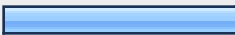



Insurer Payment Denials Survey

During the past year have you experienced a denial for payment because the insurer has arbitrarily designated a well established procedure as being “experimental?”			Response Percent	Response Count
Yes			35.6%	121
No			64.4%	219
	<i>answered question</i>			340
	<i>skipped question</i>			8

Insurer Payment Denials Survey

If you have, what CPT codes were involved?		
		Response Count
		50
<i>answered question</i>		50
<i>skipped question</i>		298

Response Text		
1	64708, 26040	Sep 18, 2009 9:04 PM
2	26040	Sep 18, 2009 9:19 PM
3	95903, 95904	Sep 18, 2009 9:32 PM
4	24358	Sep 18, 2009 9:44 PM
5	29999	Sep 18, 2009 10:05 PM
6	Arthroscopy CMC joint	Sep 18, 2009 10:50 PM
7	26340	Sep 18, 2009 11:06 PM
8	29999	Sep 18, 2009 11:09 PM
9	neurosensory testing with PSSD	Sep 18, 2009 11:42 PM
10	29999	Sep 19, 2009 2:41 AM
11	15335	Sep 19, 2009 10:05 AM
12	botox in fingers, compression neuropathies, tendonitis	Sep 19, 2009 2:52 PM
13	25310, 25447, and 26536	Sep 19, 2009 4:52 PM
14	unlisted procedure code (thermal shrinkage SL ligament)	Sep 20, 2009 3:01 AM
15	29999	Sep 20, 2009 11:08 AM
16	64708	Sep 20, 2009 11:51 AM
17	64708	Sep 20, 2009 1:15 PM
18	na	Sep 20, 2009 3:12 PM
19	PRP injection for lateral epicondylitis	Sep 20, 2009 8:32 PM
20	20551	Sep 21, 2009 1:29 AM
21	29868	Sep 21, 2009 1:32 PM
22	20600	Sep 21, 2009 2:31 PM
23	97033	Sep 21, 2009 3:00 PM
24	0056T, 69990	Sep 21, 2009 3:04 PM
25	26535	Sep 21, 2009 4:39 PM
26	20526	Sep 21, 2009 10:30 PM
27	64418	Sep 22, 2009 4:17 AM
28	97022	Sep 22, 2009 4:08 PM
29	90901	Sep 25, 2009 1:54 PM
30	15170	Sep 25, 2009 2:52 PM
31	20973	Sep 25, 2009 2:52 PM
32	0019-T Ossatron Orthotrypsy elbow	Sep 25, 2009 3:19 PM

Response Text		
33	96372 - Botox for Raynaud's	Sep 25, 2009 4:10 PM
34	26536	Sep 25, 2009 4:22 PM
35	26340, 25259	Sep 25, 2009 4:57 PM
36	97033 (iontophoresis and phonophoresis)	Sep 25, 2009 5:07 PM
37	29840,25310,26480,29846,29999	Sep 25, 2009 5:35 PM
38	26356 TOTAL JOINT	Sep 25, 2009 9:09 PM
39	36514, 36513	Sep 25, 2009 11:27 PM
40	29999	Sep 26, 2009 5:00 PM
41	not available to me	Sep 26, 2009 5:15 PM
42	do not remember	Sep 27, 2009 10:17 PM
43	97033,96004,97112,27570,20985,23700,22630,J7321,22612,27415,99183,J7323 ,J0585,97014,22558,20605,29866,72295	Sep 28, 2009 2:05 PM
44	27416	Sep 28, 2009 10:35 PM
45	64708	Sep 29, 2009 3:02 AM
46	97033,phoresor	Oct 2, 2009 3:17 PM
47	90773	Oct 2, 2009 8:09 PM
48	26040	Oct 4, 2009 2:39 PM
49	13300	Oct 5, 2009 3:44 PM
50	24300	Oct 5, 2009 5:12 PM

Insurer Payment Denials Survey

How often has this occurred for each code?		
		Response Count
		50
		50
		298

Response Text		
1	1x on first, twice on second	Sep 18, 2009 9:04 PM
2	5 or 6 times	Sep 18, 2009 9:19 PM
3	three times	Sep 18, 2009 9:32 PM
4	once	Sep 18, 2009 9:44 PM
5	too many to count	Sep 18, 2009 10:05 PM
6	2	Sep 18, 2009 10:50 PM
7	4 times	Sep 18, 2009 11:06 PM
8	frequently	Sep 18, 2009 11:09 PM
9	each	Sep 18, 2009 11:42 PM
10	most times	Sep 19, 2009 2:41 AM
11	almost always	Sep 19, 2009 10:05 AM
12	2	Sep 19, 2009 4:52 PM
13	not sure	Sep 20, 2009 3:01 AM
14	every time with radial nerve	Sep 20, 2009 11:51 AM
15	2-3 Times	Sep 20, 2009 1:15 PM
16	over 3 times	Sep 20, 2009 2:20 PM
17	na	Sep 20, 2009 3:12 PM
18	6	Sep 20, 2009 8:32 PM
19	unknown	Sep 21, 2009 1:29 AM
20	1	Sep 21, 2009 1:32 PM
21	recently started	Sep 21, 2009 2:31 PM
22	every time with certain payor	Sep 21, 2009 3:00 PM
23	10	Sep 21, 2009 3:04 PM
24	frequently with pyrocarbon pips	Sep 21, 2009 4:39 PM
25	one	Sep 21, 2009 10:30 PM
26	at least 50 times on shoulder surgeries, once for botox for critical Raynaud's	Sep 22, 2009 4:17 AM
27	very often	Sep 22, 2009 4:08 PM
28	every time it is billed	Sep 25, 2009 1:54 PM
29	twice	Sep 25, 2009 2:52 PM
30	1	Sep 25, 2009 2:52 PM
31	1	Sep 25, 2009 3:19 PM
32	always	Sep 25, 2009 4:10 PM

