




# NY EICC


## Early Intervention Panel Discussion December 14, 2021

*Public Consulting Group*

1

## SFA Billing and Claiming Statistics



- For the 15-month period from July 1, 2020, to September 30, 2021, the SFA has billed \$725.6 million in claims. Providers have received \$711 million in payments with \$14.6 million outstanding for that period. Since 4/1/13 more than \$5.3 billion worth of claims have been processed and 98.9% paid.

### Claims Submitted by Commercial Insurance, Medicaid and Escrow


July-20 to September-21 Claim Dates

Category	Amount	Percentage
Escrow	\$240,914,844.75	33%
Commercial	\$74,918,519.04	10%
Medicaid	\$409,733,976.61	57%

### Claim Adjudication Rates

July-20 to September-21 Claim Dates

Category	Amount	Percentage
Escrow Paid	\$397,743,437	55%
Medicaid Paid	\$300,554,047	41%
Outstanding	\$14,566,439	2%
Insurance Paid	\$12,703,417	2%

[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com) |  2

2



## Commercial Insurance Denial Rates

Regulated plans only

April 2020 - September 2020 (6 Months)

Claim Status	# Services	Billed Amount	Paid Amount	Denial %	Denial Rate
Paid	178,677	\$11,681,173	\$4,833,212		
Denied	274,231	\$18,601,567	\$0	100.0%	<b>61.4%</b>
Grand Total	452,908	\$30,282,741	\$4,833,212		

April 2021 - September 2021 (6 Months)

Claim Status	# Services	Billed Amount	Paid Amount	Denial %	Denial Rate
Paid	179,203	\$11,650,203	\$5,607,896		
Denied	263,617	\$17,524,646	\$0	100.0%	<b>60.1%</b>
Grand Total	442,820	\$29,174,849	\$5,607,896		



3



## Commercial Insurance Denial Rates

Regulated plans only

April 2020 - September 2020 (6 Months)

April 2021 - September 2021 (6 Months)

Denial Reason	# of Services	Sum of Billed	Denial %
Authorization	66,860	\$ 4,682,940	25.2%
Benefits	56,202	\$ 3,492,413	18.8%
Eligibility	45,809	\$ 2,973,154	16.0%
Billing	22,991	\$ 1,884,737	10.1%
Patient Responsibility	20,230	\$ 1,484,044	8.0%

Denial Reason	# of Services	Sum of Billed	Denial %
Benefits	90,159	\$ 5,418,931	30.9%
Authorization	69,256	\$ 4,865,516	27.8%
Patient Responsibility	21,992	\$ 1,622,269	9.3%
Contractual Adjustment	21,420	\$ 1,395,198	8.0%
Eligibility	15,928	\$ 1,104,042	6.3%

Top Denial Reasons for Insurance claims processed 4/1/20 - 9/30/20  
(a) Any claims with a partial payment are excluded here

Top Denial Reasons for Insurance claims processed 4/1/21 - 9/30/21  
(a) Any claims with a partial payment are excluded here



4

## Open Claims in the EIBilling System



For the period from April 1, 2013, through September 30, 2021, the following data represents the total number of claims not adjudicated, and the monetary amount associated with those claims.

With more than 70.3 million claims processed, the 330,447 claims that are still open after 60 days is less than 1% of total claims.

Payer	Claims by Amount All	Claims Count All	Claims by Amount > 60 days	Claims Count > 60 days
COMMERCIAL	\$9,262,579.43	109,644	\$7,366,902.66	87,358
ESCROW	-\$676,556.80	60,316	-\$727,991.10	52,682
MEDICAID	\$6,889,514.75	223,576	\$5,312,311.90	190,407
<b>Total</b>	<b>\$15,475,537.38</b>	<b>393,536</b>	<b>\$11,951,223.46</b>	<b>330,447</b>



