

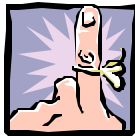


Third Quarter 2008

What's inside:

- Reminders
- Billing tips
- Most often denied items
- Contract information
- Visit us
- Just for fun
- Referral intake
- Contact information

## Reminders



If you receive an updated General Liability Insurance Certificate or Facility License please fax a copy to (317)596-2809 or email to [ehall@progressivecarenetwork.com](mailto:ehall@progressivecarenetwork.com)

## Billing Tips:



### Commercial:

- Claims should be billed just as you would any commercial insurance company.
- Commercial insurances are much more lenient in regard to what will be authorized. Pre-certification is required for all services.
- Retroactive referrals may be processed but payment is not guaranteed. claims may be subject to filing penalties
- Filing limit is 55 days from the date of service.
- **DO NOT** bill for any items that are not on the authorization provided by Progressive Care Network.

### Medicare programs:

- Claims should be billed just as you would to Medicare.
- Medicare guidelines must be followed.
- All items require authorization.
- Retroactive referrals may be processed but payment is not guaranteed. Claims may be subject to filing penalties.
- Filing limit is 55 days from the date of service.
- **DO NOT** bill for any items that are not on the authorization provided by Progressive Care Network.

### Medicaid programs:

- Claims should be billed just as you would to Medicaid.
- Medicaid guidelines must be followed.
- All items require authorization.
- Retroactive referrals may be processed but payment is not guaranteed. Claims may be subject to filing penalties.
- Filing limit is 55 days from the date of service.
- **DO NOT** bill for any items that are not on the authorization provided by Progressive Care Network.



### Billing Patients:

Providers Are Not to bill patients directly, except for required co-insurance or deductibles as determined by the patient's insurance plan. Co-Insurance and or deductibles are billable after payment is received from PCN. Co-Payments may be collected at the time of service for identified Co-payment amounts. Example \$20.00 Co-Payment for Nursing or Therapy Visit.

## Most often denied items



Often requests for authorization are denied due to lack of supporting documentation. Below are a few, along with the most often requested accompanying documentation.

### Walker-vs.-Wheelchair:

- Very often senior Smart Choice will not cover both.

### Skilled Nursing/Therapy visits

- No report called to the Case-manager.

## Contract Information



We are proud to announce the addition of a new insurance contract.

### *Cardinal Health Alliance (Select Circle)*

If you have any questions regarding this new addition please feel free to contact us by phone: (317) 596-2805 or by email at [ehall@progressivecarenetwork.com](mailto:ehall@progressivecarenetwork.com)

## Visit us



### [www.progressivecarenetwork.com](http://www.progressivecarenetwork.com)

If you would like to be added to our mailing list please email your contact information to [ehall@progressivecarenetwork.com](mailto:ehall@progressivecarenetwork.com)

## Just for Fun!



### July

World Population Day  
11 Jul 2008

National Juvenile Arthritis Month  
01 - 31 Jul 2008

### August

International Left Handers Day  
13 Aug 2008

National Health Center Week  
03 - 09 Aug 2008

### September

World Carfree Day  
22 Sep 2008

National Punctuation Day®  
24 Sep 2008

## Referral Intake



When requesting authorization please include the following information:

- Name of patient
- Address of patient
- Date of birth
- Home phone number/alternate phone
- Insurance information
- Prescription
- Supporting documentation
- Name, address and telephone number of referring physician
- Name and contact information of the person requesting the authorization

## **MEET OUR STAFF**

**Sandra Arbuckle – President / Owner**

Teresa Goldman – Director

Nancy Ream – Senior Referral Intake Specialist

Lori Norberg – Billing Specialist

Cheri Watson – Collections/Auth Tracking

Erin Hall – Network Development/Nurse Liaison

## **CONTACT INFORMATION**

**Progressive Care Network**

8930 Bash Street

Suite G,

Indianapolis, IN 46256

**(317) 596-2805 – Office Phone**

**(317) 596-2809 – Referral Fax**

**(317) 596-3711 – Billing / Claims Fax**

**Progressive Care Network**

8930 Bash Street

Suite G,

Indianapolis, IN 46256