Response Text		
33	1	Sep 25, 2009 4:22 PM
34	several	Sep 25, 2009 4:57 PM
35	50% of the submitted claims	Sep 25, 2009 5:07 PM
36	1-2 x	Sep 25, 2009 5:35 PM
37	EVERY TIME	Sep 25, 2009 9:09 PM
38	75%, 75%	Sep 25, 2009 11:27 PM
39	Exactly number, not available but enough to know it's a problem!	Sep 26, 2009 5:00 PM
40	multiple codes(all workman's comp)	Sep 26, 2009 5:15 PM
41	2	Sep 27, 2009 8:03 PM
42	once	Sep 27, 2009 10:17 PM
43	164 occurrences for first 6 codes; 22 occurrences for all others combined	Sep 28, 2009 2:05 PM
44	once	Sep 28, 2009 10:35 PM
45	frequently	Sep 29, 2009 3:02 AM
46	20	Oct 2, 2009 3:17 PM
47	25%	Oct 2, 2009 8:09 PM
48	occasionally	Oct 4, 2009 2:39 PM
49	approximately 5	Oct 5, 2009 3:44 PM
50	1	Oct 5, 2009 5:12 PM

Insurer Payment Denials Survey

Which insurer(s) denied the claims?		
		Response Count
		50
<i>answered question</i>		50
<i>skipped question</i>		298

Response Text		
1	BCBSMA, Tufts	Sep 18, 2009 9:04 PM
2	Blue cross (not illinois, out of state). I am in Illinois, BCBS Illinois OK	Sep 18, 2009 9:19 PM
3	Aetna, United Healthcare	Sep 18, 2009 9:32 PM
4	bc/bs	Sep 18, 2009 9:44 PM
5	Regence,Aetna,Cigna, UHC, Premera	Sep 18, 2009 10:05 PM
6	UHC	Sep 18, 2009 10:50 PM
7	Cigna, Aetna	Sep 18, 2009 11:06 PM
8	all kinds	Sep 18, 2009 11:09 PM
9	workmen's comp	Sep 18, 2009 11:42 PM
10	BCBS	Sep 19, 2009 2:41 AM
11	CIGNA	Sep 19, 2009 10:05 AM
12	independent health, bcbs, workers comp	Sep 19, 2009 2:52 PM
13	BC / BS through Tennessee Rural Health Network	Sep 19, 2009 4:52 PM
14	Anthem BCBS	Sep 20, 2009 3:01 AM
15	medicare, cigna, bcbs	Sep 20, 2009 11:51 AM
16	unknown at this time	Sep 20, 2009 1:15 PM
17	bcbs primarily	Sep 20, 2009 2:20 PM
18	humana, anthem, uhc	Sep 20, 2009 3:12 PM
19	all	Sep 20, 2009 8:32 PM
20	cigna	Sep 21, 2009 1:29 AM
21	BLUE CROSS	Sep 21, 2009 1:32 PM
22	bc/bs	Sep 21, 2009 2:31 PM
23	aetna	Sep 21, 2009 3:00 PM
24	Blue Cross, Blue Shield, UHC	Sep 21, 2009 3:04 PM
25	United	Sep 21, 2009 4:39 PM
26	blue cross blue shield	Sep 21, 2009 10:30 PM
27	Wellmark Blue Cross	Sep 22, 2009 4:17 AM
28	UHC,	Sep 22, 2009 4:08 PM
29	IBC, Aetna, BCBS	Sep 25, 2009 1:54 PM
30	BCBS	Sep 25, 2009 2:52 PM
31	dont recall	Sep 25, 2009 3:19 PM
32	Medicare, Oxford, Aetna, BlueCross, Affinity	Sep 25, 2009 4:10 PM

Response Text		
33	don't remember	Sep 25, 2009 4:22 PM
34	United Healthcare	Sep 25, 2009 4:57 PM
35	Aetna, Oxford, HN, Cigna	Sep 25, 2009 5:07 PM
36	Uhc, anthem, aetna	Sep 25, 2009 5:35 PM
37	uhc	Sep 25, 2009 9:09 PM
38	Blue cross, blue shield	Sep 25, 2009 11:27 PM
39	Across the board.....	Sep 26, 2009 5:00 PM
40	mainly Texas Mutual	Sep 26, 2009 5:15 PM
41	blue cross and blue sheild	Sep 27, 2009 8:03 PM
42	coventry work comp	Sep 27, 2009 10:17 PM
43	All major payers (not all deny equally)	Sep 28, 2009 2:05 PM
44	Blue Cross Blue Shield	Sep 28, 2009 10:35 PM
45	AETNA	Sep 29, 2009 3:02 AM
46	BCBS Nebraska	Oct 2, 2009 3:17 PM
47	BCBS	Oct 2, 2009 8:09 PM
48	don't know	Oct 4, 2009 2:39 PM
49	GHI	Oct 5, 2009 3:44 PM
50	aetna	Oct 5, 2009 5:12 PM

Insurer Payment Denials Survey

What avenues of appeal did you use? (check all that apply)			Response Percent	Response Count
Legal	<input type="checkbox"/>		9.7%	3
Legislative	<input type="checkbox"/>		3.2%	1
State medical society	<input type="checkbox"/>		16.1%	5
State insurance commissioner	<input type="checkbox"/>		9.7%	3
I did not appeal	<input type="checkbox"/>		74.2%	23
Other (please specify)				32
			answered question	31
			skipped question	317

