



## SUNSHINE MEDICAL CENTER

### Denial Summary by Reason

FOR DATES RECEIVED 03/01/2013 THROUGH 03/31/2013

<b>Denial Group</b>	<b>Count</b>	<b>Amount</b>	<b>Average</b>	<b>% of Count</b>	<b>% of Amount</b>
Reduction	5936	\$10,787,617	\$1,817	59.63%	53.75%
Documentation	1661	\$2,132,857	\$1,284	16.69%	10.63%
Duplicates	540	\$1,907,183	\$3,532	5.42%	9.50%
Non-covered Service	492	\$838,924	\$1,705	4.94%	4.18%
Coordination of Benefits	284	\$490,976	\$1,729	2.85%	2.45%
Medical Necessity	189	\$1,223,917	\$6,476	1.90%	6.10%
Bill - Data Quality	186	\$533,896	\$2,870	1.87%	2.66%
Eligibility	180	\$636,807	\$3,538	1.81%	3.17%
Authorization	160	\$632,846	\$3,955	1.61%	3.15%
Registration	108	\$275,504	\$2,551	1.08%	1.37%
Untimely Filing	74	\$122,253	\$1,652	0.74%	0.61%
Coding	46	\$75,519	\$1,642	0.46%	0.38%
Exhausted/Expired Benefits	41	\$185,776	\$4,531	0.41%	0.93%
Pending	28	\$66,950	\$2,391	0.28%	0.33%
Review	14	\$5,829	\$416	0.14%	0.03%
Experimental	10	\$39,315	\$3,931	0.10%	0.20%
Provider	4	\$95,326	\$23,831	0.04%	0.47%
Charge Data Master	1	\$17,550	\$17,550	0.01%	0.09%
<b>Grand Total:</b>	<b>9954</b>	<b>\$20,069,045</b>	<b>\$2,016</b>		



## SUNSHINE MEDICAL CENTER

### Denial Summary by Plan

FOR DATES RECEIVED 03/01/2013 THROUGH 03/31/2013

<b>PLAN</b>	<b>Count</b>	<b>Amount</b>	<b>Average</b>	<b>% of Count</b>	<b>% of Amount</b>
STATE MEDICAID	7840	\$13,241,198	\$1,689	78.76%	65.98%
NATIONAL GOVERNMENT SERVICES #	438	\$2,279,099	\$5,203	4.40%	11.36%
HOMETOWN HEALTH PLANS	339	\$589,201	\$1,738	3.41%	2.94%
NATIONAL GOVERNMENT SERVICES, INC.	325	\$305,015	\$939	3.27%	1.52%
UNITED HEALTHCARE INSURANCE COMPANY	273	\$507,369	\$1,858	2.74%	2.53%
AETNA	206	\$785,553	\$3,813	2.07%	3.91%
BLUE CROSS/BLUE SHIELD	179	\$789,280	\$4,409	1.80%	3.93%
COMMERCIAL INSURER	171	\$987,550	\$5,775	1.72%	4.92%
CIGNA	85	\$158,708	\$1,867	0.85%	0.79%
CARE, INC	52	\$250,405	\$4,815	0.52%	1.25%
OTHER BLUECROSS AND BLUESHIELD	23	\$68,951	\$2,998	0.23%	0.34%
THE HEALTH AND LIFE INSURANCE COMPANY	20	\$105,170	\$5,259	0.20%	0.52%
THE GENERAL LIFE INSURANCE CO.	2	\$1,050	\$525	0.02%	0.01%
MISC.	1	\$496	\$496	0.01%	0.00%
<b>Grand Total:</b>	<b>9954</b>	<b>\$20,069,045</b>	<b>\$2,016</b>		



## SUNSHINE MEDICAL CENTER

### Denial Summary by Reason by Plan

FOR DATES RECEIVED 03/01/2013 THROUGH 03/31/2013

<b>Authorization</b>	<b>Count</b>	<b>Amount</b>	<b>Average</b>	<b>% of Count</b>	<b>% of Amount</b>
STATE MEDICAID	101	\$396,239	\$3,923	63.13%	62.61%
UNITED HEALTHCARE INSURANCE COMPANY	20	\$30,583	\$1,529	12.50%	4.83%
BLUE CROSS/BLUE SHIELD	13	\$55,412	\$4,262	8.13%	8.76%
CARE, INC	9	\$70,473	\$7,830	5.63%	11.14%
AETNA	8	\$60,501	\$7,563	5.00%	9.56%
HOMETOWN HEALTH PLANS	5	\$4,536	\$907	3.13%	0.72%
CIGNA	4	\$15,102	\$3,776	2.50%	2.39%
<b>Totals:</b>	<b>160</b>	<b>\$632,846</b>	<b>\$3,955</b>		