5

## Top 16 Payers



Payer Name	# of Services	Billed Amount	Paid Amount	% of Total Payer Billed Amount	Primary Denial Reason	% Paid 2021*	% Paid 2020**	% Paid 2019***	% Paid 2018****	% Paid 2017*****	% Paid 2016*****	% Paid 2015*****
UnitedHealthcare	111,170	\$7,042,416	\$2,190,665	19.2%	Patient Responsibility	31.1%	28.5%	29.7%	29.6%	28.6%	28.0%	25.0%
Emblem	76,629	\$5,027,663	\$1,703,993	13.7%	Benefits	33.9%	31.3%	27.0%	25.7%	22.3%	15.6%	13.7%
Fidelis	74,625	\$4,952,226	\$17,572	13.5%	Authorization	0.4%	0.6%	2.7%	3.2%	3.5%	3.7%	2.2%
GHI - New York	55,717	\$3,595,578	\$1,287,160	9.8%	Benefits	35.8%	32.4%	29.4%	30.6%	29.7%	28.5%	25.7%
Oxford	52,963	\$3,335,601	\$275,268	9.1%	Benefits	8.3%	6.9%	6.2%	6.8%	7.8%	7.6%	6.2%
Aetna	28,897	\$1,921,589	\$323,301	5.2%	Authorization	16.8%	16.3%	16.8%	14.9%	15.9%	19.3%	18.0%
HIP	26,648	\$1,768,666	\$150,323	4.8%	Out-of-Network	8.5%	3.0%	2.1%	3.1%	2.4%	4.0%	3.4%
Excellus	22,654	\$1,496,339	\$359,948	4.1%	Benefits	24.1%	27.1%	22.8%	22.4%	24.3%	26.4%	28.2%
Empire BCBS of NY	19,055	\$1,359,139	\$112,228	3.7%	Benefits	8.3%	5.8%	3.3%	6.7%	6.4%	6.3%	3.6%
Americhoice	17,152	\$1,130,359	\$42,142	3.1%	Authorization	3.7%	5.5%	2.9%	3.5%	4.9%	4.9%	6.6%
HealthFirst	15,298	\$1,130,020	\$89,209	3.1%	Authorization	7.9%	6.2%	1.6%	1.8%	1.2%	2.4%	1.8%
HealthNow - BCBS of WNY	15,393	\$1,072,064	\$402,926	2.9%	Benefits	37.6%	37.2%	29.5%	26.0%	27.8%	25.9%	25.8%
Cigna	12,601	\$840,403	\$130,740	2.3%	Out-of-Network	15.6%	16.0%	15.9%	13.6%	8.6%	7.9%	9.4%
MVP	10,115	\$679,513	\$96,142	1.9%	Authorization	14.1%	17.5%	17.2%	14.4%	32.9%	42.2%	43.1%
CDPHP	10,078	\$658,466	\$78,945	1.8%	Authorization	12.0%	7.8%	2.6%	0.2%	1.5%	1.4%	1.2%
MetroPlus Health Plan	7,896	\$593,016	\$308,536	1.6%	Eligibility	52.0%	54.7%	57.6%	51.3%	45.0%	41.3%	12.6%
<b>Total</b>	<b>556,891</b>	<b>\$36,603,059</b>	<b>\$7,569,099</b>	<b>100.0%</b>		<b>20.7%</b>	<b>18.4%</b>	<b>16.7%</b>	<b>16.8%</b>	<b>17.0%</b>	<b>17.9%</b>	<b>16.0%</b>

These payers represent approximately 98.8 percent of total claims billed for regulated plans.

Source: 835's, Electronic Remits, and EOB entries  
 \*2021 Time Period: January 1, 2021 through September 30, 2021 Processing Dates  
 \*\*2020 Time Period: January 1, 2020 through December 31, 2020 Processing Dates  
 \*\*\*2019 Time Period: January 1, 2019 through December 31, 2019 Processing Dates  
 \*\*\*\*2018 Time Period: January 1, 2018 through December 31, 2018 Processing Dates  
 \*\*\*\*\*2017 Time Period: January 1, 2017 through December 31, 2017 Processing Dates  
 \*\*\*\*\*2016 Time Period: January 1, 2016 through December 31, 2016 Processing Dates  
 \*\*\*\*\*2015 Time Period: January 1, 2015 through December 31, 2015 Processing Dates



6



## Medicaid Code 35 Assignment Statistics

July 2016 – October 2021 (64 months)

Source	Period	Successful	Unsuccessful	Total	Success %
PCG Assignment File	Jul. 2016 – pres.	324.681	131.802	456.483	71.1%
OHIP Data Exchange	Dec. 2016 - pres.	204.825	4.130	208.955	98.0%
Conflict Report Corrections	Apr. 2017 – pres.	37.239	817	38.056	97.9%

- PCG Assignment File is sent weekly to Medicaid.
- Office of Health Insurance Programs (OHIP) File is sent monthly to PCG.
- Conflict Report Corrections are sent periodically upon resolution by the Municipality.
- Prior to this process, EI Providers used a completely manual process to have a Code 35 assigned correctly.