Other (please specify)		
1	through provider relations, medical director	Sep 18, 2009 9:04 PM
2	appealed to internal insurance reviewers	Sep 18, 2009 9:19 PM
3	Must use diagnosis of CTS otherwise they do not cover	Sep 18, 2009 9:32 PM
4	medical director in person appeals	Sep 18, 2009 10:05 PM
5	Spoke to medical director and it was reversed	Sep 18, 2009 10:50 PM
6	I stopped providing the service	Sep 18, 2009 11:42 PM
7	in process	Sep 19, 2009 2:41 AM
8	via insurance company only	Sep 19, 2009 4:52 PM
9	billed the patient; got nasty letters and gave up	Sep 20, 2009 3:01 AM
10	wrote letters and gave proff from articles	Sep 20, 2009 2:20 PM
11	letters to them, calls, insurance commissioner	Sep 20, 2009 3:12 PM
12	patients paid out of pocket	Sep 20, 2009 8:32 PM
13	APPEALED INTERNALLY	Sep 21, 2009 1:32 PM
14	Insurance Form if available or written appeal	Sep 21, 2009 3:04 PM
15	wrote letters to United	Sep 21, 2009 4:39 PM
16	wrote back to the insurance company, issue presently remains unresolved	Sep 21, 2009 10:30 PM
17	insurance company only	Sep 22, 2009 4:17 AM
18	UHC guidelines	Sep 22, 2009 4:08 PM
19	appeal letter to insurance companies	Sep 25, 2009 1:54 PM
20	direct appeal to BCBS	Sep 25, 2009 2:52 PM
21	resubmitted with copies of publications	Sep 25, 2009 4:10 PM
22	Medical Director	Sep 25, 2009 4:57 PM

Other (please specify)		
23	So far, I have only had to go to the highest level of appeals (including Q4 w/Medicare)	Sep 26, 2009 5:00 PM
24	I do not get paid(the state of Texas) for appealing, which takes a phenomenal amount of time due to the way the insurers set up the appeals process. I have checked on the credentials of the reviewers---2 were losing their license to practice within the month, many were nonsurgeons whom our medical colleagues on the board of medical examiners do not view as malpractice when it comes to practicing outside of ones area of training, but are quick to punish Drs for not filling out forms correctly, having too brief medicals notations, etc	Sep 26, 2009 5:15 PM
25	osteocondral allograft for PIP fx/disl and ocd elbow	Sep 27, 2009 8:03 PM
26	i called and talked with company - they made a parital adustment	Sep 27, 2009 10:17 PM
27	Appeal by biller/collector - some resulting in payment	Sep 28, 2009 2:05 PM
28	appeal within company	Oct 2, 2009 3:17 PM
29	Directly with insurer...successfully	Oct 2, 2009 8:09 PM
30	these were patient denials; I was an out of service provider	Oct 4, 2009 2:39 PM
31	collection	Oct 5, 2009 5:10 AM
32	personal appeal	Oct 5, 2009 5:12 PM

Insurer Payment Denials Survey

Please indicate the state in which you practice:		
		Response Count
		262
	answered question	262
	skipped question	86

Response Text		
1	Massachusetts	Sep 18, 2009 9:06 PM
2	KY	Sep 18, 2009 9:06 PM
3	Georgia	Sep 18, 2009 9:06 PM
4	Minnesota	Sep 18, 2009 9:10 PM
5	South Carolina	Sep 18, 2009 9:10 PM
6	Massachusetts	Sep 18, 2009 9:12 PM
7	illinois	Sep 18, 2009 9:19 PM
8	georgia	Sep 18, 2009 9:19 PM
9	Texas	Sep 18, 2009 9:27 PM
10	new york	Sep 18, 2009 9:33 PM
11	Fl	Sep 18, 2009 9:34 PM
12	California	Sep 18, 2009 9:34 PM
13	Florida	Sep 18, 2009 9:36 PM
14	Nebraska	Sep 18, 2009 9:39 PM
15	KY	Sep 18, 2009 9:43 PM
16	pa	Sep 18, 2009 9:44 PM
17	Texas	Sep 18, 2009 9:52 PM
18	CA	Sep 18, 2009 10:02 PM
19	washington	Sep 18, 2009 10:07 PM
20	Indiana	Sep 18, 2009 10:08 PM
21	Mi	Sep 18, 2009 10:18 PM
22	California	Sep 18, 2009 10:20 PM
23	ID	Sep 18, 2009 10:29 PM
24	mo	Sep 18, 2009 10:52 PM
25	north carolina	Sep 18, 2009 10:57 PM
26	Nevada	Sep 18, 2009 11:06 PM
27	ca	Sep 18, 2009 11:10 PM
28	Ca	Sep 18, 2009 11:27 PM
29	Rhode Island	Sep 18, 2009 11:29 PM
30	WA	Sep 18, 2009 11:44 PM
31	mo	Sep 18, 2009 11:50 PM
32	Illinois	Sep 18, 2009 11:52 PM