<b>Bill - Data Quality</b>	<b>Count</b>	<b>Amount</b>	<b>Average</b>	<b>% of Count</b>	<b>% of Amount</b>
STATE MEDICAID	99	\$165,890	\$1,676	53.23%	31.07%
NATIONAL GOVERNMENT SERVICES, INC.	60	\$59,793	\$997	32.26%	11.20%
CARE, INC	11	\$13,387	\$1,217	5.91%	2.51%
BLUE CROSS/BLUE SHIELD	10	\$111,642	\$11,164	5.38%	20.91%
NATIONAL GOVERNMENT SERVICES #	4	\$162,211	\$40,553	2.15%	30.38%
UNITED HEALTHCARE INSURANCE COMPANY	1	\$20,435	\$20,435	0.54%	3.83%
ANTHEM BLUE CROSS AND BLUE SHIELD CT	1	\$537	\$537	0.54%	0.10%
<b>Totals:</b>	<b>186</b>	<b>\$533,896</b>	<b>\$2,870</b>		



## **SUNSHINE MEDICAL CENTER**

### Denial Summary by Plan by Reason

FOR DATES RECEIVED 03/01/2013 THROUGH 03/31/2013

<b>AETNA</b>	<b>Count</b>	<b>Amount</b>	<b>Average</b>	<b>% of Count</b>	<b>% of Amount</b>
Documentation	73	\$142,673	\$1,954	35.44%	18.16%
Duplicates	70	\$256,886	\$3,670	33.98%	32.70%
Eligibility	14	\$100,238	\$7,160	6.80%	12.76%
Non-covered Services	13	\$153,082	\$11,776	6.31%	19.49%
Experimental	9	\$39,237	\$4,360	4.37%	4.99%
Authorization	8	\$60,501	\$7,563	3.88%	7.70%
Untimely Filing	6	\$12,567	\$2,095	2.91%	1.60%
Coding	5	\$7,088	\$1,418	2.43%	0.90%
Coordination of Benefits	4	\$3,574	\$894	1.94%	0.45%
Exhausted/Expired Benefits	3	\$9,539	\$3,180	1.46%	1.21%
Registration	1	\$169	\$169	0.49%	0.02%
<b>Totals:</b>	<b>206</b>	<b>\$785,553</b>	<b>\$3,813</b>		

<b>THE HEALTH AND LIFE INSURANCE COMPANY</b>	<b>Count</b>	<b>Amount</b>	<b>Average</b>	<b>% of Count</b>	<b>% of Amount</b>
Duplicates	14	\$97,734	\$6,981	70.00%	92.93%
Documentation	2	\$5,156	\$2,578	10.00%	4.90%
Non-covered Services	2	\$773	\$387	10.00%	0.73%
Reduction	1	\$1,073	\$1,073	5.00%	1.02%
Eligibility	1	\$434	\$434	5.00%	0.41%
<b>Totals:</b>	<b>20</b>	<b>\$105,170</b>	<b>\$5,259</b>		



## SUNSHINE MEDICAL CENTER

### Denial Summary by Denial Code by Group Code with Source

FOR DATES RECEIVED 03/01/2013 THROUGH 03/31/2013

Denial Code	Denial Description	Count	Amount	Group	Source
4	The procedure code is inconsistent with the modifier used or a required modifier is missing.	6	\$3,030	HIM	CODES
8	The procedure code is inconsistent with the provider type/specialty (taxonomy).	1	\$206	BILLING	CODES
9	The diagnosis is inconsistent with the patient's age.	1	\$458	HIM	CODES
10	The diagnosis is inconsistent with the patient's gender.	3	\$7,434	HIM	CODES
13	The date of death precedes the date of service.	1	\$737	PACCESS	ELIG
15	Payment adjusted because the submitted authorization number is missing, invalid, or does not apply to the billed services or provider.	15	\$21,319	PACCESS	AUTH
16	Claim/service lacks information which is needed for adjudication. Additional information is supplied using remittance advice remarks codes whenever appropriate	1545	\$1,855,692	BILLING	DOCU
17	Payment adjusted because requested information was not provided or was insufficient/incomplete. Additional information is supplied using the remittance advice remarks codes whenever appropriate.	4	\$16,486	BILLING	DOCU
18	Duplicate claim/service.	535	\$1,900,678	BILLING	DUP
19	Claim denied because this is a work-related injury/illness and thus the liability of the Workers Compensation Carrier.	7	\$7,719	PACCESS	COB
20	Claim denied because this injury/illness is covered by the liability carrier.	1	\$3,221	PACCESS	COB
21	Claim denied because this injury/illness is the liability of the no-fault carrier.	14	\$7,507	PACCESS	COB



