & brief description): Are you certified by any organization? Please indicate certification and company name:		
OIG exclusion		
Have you ever been:		
1) Notified that you were under investigation for; investigating to Medicaid or Medicare fraud?	igated for; charged with; or convicted of any offense	
2) On the OIG exclusion list?		
Membership Requireme	nt (Restriction)	
AIHC membership is open to the public, health care work auditors, collectors and compliance officers. To uphold recommended by the Office of the Inspector General (OIC	to a higher standard, AIHC follows the guidelines	
For many years the Congress of the United States has won nation's elderly and poor by implementing legislation participating in Federally-funded health care programs. The a program to exclude individuals and entities affected by 1128 and 1156 of the Social Security Act, and maintains a Excluded Individuals/Entities. (See OIG website at exclusion exclusion).	to prevent certain individuals and businesses from ne OIG, under this Congressional mandate, established these various legal authorities, contained in sections a list of all currently excluded parties called the List of	
No individual whose name appears on the OIG Exclude AIHC; and any member whose name is added to this list refund.	· · · · · · · · · · · · · · · · · · ·	
"My signature below indicates I have read this restriction the OIG exclusion list at the date this application has been of Healthcare Compliance."	*	

Signature