Response Text		
33	Kentucky	Sep 18, 2009 11:56 PM
34	pennsylvania	Sep 19, 2009 12:02 AM
35	NC	Sep 19, 2009 12:13 AM
36	CA	Sep 19, 2009 12:28 AM
37	ct	Sep 19, 2009 1:13 AM
38	new york	Sep 19, 2009 1:24 AM
39	nj	Sep 19, 2009 1:25 AM
40	FLorida	Sep 19, 2009 1:33 AM
41	WA	Sep 19, 2009 2:01 AM
42	il	Sep 19, 2009 2:08 AM
43	ohio	Sep 19, 2009 2:20 AM
44	Florida	Sep 19, 2009 2:43 AM
45	oklahoma	Sep 19, 2009 2:46 AM
46	iowa	Sep 19, 2009 2:57 AM
47	ny	Sep 19, 2009 3:09 AM
48	Georgia	Sep 19, 2009 4:48 AM
49	California	Sep 19, 2009 6:24 AM
50	California	Sep 19, 2009 7:20 AM
51	Vermont	Sep 19, 2009 10:07 AM
52	KY	Sep 19, 2009 11:16 AM
53	Texas	Sep 19, 2009 11:23 AM
54	MA	Sep 19, 2009 12:29 PM
55	Virginia	Sep 19, 2009 12:42 PM
56	NC	Sep 19, 2009 12:44 PM
57	new york	Sep 19, 2009 2:53 PM
58	Michigan	Sep 19, 2009 3:51 PM
59	NY	Sep 19, 2009 3:54 PM
60	Florida	Sep 19, 2009 4:05 PM
61	tn	Sep 19, 2009 4:53 PM
62	maryland	Sep 19, 2009 5:14 PM
63	NC	Sep 19, 2009 5:46 PM
64	ohio	Sep 19, 2009 5:59 PM
65	Ca	Sep 19, 2009 7:36 PM
66	ny	Sep 19, 2009 8:02 PM
67	kansas, missouri	Sep 19, 2009 8:37 PM
68	VA	Sep 20, 2009 3:01 AM
69	TX	Sep 20, 2009 3:30 AM
70	maryland	Sep 20, 2009 11:53 AM
71	SC	Sep 20, 2009 12:14 PM
72	New Jersey	Sep 20, 2009 12:24 PM
73	maryland	Sep 20, 2009 1:08 PM
74	Arizona	Sep 20, 2009 1:16 PM
75	WI	Sep 20, 2009 1:31 PM
76	connecticut	Sep 20, 2009 2:21 PM
77	pa	Sep 20, 2009 2:27 PM

Response Text		
78	NY	Sep 20, 2009 2:52 PM
79	oh	Sep 20, 2009 3:13 PM
80	UT	Sep 20, 2009 3:13 PM
81	New York	Sep 20, 2009 4:27 PM
82	UT	Sep 20, 2009 5:33 PM
83	MO	Sep 20, 2009 6:25 PM
84	MN	Sep 20, 2009 8:32 PM
85	Illinois	Sep 20, 2009 9:19 PM
86	penna	Sep 20, 2009 10:33 PM
87	Ca	Sep 20, 2009 10:54 PM
88	California	Sep 20, 2009 11:17 PM
89	No longer practicing	Sep 20, 2009 11:56 PM
90	illinois	Sep 21, 2009 1:29 AM
91	Virginia	Sep 21, 2009 2:10 AM
92	NJ	Sep 21, 2009 2:43 AM
93	Virginia	Sep 21, 2009 2:52 AM
94	Montana	Sep 21, 2009 3:17 AM
95	SC	Sep 21, 2009 10:01 AM
96	sc	Sep 21, 2009 10:58 AM
97	mousouri	Sep 21, 2009 11:39 AM
98	ohio	Sep 21, 2009 11:40 AM
99	Texas	Sep 21, 2009 11:54 AM
100	sc	Sep 21, 2009 12:29 PM
101	New York	Sep 21, 2009 1:10 PM
102	Louisiana	Sep 21, 2009 1:10 PM
103	SD	Sep 21, 2009 1:24 PM
104	LA	Sep 21, 2009 1:33 PM
105	new york	Sep 21, 2009 1:33 PM
106	Maryland	Sep 21, 2009 2:32 PM
107	California	Sep 21, 2009 3:05 PM
108	texas	Sep 21, 2009 4:02 PM
109	Texas	Sep 21, 2009 4:41 PM
110	Connecticut	Sep 21, 2009 7:51 PM
111	OR	Sep 21, 2009 8:11 PM
112	Georgia	Sep 21, 2009 8:51 PM
113	New Jersey	Sep 21, 2009 9:14 PM
114	CA	Sep 21, 2009 10:31 PM
115	AK	Sep 21, 2009 10:55 PM
116	co	Sep 21, 2009 11:00 PM
117	pa/md	Sep 21, 2009 11:39 PM
118	florida	Sep 21, 2009 11:55 PM
119	Pennsylvania	Sep 22, 2009 1:25 AM
120	Tx	Sep 22, 2009 2:23 AM
121	montana	Sep 22, 2009 2:48 AM
122	KS	Sep 22, 2009 3:10 AM

Response Text		
123	IA	Sep 22, 2009 4:17 AM
124	Oregon	Sep 22, 2009 4:37 AM
125	ca	Sep 22, 2009 5:17 AM
126	illinois	Sep 22, 2009 12:53 PM
127	Puerto Rico	Sep 22, 2009 1:17 PM
128	Mississippi	Sep 22, 2009 3:10 PM
129	Wisconsin	Sep 22, 2009 4:10 PM
130	New Jersey	Sep 22, 2009 6:00 PM
131	Texas	Sep 22, 2009 6:15 PM
132	co	Sep 22, 2009 6:54 PM
133	NY	Sep 22, 2009 7:18 PM
134	Iowa	Sep 22, 2009 7:23 PM
135	New York	Sep 22, 2009 8:27 PM
136	MI	Sep 22, 2009 9:07 PM
137	FL	Sep 23, 2009 12:13 AM
138	Arizona	Sep 23, 2009 12:33 AM
139	SC	Sep 23, 2009 1:18 AM
140	MO	Sep 23, 2009 12:01 PM
141	NY	Sep 23, 2009 2:14 PM
142	CALIFORNIA	Sep 23, 2009 4:21 PM
143	FL	Sep 23, 2009 7:24 PM
144	PA	Sep 23, 2009 9:45 PM
145	Washington	Sep 23, 2009 11:51 PM
146	Florida	Sep 24, 2009 12:42 AM
147	texas	Sep 24, 2009 3:42 PM
148	ohio	Sep 25, 2009 1:44 AM
149	Pennsylvania	Sep 25, 2009 1:56 PM
150	Florida	Sep 25, 2009 2:39 PM
151	Illinois	Sep 25, 2009 2:46 PM
152	Florida	Sep 25, 2009 2:47 PM
153	IL	Sep 25, 2009 2:50 PM
154	NC	Sep 25, 2009 2:53 PM
155	south carolina	Sep 25, 2009 2:54 PM
156	California	Sep 25, 2009 3:11 PM
157	TN	Sep 25, 2009 3:19 PM
158	CT	Sep 25, 2009 3:27 PM
159	nc	Sep 25, 2009 3:34 PM
160	New York	Sep 25, 2009 4:11 PM
161	NY	Sep 25, 2009 4:19 PM
162	NY	Sep 25, 2009 4:23 PM
163	MA	Sep 25, 2009 4:27 PM
164	OHIO	Sep 25, 2009 4:33 PM
165	pa	Sep 25, 2009 4:39 PM
166	CT	Sep 25, 2009 5:07 PM
167	ms	Sep 25, 2009 5:16 PM