## SUNSHINE MEDICAL CENTER

### Denial Summary Trending by Reason - Count

FOR DATES RECEIVED 10/01/2012 THROUGH 03/31/2013

<b>Denial Group</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>March</b>	<b>Average</b>
Reduction	5300	5225	6105	4500	5412	5936	5,413
Documentation	1211	1244	1425	1277	1365	1661	1,364
Duplicates	1415	1067	568	484	814	540	815
Non-Covered Service	289	258	299	189	306	492	305
Coordination of Benefits	248	238	253	220	248	284	249
Bill - Data Quality	234	207	203	144	196	186	195
Eligibility	182	194	158	170	176	180	177
Authorization	127	186	226	146	170	160	169
Medical Necessity	90	154	138	89	133	189	132
Registration	106	103	102	71	100	108	98
Coding	185	120	29	34	80	46	83
Exhausted/Expired Benefits	41	83	68	55	57	41	58
Untimely Filing	43	34	39	40	47	74	46
Pending	46	32	35	23	34	28	33
Review	14	14	13	5	11	14	12
Experimental	11	10	13	7	9	10	10
Provider	8	6	4	3	5	4	5
Charge Data Master	0	0	0	0	0	1	0
<b>Totals:</b>	<b>9,550</b>	<b>9,175</b>	<b>9,678</b>	<b>7,457</b>	<b>9,162</b>	<b>9,954</b>	<b>9,163</b>



## **SUNSHINE MEDICAL CENTER**

### Denial Summary Trending by Reason - Amount

FOR DATES RECEIVED 10/01/2012 THROUGH 03/31/2013

<b>Denial Group</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>March</b>	<b>Average</b>
<b>Reduction</b>	\$9,366,923	\$7,267,938	\$10,405,503	\$7,977,871	\$9,567,382	\$10,787,617	\$9,228,872
<b>Duplicates</b>	\$3,803,282	\$3,639,615	\$2,103,167	\$1,570,000	\$1,685,764	\$1,907,183	\$2,451,502
<b>Documentation</b>	\$2,367,571	\$2,444,805	\$2,164,035	\$1,655,645	\$2,132,857	\$2,132,857	\$2,149,628
<b>Coding</b>	\$4,254,731	\$4,004,679	\$180,508	\$340,086	\$232,416	\$75,519	\$1,514,657
<b>Bill - Data Quality</b>	\$1,974,544	\$1,060,557	\$753,967	\$654,788	\$499,875	\$533,896	\$912,938
<b>Eligibility</b>	\$552,544	\$822,007	\$442,064	\$653,869	\$763,680	\$636,807	\$645,162
<b>Authorization</b>	\$650,407	\$646,573	\$606,649	\$533,655	\$861,625	\$632,846	\$655,293
<b>Non-Covered Service</b>	\$478,546	\$538,456	\$652,079	\$504,058	\$711,423	\$838,924	\$620,581
<b>Medical Necessity</b>	\$324,443	\$440,355	\$698,964	\$153,718	\$476,832	\$1,223,917	\$553,038
<b>Coordination of Benefits</b>	\$483,833	\$468,419	\$764,372	\$566,767	\$520,916	\$490,976	\$549,214
<b>Exhausted/Expired Benefits</b>	\$410,932	\$372,237	\$295,648	\$237,704	\$188,882	\$185,776	\$281,863
<b>Registration</b>	\$294,841	\$212,179	\$504,840	\$173,239	\$376,101	\$275,504	\$306,117
<b>Untimely Filing</b>	\$76,470	\$58,616	\$89,261	\$142,282	\$99,002	\$122,253	\$97,981
<b>Pending</b>	\$87,181	\$81,966	\$86,911	\$33,222	\$81,492	\$66,950	\$72,954
<b>Provider</b>	\$29,651	\$9,228	\$1,202	\$4,806	\$33,618	\$95,326	\$28,972
<b>Experimental</b>	\$39,397	\$3,893	\$8,660	\$5,586	\$39,315	\$39,315	\$22,694
<b>Review</b>	\$13,238	\$20,915	\$11,530	\$4,233	\$11,829	\$5,829	\$11,262
<b>Charge Data Master</b>	\$0	\$0	\$0	\$0	\$0	\$17,550	\$2,925
<b>Totals:</b>	<b>\$25,208,534</b>	<b>\$22,092,438</b>	<b>\$19,769,360</b>	<b>\$15,211,529</b>	<b>\$18,283,009</b>	<b>\$20,069,045</b>	<b>\$20,470,181</b>



