

Equi-Librium Therapy Center

Purpose:

I examined whether it would be beneficial for Equi-Librium Therapy Center to accept Medicaid payments from specific clients, and if the reimbursement from that would be substantial or not.

Objectives:

Tasks to complete this project...

- 1) Have a discussion with the staff from TREE House of Greater St. Louis to decipher how they have been accepting Medicaid, as well as other forms of insurance, for the past 15 years.
- 2) Have a discussion with the staff from Ride On St. Louis to determine how their experience with accepting Medicaid and other forms of insurance went, and why they chose to stop accepting these forms.
- 3) Have a discussion with a resource from a physical therapy clinic in St. Louis to determine how insurance works, whether or not they accept Medicaid, and why.

Outcome:

Throughout this project, I also did some minor research about basic insurance acceptance, as well as the Medicaid billing. First, in my discussion with Advanced Training and Rehab, I learned the difference between being in network, and out of network, with insurance carriers, as well as what it means to have a contract with them. When one is in network, they have a contract with specific insurance companies saying that the insurance company will always give them a set reimbursement, and the therapy center just pays the rest. When one is out of network, they do not have a set contract with the insurance company saying they will get a constant reimbursement. You usually get reimbursed less from the insurance company, but the patient has to pay whatever the insurance company does not reimburse. I also learned that the therapy

clinic takes about 250 patients/week, and do not bill Medicaid. They are in network with some insurance carriers, and out of network with others. When asked why Medicaid is not accepted, my source stated that “they do not reimburse enough.”

I proceeded to talk to Lauren from Ride On St. Louis. The information I received from them mostly pertained to insurance in general. The bookkeeper that they used was a full time volunteer. She also stated that Illinois Medicaid often did not pay them at all (they were out of network). She also mentioned that a majority of the time, it is non-medical professionals that receive authorization requests. Depending on whose desk it lands on, you could be denied, even though a form just a day or two earlier would be approved. They would also state that progress was not noted until ten to twelve visits, but they would get denied because progress was not made after two to three visits. After they were denied, they would appeal if appropriate. There was a long paperwork process that went along with the appeals. Ride On St. Louis would have to set up a phone call with the medical director of the insurance carrier. The phone call would be at a time of their choosing, meaning that they would have to cancel patients or rearrange schedules. Lauren stated that “the stress of dealing with a person whose main goal is denying health care is draining.” She also explained that it got confusing because different insurance companies deny specific diagnoses. For instance, Exclusive Choice would not cover a diagnosis of developmental delay. Many insurance companies also do not cover sensory processing disorder, etc.

Lastly, I held a conversation with Shelly from TREE House of Greater St. Louis. TREE House is a PATH certified therapy center. They bill hippotherapy using occupational therapy, physical therapy, and/or speech therapy procedural codes. Shelly explained to me that they take all insurance. They are in network with Straight Medicaid, but not managed care plans. They are out of network with other insurance. She suggested that if Equi-Librium were to begin billing insurance, you should begin by going in network with insurance companies. She stated that they charge \$125 for everyone, for one hour long sessions. When

they bill Medicaid, they get reimbursed \$10/unit. One unit is 15 minutes long. This means that they bill for four units. Since one unit is \$10, they get reimbursed \$40 for each Medicaid patient. She explained that they use a list of about ten CPT codes, depending on the procedure used. Their clients go to therapy for around 10-12 weeks. They see about 85 clients per week, and run on a yearly schedule. Winter is their slower season, though. The client gets a prescription from the doctor to come one time a week and it is an open ended prescription. Every ten to twelve weeks, the therapists do a progress report which tells if the client has met their goal, or if they are close to it.

If Equi-Librium chooses to begin billing insurance, a national provider information number is required. In other words, this is called the NPI number. To gain a provider number, you can go to <http://www.apta.org/NPI/Applying/>.

My recommendation is to not bill Medicaid, but to look further into billing other insurance companies, whether it is in network or out of network with specific insurance companies.