Response Text		
168	texas	Sep 25, 2009 5:17 PM
169	mo	Sep 25, 2009 5:32 PM
170	Ohio	Sep 25, 2009 5:35 PM
171	Arizona	Sep 25, 2009 5:46 PM
172	ny	Sep 25, 2009 6:06 PM
173	vt	Sep 25, 2009 6:09 PM
174	VA	Sep 25, 2009 6:57 PM
175	MI	Sep 25, 2009 7:37 PM
176	OHIO	Sep 25, 2009 7:49 PM
177	OH	Sep 25, 2009 7:56 PM
178	CA	Sep 25, 2009 8:47 PM
179	WI	Sep 25, 2009 9:09 PM
180	va	Sep 25, 2009 9:45 PM
181	il	Sep 25, 2009 9:54 PM
182	fl	Sep 25, 2009 10:21 PM
183	Ca	Sep 25, 2009 11:27 PM
184	Oklahoma	Sep 26, 2009 2:03 AM
185	IL	Sep 26, 2009 3:16 AM
186	ma	Sep 26, 2009 10:05 AM
187	North Carolina	Sep 26, 2009 12:38 PM
188	FL	Sep 26, 2009 1:25 PM
189	illinois	Sep 26, 2009 3:21 PM
190	Northern VA/DC Metro Area	Sep 26, 2009 5:03 PM
191	texas	Sep 26, 2009 5:22 PM
192	ny	Sep 26, 2009 5:45 PM
193	IL	Sep 26, 2009 6:02 PM
194	IL	Sep 26, 2009 6:59 PM
195	massachusetts	Sep 26, 2009 9:05 PM
196	utah	Sep 27, 2009 12:49 PM
197	Tennessee	Sep 27, 2009 7:40 PM
198	virginia	Sep 27, 2009 8:03 PM
199	KS	Sep 27, 2009 10:17 PM
200	MA	Sep 27, 2009 11:40 PM
201	new jersey	Sep 28, 2009 12:27 AM
202	Florida	Sep 28, 2009 2:14 AM
203	dc	Sep 28, 2009 1:19 PM
204	Maine	Sep 28, 2009 1:21 PM
205	California	Sep 28, 2009 1:46 PM
206	Georgia	Sep 28, 2009 2:06 PM
207	washington	Sep 28, 2009 3:40 PM
208	ky	Sep 28, 2009 8:47 PM
209	NY	Sep 28, 2009 10:36 PM
210	ct	Sep 29, 2009 12:06 AM
211	Texas	Sep 29, 2009 3:02 AM
212	NJ	Sep 29, 2009 1:34 PM

Response Text		
213	pa	Sep 29, 2009 6:21 PM
214	SC	Sep 30, 2009 2:15 AM
215	maryland	Sep 30, 2009 2:18 AM
216	North Carolina	Sep 30, 2009 5:40 PM
217	Oklahoma	Oct 1, 2009 9:06 PM
218	Nebraska	Oct 2, 2009 3:21 PM
219	California	Oct 2, 2009 5:22 PM
220	ky	Oct 2, 2009 5:23 PM
221	Illinois	Oct 2, 2009 5:23 PM
222	california	Oct 2, 2009 5:24 PM
223	ny	Oct 2, 2009 5:32 PM
224	Massachusetts	Oct 2, 2009 5:36 PM
225	VT	Oct 2, 2009 5:38 PM
226	Vermont	Oct 2, 2009 6:20 PM
227	CALIFORNIA	Oct 2, 2009 6:44 PM
228	IL	Oct 2, 2009 6:53 PM
229	CA	Oct 2, 2009 7:20 PM
230	MI	Oct 2, 2009 8:09 PM
231	Arizona	Oct 2, 2009 9:19 PM
232	Minnesota	Oct 3, 2009 12:28 AM
233	Ohio	Oct 3, 2009 1:35 AM
234	NJ	Oct 3, 2009 1:55 AM
235	Alabama	Oct 3, 2009 7:19 AM
236	NY	Oct 3, 2009 10:26 AM
237	Michigan	Oct 3, 2009 12:24 PM
238	arizona	Oct 3, 2009 1:56 PM
239	New York	Oct 3, 2009 2:20 PM
240	ILLINOIS	Oct 3, 2009 3:30 PM
241	ri	Oct 3, 2009 5:14 PM
242	NJ	Oct 3, 2009 8:43 PM
243	Washington	Oct 3, 2009 11:54 PM
244	california	Oct 4, 2009 12:50 AM
245	Illinois	Oct 4, 2009 1:05 PM
246	new york	Oct 4, 2009 2:22 PM
247	FL	Oct 4, 2009 2:37 PM
248	Illinois	Oct 5, 2009 12:17 AM
249	Ohin	Oct 5, 2009 2:08 AM
250	ill	Oct 5, 2009 5:10 AM
251	Pennsylvania	Oct 5, 2009 12:38 PM
252	IL	Oct 5, 2009 1:17 PM
253	Connecticut	Oct 5, 2009 1:24 PM
254	New York	Oct 5, 2009 3:44 PM
255	NC	Oct 5, 2009 4:06 PM
256	georgia	Oct 5, 2009 5:12 PM
257	nc	Oct 5, 2009 5:47 PM