[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com) |



7

7

## Medicaid Sweep Process

For the period from July 2013 through September 2021 there have been 2.2 million claims totaling \$147.1 million processed in Medicaid Sweeps. Medicaid has paid 69.6% totaling \$102.3 million.

This monthly sweep includes:

- Claims that had Medicaid Code 35 errors that have been correctly assigned by PCG
- Claims initially paid from escrow where the child is later identified by PCG to have Medicaid coverage

Process	Sweep Date	# of Services	Billed Amount	Paid Amount
Code 35	2021	196,756	\$3,515,825	\$1,143,847
Medicaid Recoup	2021	118,913	\$8,928,641	\$6,288,723
<b>Total 2021 Code 35 and Medicaid Recoup Sweep</b>		<b>315,669</b>	<b>\$12,444,466</b>	<b>\$7,432,570</b>
Code 35	2020	80,642	\$2,739,249	\$440,993
Medicaid Recoup	2020	158,818	\$11,675,684	\$8,396,148
<b>Total 2020 Code 35 and Medicaid Recoup Sweep</b>		<b>239,460</b>	<b>\$14,414,933</b>	<b>\$8,837,141</b>
Code 35	2019	77,004	\$2,689,794	\$338,716
Medicaid Recoup	2019	197,650	\$15,020,242	\$10,250,291
<b>Total 2019 Code 35 and Medicaid Recoup Sweep</b>		<b>274,654</b>	<b>\$17,710,036</b>	<b>\$10,589,007</b>
Code 35	2018	7,433	\$254,946	\$80,054
Medicaid Recoup	2018	183,868	\$13,832,048	\$9,946,891
<b>Total 2018 Code 35 and Medicaid Recoup Sweep</b>		<b>191,301</b>	<b>\$14,086,994</b>	<b>\$10,026,945</b>
Code 35	2017	99,551	\$3,169,550	\$2,317,003
Medicaid Recoup	2017	204,637	\$15,339,435	\$11,933,188
<b>Total 2017 Code 35 and Medicaid Recoup Sweep</b>		<b>304,188</b>	<b>\$18,508,985</b>	<b>\$14,250,191</b>
Medicaid Recoup	2016	300,869	\$22,772,415	\$17,413,763
Medicaid Recoup	2015	297,812	\$22,964,035	\$15,792,792
Medicaid Recoup	2014	175,333	\$13,132,134	\$9,908,058
Medicaid Recoup	2013	146,049	\$11,078,848	\$8,078,510
<b>Grand Total of All Sweeps</b>		<b>2,245,335</b>	<b>\$147,112,846</b>	<b>\$102,328,977</b>

Note:  
Code 35 initial sweep date 5/16/17  
Medicaid Recoup initial sweep date 7/29/13

[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com) |



8

## Remittance Entry Process Update



PCG is working with Billing Providers to enroll with Commercial Payers to receive Remittance data via HIPAA compliant 835 files

Of the top 40 providers by claims volume, every one has enrolled with at least 11 payers, and 30 are completely enrolled.

There are 689 providers enrolled in 835's for all payers where they submit claims

Remittance Data Entry					
Description	Jul 2017 - Sept 2017	Jul 2018 - Sept 2018	Jul 2019 - Sept 2019	Jul 2020 - Sept 2020	Jul 2021 - Sept 2021
835	40.9%	44.3%	46.3%	44.0%	54.9%
EOB Entry	32.0%	31.4%	34.6%	39.1%	33.9%
Remit Posting	26.8%	22.7%	16.8%	13.8%	10.9%
All Other	0.3%	1.7%	2.4%	3.0%	0.3%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com) |



9

9

## Extraordinary Circumstance



- 142 unique providers have entered an Extraordinary circumstance since implementing the 90-day filing limit on February 10, 2019
- 194.7k claims totaling \$12.3m have been submitted 100+ days after the DOS
- 72.2k of the claims totaling \$4.4m had an active EC
- 122.5k of the claims totaling \$8.0m did not have an active EC
- Any claim submitted > 100 days and has not been adjudicated with EC logic will be picked up in a subsequent sweep.

