



Professional Practice

Rev 7/17/2021

Professional Practice is a full-service billing agency serving mental health providers since 2008.

Standard Services Include:

- **Benefits Checks & Price Estimates.** Insurance verification including estimate of patient out of pocket expense (within 48 hours of receiving patient intake)
- **Insurance billing** (both electronic and paper)
- **Claims follow-Up.** For claims unpaid 30 days after submission
- **Patient Correspondence.** HIPAA compliant patient statements by mail, email, and text. Patient follow up by phone, email, and portal message to arrange payment plans.
- **Credentialing & Contracting** with a variety of payers.
- **Authorizations.**
- **Single Case Agreements.**
- **ERA/EFT Enrollment.** Enrollment for payment by electronic funds transfer.
- **Denial Management and Appeals**
- **Fee negotiations.** Many insurance payers will consider increasing a provider's allowed rates periodically if they receive a good proposal.
- **Monthly Reporting & Analytics** based on the practice's goals.
- **Scheduling and Appointment Reminders.** Access to scheduling software including free patient appointment reminders (optional).

Our standard services are similar to other billers. What's different about us?

When you Google your practice and all providers, is the information correct?

- **Directory Searches.** (No Additional Fee) We review insurance company directories online regularly to make sure that they list accurate information for your practice. Maintaining these directories helps potential patients to find you when they need you.

Are you getting paid at the rates your contracts promise?



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- **Contract Management.** (No Additional Fee) We run reports to compare the amount that you are contracted to receive from each payer with the amounts that are allowed on your claims. This allows us to reach out to the payer if they are underpaying your claims and to make sure that you are receiving the correct allowed rate for your services. It also keeps us aware of the typical fees received per code and gives us the opportunity to reach out to you if your contracted rates are below the average.

How does your revenue for this season or for a therapy group this year compare to past revenue?

- **Reporting and Analysis.** (No Additional Fee) We offer a myriad of customizable reports and analysis. These reports can show you where the bulk of your claims are going and where your revenue is coming from, a detailed analysis of write-offs, revenue over time, trends and patterns, and a variety of other indicators.

Do you know when your credentialing expires? Lapse of insurance contracts can cost you and jeopardize patient care.

- **Proactive Credentialing and Contracting.** (No Additional Fee) We don't wait for payers to reach out to us for renewal of your credentialing and contracting. We maintain a schedule to reach out to them so that your credentialing is maintained, and your contracts don't lapse.

Have you noticed an increase in denials lately? We have too.

- **Appeals.** (No Additional Fee) We have experience submitting and escalating insurance appeals to the point of external review when claims are denied and/or underpaid. We are aware of pertinent timelines and contractual limitations.

Are your overhead expenses rising while your contracted rates remain the same?

- **Fee Negotiations.** We offer fee negotiations with insurance companies whereby; we prepare a petition to the payer requesting that they reconsider your contracted rates for an increase. Payers do consider these petitions and frequently offer increased rates. (Additional fees apply for fee negotiations in some circumstances).