Response Text		
258	ca	Oct 5, 2009 7:16 PM
259	Texas	Oct 6, 2009 1:59 AM
260	PA	Oct 6, 2009 11:58 AM
261	Georgia	Oct 6, 2009 3:45 PM
262	ny	Oct 6, 2009 5:37 PM

Insurer Payment Denials Survey

Briefly share your “pearls” of wisdom regarding this issue.		
		Response Count
		110
<i>answered question</i>		110
<i>skipped question</i>		238

Response Text		
1	Get the patient involved. They need to contact the insurer and ask why it is denied. I would like to see state societies given "teeth" to hold these insurance companies accountable. Would like to see a more responsive state government.	Sep 18, 2009 9:06 PM
2	none	Sep 18, 2009 9:06 PM
3	Documentation is key. I had a thumb duplication reconstruction initially denied because, in an attempt to reassure the parents, I stated in my note that the defect was not currently causing the child (at 4 wks old!) difficulty and was not likely to be noticed by many people. I explained that this was not going to be the case as the child grew to the reviewer who then allowed the procedure.	Sep 18, 2009 9:10 PM
4	We are subject to criticism here given that much of what we do is not supported by experimental evidence.	Sep 18, 2009 9:12 PM
5	don't have any pearls. looking for some, though.	Sep 18, 2009 9:19 PM
6	maybe i am not that cutting edge or I am billing incorrectly	Sep 18, 2009 9:33 PM
7	I am not currently doing anything that might raise this objection, so I am probably not a good test case. I heard that many others are having this problem, so it is good that the ASSH is doing this.	Sep 18, 2009 9:34 PM
8	This is for NCS testing. Some insurers only recognize CTS as a diagnosis for the medical necessity and deny other diagnostic ICD-9 codes as "experimental" including cubital tunnel syndrome. I also have used Alloderm to cover Dupuytren's open palm wounds and have been denied authorization for surgery or payment as "experimental".	Sep 18, 2009 9:36 PM
9	na	Sep 18, 2009 9:39 PM
10	our denials actually come in the form of the insurers "bundling" multiple, sometimes different procedures to decrease payment	Sep 18, 2009 9:43 PM
11	Never accumulated any of these!!	Sep 18, 2009 9:52 PM
12	Keep appealing if you know you are correct. Involve your patients and encourage them to file appeals with their carrier and the Insurance Commissioner. Be prepared, gather supporting documentation, coding guidelines and studies that support the effectiveness of your procedure.	Sep 18, 2009 10:07 PM
13	Na	Sep 18, 2009 10:18 PM
14	NA	Sep 18, 2009 10:20 PM
15	I am pretty mainstream in my practice. To the best of my knowledge I have not experienced this problem. Of course my patient's review their EOB and devices such as "Neurotube" may have been denied at one time. I simply am unaware of the problem at this time.	Sep 18, 2009 10:29 PM
16	Nothing great- go through channels and anything that is not straightforward, don't simply get pre- certified, get the specific surgery approved.	Sep 18, 2009 10:52 PM

Response Text		
17	You can bill for the peripheral nerve blocks, and not the procedure	Sep 18, 2009 11:06 PM
18	write letters supporting unspecified procedures for which there is no cpt code	Sep 18, 2009 11:10 PM
19	Need to review state by state which CPTs are being denied	Sep 18, 2009 11:29 PM
20	State workmen's compensation in WA is a primitive dysfunctional bureaucracy, and logic, reason, science, etc. are a waste of time, like arguing with a deaf, autistic child.	Sep 18, 2009 11:44 PM
21	Have none	Sep 18, 2009 11:52 PM
22	It may have happened and I am unaware of it as I practice in a large group. It is my opinion, however, that payment should only be denied prospectively, during pre authorization, not after services have been provided. This does not happen in any other industry. Picture not paying an attorney, mechanic, or plumber for part of the services they provided. This could never happen, and physicians should not be treated as a separate class of people subject to such discrimination, especially in light of the fact that we are not allowed to work as a class (as a collective bargaining group).	Sep 18, 2009 11:56 PM
23	I occasionally have CTR's denied because of lack of recent NCV/EMG's, but I have not seen "experimental" surgery as a reason for denial. George Edwards	Sep 19, 2009 12:13 AM
24	Have not had denials for surgery, but have had reviewers for insurance companies deny diagnostic studies with a well-documented medical record (ie - no NCS for CTS)... reviewers were from TX.	Sep 19, 2009 12:28 AM
25	we need national reform of insurance co.s and federal oversight	Sep 19, 2009 1:13 AM
26	Let's get back to free market with regulations to prevent fraud and enforce contracts. We post our prices - compete with each other - give a bill to the patient and let the patient deal with their insurance. If this sounds ridiculous or foreign - it shows just how out of touch we are with what it takes to provide the best care for the least money. Scott Gordon, MD	Sep 19, 2009 1:33 AM
27	N/A	Sep 19, 2009 2:01 AM
28	insurers realize that MDs cannot get together on most issues and that our altruism leads to us continue to offer our services despite flagrant, repeat incidents of non-payment for multiple services rendered.	Sep 19, 2009 2:43 AM
29	new procedures, large or small, i.e. trigger finger release, percutaneous with no cpt code- use best available code until new one is created or use existing code with the unlisted procedure code.	Sep 19, 2009 2:46 AM
30	There is the possibility that I've had such denials but I think that it's unlikely as my insurance department has brought any such instances to my attention.	Sep 19, 2009 4:48 AM
31	Get authorization for surgery from the insurance carrier prior to performing the elective or urgent procedure.	Sep 19, 2009 7:20 AM
32	The insurance companies are demanding controlled trials to prove a treatment not "experimental;" we should demand that they help fund controlled trials.	Sep 19, 2009 10:07 AM
33	For those of us who are not familiar with the discussion, a little more background might have been nice--or actually any background at all. I find the CPT codes very frustrating, because the codes are not comprehensive, and there are standard procedures that do not really have an appropriate CPT code. From what I have seen, the next CPT version is just as bad. For instance, something that should be straight-forward to code, such as fractures. You can treat with immobilization, reduce a bone closed, reduce and pin, reduce and place intramedullary fixation, ex-fix, and open. Yet these options are not available for every fracture. Why don't they have a code for the procedure, and a code for the location?	Sep 19, 2009 11:16 AM
34	I avoid any procedures that would be possibly considered experimental in order to avoid the headache of appeals.	Sep 19, 2009 12:42 PM
35	Shouldn't payment denial be "illegal?"	Sep 19, 2009 12:44 PM