Type of Circumstance	# of Providers	# of Claims with active EC
Audit Findings	47	3,876
Death of essential personnel	4	258
Hospitalization	17	801
Litigation	7	3,199
Natural Disaster	12	4,385
Natural Disaster/State of Emergency	88	57,059
State Administrative Delay	25	2,643
<b>Grand Total</b>	<b>200</b>	<b>72,221</b>

Active EC	# Claims Submitted 100+ Days After DOS	Billed Amount	CI Paid	Med Paid	Escrow Paid	Adjusted Amount	Pending Amount	Total Claims Submitted	% Submitted after 100+ days
Yes	72,221	\$4,370,906.50	\$48,243.85	\$1,874,295.25	\$1,630,368.63	\$716,315.45	\$101,683.32	21,263,513	0.9%
No	122,451	\$7,978,788.50	\$109,022.70	\$3,489,255.71	\$7,644.98	\$4,101,715.36	\$271,149.75		
<b>Grand Total</b>	<b>194,672</b>	<b>\$12,349,695.00</b>	<b>\$157,266.55</b>	<b>\$5,363,550.96</b>	<b>\$1,638,013.61</b>	<b>\$4,818,030.81</b>	<b>\$372,833.07</b>		

Note: Data includes Claims Submitted February 10, 2019 through September 30, 2021

[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com) |



10

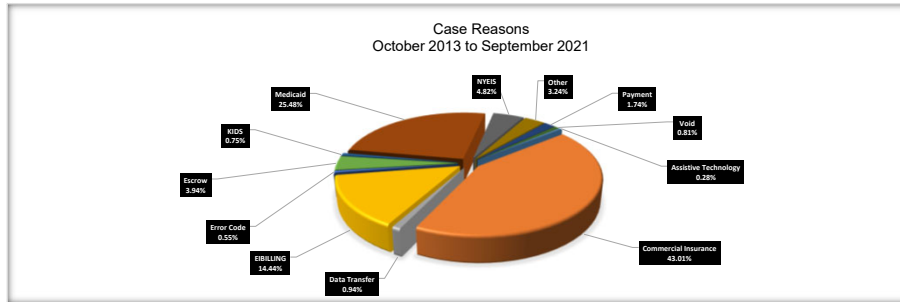
10

# SFA Call Center Statistics

## Operations Metrics: Call Center



- From October 1, 2013 to September 30, 2021 PCG has handled nearly 105,000 calls.
- The average call volume per day is 52.24 calls
- 70.37 percent of cases are resolved within 24 hours and 77.10 percent are resolved within five days
- Average age of call center cases is 5.81days

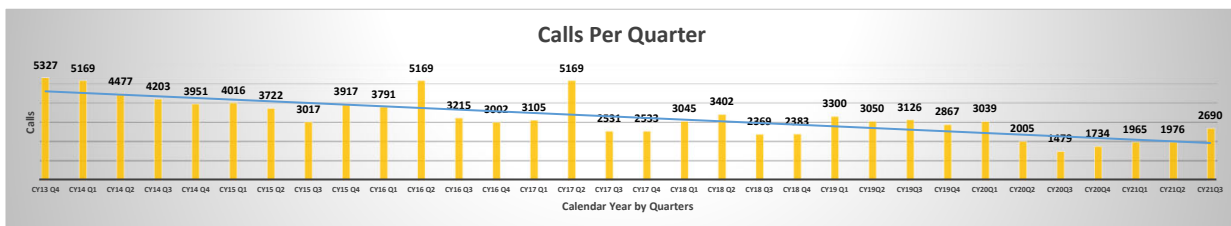
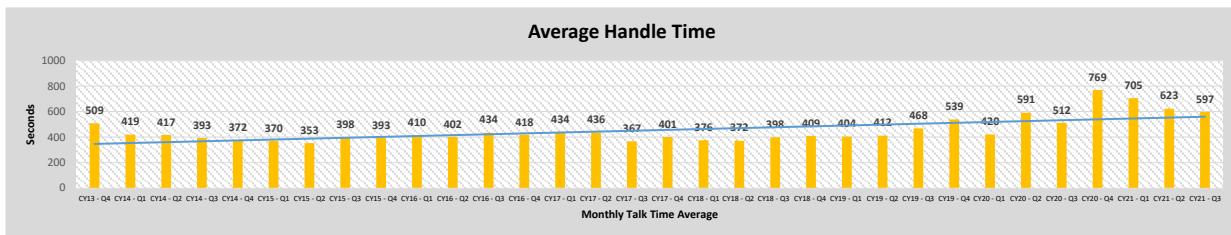


[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com)



11

# Call Center Trends



[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com)




12

# Question and Answer


13

## Question and Answer



**Rob Lillpopp**  
Public Consulting Group

**Paula Van Meter**  
Public Consulting Group

[www.publicconsultinggroup.com](http://www.publicconsultinggroup.com) | 

14



**Solutions that Matter**