Response Text		
36	Put the burden on the patient to help get results with the ins. co.	Sep 19, 2009 4:53 PM
37	This may be a local/regional problem. My real issue is constant denials for many regular procedures including nerve, tendon, ligament and other repairs, usually for obscure/undecipherable reasons, use of the operating microscope for digital artery repair or when used multiple times for different nerves in different digits, etc.	Sep 19, 2009 5:46 PM
38	have none	Sep 19, 2009 5:59 PM
39	NA	Sep 19, 2009 7:36 PM
40	somehow medicare has decided that the radial nerve decompression when done at the same time as a CTR is included and is the same surgery. the fact that it is a different anatomic location and that I never do these unless there is a positive EMG is irrelevant according to them. the others have simply followed along.	Sep 20, 2009 11:53 AM
41	i have dictted multiple letters and even spoke to the MD's for a peer and it does not matter. even if trying to do something for a collegue to prevent surgery.	Sep 20, 2009 2:21 PM
42	keep a close eye on denials also happens with their audit programs also with WC and ER care...post ER care	Sep 20, 2009 3:13 PM
43	My problems has been insurance not covering an implant after the surgery is done, ie, our contract or the hospital contract says that implants are covered, but then the deny it after the surgery.	Sep 20, 2009 5:33 PM
44	I think the bigger problem is BC BS that always pays lower than its published fee schedule in spite of beeing a PPO member and their apparent non-disclosed tier system where some physicians are paid less than others for no apparent reason	Sep 20, 2009 9:19 PM
45	highway robbery.The ins. co. will do anything to avoid payment even using special codes sometimes does not work.	Sep 20, 2009 10:33 PM
46	Insurance companies can arbitrarily deny claims with no substantial backup and little recourse.	Sep 21, 2009 1:29 AM
47	My practice is not 100% hand so my volume is not high enough for hand procedures to experience denials.	Sep 21, 2009 2:52 AM
48	Always ask for a medical review. Ask for the literature basis for the denial as an educational tool. Know the CMS status of MCR national benefit determination and the eligibility of MCD recipients. (The uninsured can often get care denied arbitrarily by insurers - might be for cost reasons, not good care. Know the position of the largest payer and alternative payers in the market. Patients can move or change contracting. It has become common to sue for care, there are lawyers who do this. Contact the state insurance board and ask them to inquire if the denial is a departure from state insurance rules. Read the benefit determination pages of the payer online. Discover the outside review company (beltway) or the membership of the panel. Check their credentials- very few surgeons.	Sep 21, 2009 11:40 AM
49	I wouldn't have any pearls of wisdom because we have not had a single patient with this stipulation. Thank you!	Sep 21, 2009 11:54 AM
50	This was the first case that was done using this CPT code; and we did not get paid	Sep 21, 2009 1:33 PM
51	none	Sep 21, 2009 1:33 PM
52	it has not happened to me we preauthorize all procedures, but not sure if this would prevent the problem	Sep 21, 2009 4:02 PM
53	United only approves silastic implants for pips. Anything covered with a review board they consider "experimental" even though the FDA has approved as long as it is followed with a review board	Sep 21, 2009 4:41 PM
54	None	Sep 21, 2009 8:51 PM
55	Has not happened to me. However, if there is ever a question whether something will be covered, I collect from the patient, and assist in filing their claim.	Sep 21, 2009 11:55 PM

Response Text		
56	In general, i would avoid "experimental"surgery not approved by the IRb	Sep 22, 2009 1:25 AM
57	persistance	Sep 22, 2009 2:23 AM
58	unsuccessful-- Blue Cross has 60% market share	Sep 22, 2009 4:17 AM
59	preapproval of procedure	Sep 22, 2009 1:17 PM
60	Fluidotherapy/Dry Whirlpool is a huge issue our clinic has with reimbursement from insurance's, we have found dealing our insurance rep's works best, and even that doesn't not always work, the kicker is sometimes the code is reimbursed with no questions asked other times UHC is "stubborn" and will not pay, so they are very inconsistent with processing and paying on this charge	Sep 22, 2009 4:10 PM
61	We have rarely been denied payment for experimental	Sep 22, 2009 6:00 PM
62	appeal letter to state insurance commissioner and cc insurance company	Sep 22, 2009 6:54 PM
63	So far, no denials in this regard	Sep 22, 2009 8:27 PM
64	Other inappropriate denials, but not secondary to being "experimental". At the very least, the ASSH should be able to establish a list of the pathways for appeals for both Medicare denials and also state-by-state protocols so members can easily complain to entities that can take legitimate action on these	Sep 23, 2009 9:45 PM
65	I have not experienced this problem.	Sep 24, 2009 12:42 AM
66	Not sure what you want me to say. Have not had insurance company state our procedures were experimental.	Sep 24, 2009 3:42 PM
67	I don't have any.	Sep 25, 2009 2:39 PM
68	I don't know whether this is happening since our large group billing office doesn't always contact us about such denials	Sep 25, 2009 2:50 PM
69	?? keep fighting	Sep 25, 2009 2:53 PM
70	Make sure the patient knows that THEY BOUGHT THE POLICY. The angry patient makes more progress on the phone than we can.	Sep 25, 2009 2:54 PM
71	Don't have any	Sep 25, 2009 4:11 PM
72	I have referred several PIP joint arthroplasties using pyrocarbon implants to another surgeon that may or may not have been reimbursed.	Sep 25, 2009 4:33 PM
73	I wish I had some pearls of wisdom!	Sep 25, 2009 5:07 PM
74	Pain in the butt and will get worse with government insurance	Sep 25, 2009 5:35 PM
75	UHC stated "Manipulation under anesthesia is unproven". We have gone through several reviews with no positive results. So we are doing surgery for free. Is currently in review with the Medical Director	Sep 25, 2009 5:46 PM
76	I have recently had a non-hand surgeon, board-certified orthopedist, try to deny payment for a wrist arthrogram in a no-fault accident case	Sep 25, 2009 6:06 PM
77	have not had this denied yet	Sep 25, 2009 6:57 PM
78	None	Sep 25, 2009 7:37 PM
79	Insurance companies are evil and the root of the problem with health care in the USA. For profit insurance companies should be changed to mutual companies, so that their responsibility is to their policyholders rather than their shareholders.	Sep 25, 2009 8:47 PM
80	NOTIFIED REP WHO SAID HIS COMPANY WOULD DO THE APPEAL	Sep 25, 2009 9:09 PM
81	na	Sep 25, 2009 10:21 PM
82	Don't take no for an answer. Make sure your operative notes have enough to back up the procedure - especially including it is NOT like "CPT code 12345" - but it is totally different" - and "no such CPT code exists to describe what the surgeon" did - The last part is what really is the kicker - is "okay, find me a code that fits what he did" - they can't - bingo. \$\$\$\$\$	Sep 26, 2009 5:03 PM

Response Text		
83	it is a lost issue without change in the legal structure, one can spend an incredible amount of time and money to help the patient---and not get paid for one's efforts, while the deniers are handsomely paid for delaying, denying and avoiding paying of the bills. The insurance premiums paid are gaining interest while they are not being promptly paid out for legitimate claims.	Sep 26, 2009 5:22 PM
84	in the past a phone call to the md who made the decision seemed to resolve the problem as my concerns to them revolve about the fact that they have not evaluated the patient, usually are unaware of the real problem nor nature of the procedure and sometimes are even out of state	Sep 26, 2009 9:05 PM
85	na	Sep 27, 2009 12:49 PM
86	waiting to hear some pearls	Sep 27, 2009 8:03 PM
87	have md call and talked with insurer	Sep 27, 2009 10:17 PM
88	Summon the state medical association to address to the specific companies.	Sep 28, 2009 2:14 AM
89	N/A	Sep 28, 2009 1:46 PM
90	Appealing a claim, even if denied as experimental, seems always to be worth the effort.	Sep 28, 2009 2:06 PM
91	Is mosaicplasty for elbow OCD experimental? I may appeal this but the literature is scarce	Sep 28, 2009 10:36 PM
92	Have none!	Sep 29, 2009 12:06 AM
93	The only time we see this denial is in the case of an error in billing when the diagnosis is not appropriate for the service. We correct and rebill and receive payment.	Oct 1, 2009 9:06 PM
94	I am a military surgeon, so I do not deal with insurance approvals.	Oct 2, 2009 5:22 PM
95	N/A	Oct 2, 2009 5:23 PM
96	I have not seen denials based on "experimental" designation, but have seen examples of authorizing one procedure but not another when both are well established (eg cubital tunnel surgery) or open vs. arthroscopic ganglion excision from wrist	Oct 2, 2009 5:24 PM
97	If you can breakdown the "new" procedure into parts that are recognizable codes, that makes billing smooth.	Oct 2, 2009 5:36 PM
98	I don't have many pearls on this one. I do occasionally experience denials, but usually a call to the insurance company is pretty successful.	Oct 2, 2009 6:20 PM
99	precertification	Oct 2, 2009 6:53 PM
100	Find the right person in the insurance company to discuss the problem with. Have all the pertinent literature at the time of the first appeal contact.	Oct 2, 2009 8:09 PM
101	I work at the Cleveland Clinic that does all billing so I do not really know the answers to this survey	Oct 3, 2009 1:35 AM
102	no denial on "experimental" procedures	Oct 3, 2009 3:30 PM
103	I work in a managed care environment and the only difficulty with payment is with workers compensation denials if not preauthorized.	Oct 4, 2009 12:50 AM
104	none	Oct 4, 2009 2:22 PM
105	BC/BS Mass has classified 26040 as nonreimbursible.	Oct 4, 2009 2:37 PM
106	No denials that we know of.	Oct 5, 2009 4:06 PM
107	I sent literature etc but they were intransigent	Oct 5, 2009 5:12 PM
108	sorry none	Oct 5, 2009 5:47 PM
109	when confronting a denying m.d. (usually in another state) I have been able to "win" authorization eventually with education of that physician.	Oct 5, 2009 7:16 PM
110	Don't code experimental procedures.	Oct 6, 2009 1:59 AM