## SUNSHINE MEDICAL CENTER

### Denial Summary Trending by Plan - Count

FOR DATES RECEIVED 10/01/2012 THROUGH 03/31/2013

Plan	Oct	Nov	Dec	Jan	Feb	March	Average
STATE MEDICAID	6863	6547	7762	5900	6979	7840	6982
NATIONAL GOVERNMENT SERVICES #	384	860	368	260	465	438	462
NATIONAL GOVERNMENT SERVICES, INC.	557	469	194	313	372	325	372
UNITED HEALTHCARE INSURANCE COMPANY	451	184	311	202	280	273	284
BLUE CROSS/BLUE SHIELD	530	189	175	187	256	179	252
CIGNA	144	281	271	88	173	85	174
AETNA	160	141	177	181	175	206	173
COMMERCIAL INSURER	293	16	214	170	173	171	173
HOMETOWN HEALTH PLANS	48	50	106	59	119	339	120
ANTHEM BCBS HEALTH PLANS OF NH	2	352	1	1	1	0	71
CARE, INC	84	78	83	58	70	52	71
OTHER BLUECROSS AND BLUESHIELD	30	8	16	10	18	23	17
THE HEALTH AND LIFE INSURANCE COMPANY	0	0	0	25	10	20	9
MATTHEW THORTON HEALTH PLAN, INC.	4	0	0	0	0	0	1
CIGNA GLOBAL INSURANCE COMPANY	0	0	0	2	1	1	1
THE GENERAL LIFE INSURANCE CO.	0	0	0	0	1	2	0
ANTHEM BCBS OF MAINE	0	0		1	0	0	0
<b>Totals:</b>	<b>9,550</b>	<b>9,175</b>	<b>9,678</b>	<b>7,457</b>	<b>9,162</b>	<b>9,954</b>	<b>9,163</b>





## SUNSHINE MEDICAL CENTER

### Denial Summary Trending by Plan - Amount

FOR DATES RECEIVED 10/01/2012 THROUGH 03/31/2013

Plan	April	May	June	July	August	August	Average
STATE MEDICAID	\$12,045,018	\$8,950,154	\$12,882,405	\$9,423,834	\$10,237,865	\$13,241,198	\$11,308,522
NATIONAL GOVERNMENT SERVICES #	\$5,599,147	\$6,935,052	\$1,865,765	\$1,353,483	\$2,655,781	\$2,279,099	\$3,606,509
BLUE CROSS/BLUE SHIELD	\$3,198,981	\$1,053,143	\$1,019,467	\$1,090,236	\$970,765	\$789,280	\$1,430,221
COMMERCIAL INSURER	\$1,127,869	\$71,010	\$1,356,148	\$878,947	\$980,342	\$987,550	\$884,305
AETNA	\$535,980	\$466,582	\$588,746	\$607,809	\$799,707	\$785,553	\$596,934
CIGNA	\$547,027	\$1,219,647	\$518,904	\$444,260	\$411,649	\$158,708	\$577,709
UNITED HEALTHCARE INSURANCE COMPANY	\$924,081	\$374,852	\$643,512	\$422,041	\$498,003	\$507,369	\$574,371
ANTHEM BCBS HEALTH PLANS OF NH	\$2,446	\$1,913,835	\$144	\$499	\$381,004	\$0	\$383,385
HOMETOWN HEALTH PLANS	\$258,244	\$381,544	\$394,917	\$282,977	\$587,470	\$589,201	\$381,377
NATIONAL GOVERNMENT SERVICES, INC.	\$409,011	\$407,713	\$215,578	\$234,783	\$391,177	\$305,015	\$314,420
CARE, INC	\$316,096	\$316,957	\$256,655	\$283,110	\$116,912	\$250,405	\$284,645
OTHER BLUECROSS AND BLUESHIELD	\$234,119	\$1,952	\$27,119	\$38,592	\$128,037	\$68,951	\$74,147
THE HEALTH AND LIFE INSURANCE COMPANY	\$0	\$0	\$0	\$149,780	\$124,256	\$105,170	\$50,990
MATTHEW THORTON HEALTH PLAN, INC.	\$10,513	\$0	\$0	\$0	\$0	\$0	\$2,103
CIGNA GLOBAL INSURANCE COMPANY	\$0	\$0	\$0	\$911	\$505	\$496	\$281
THE GENERAL LIFE INSURANCE CO.	\$0	\$0	\$0	\$0	\$0	\$1,050	\$210
ANTHEM BCBS OF MAINE	\$0	\$0	\$0	\$266	\$0	\$0	\$53
<b>Totals:</b>	<b>\$25,208,533</b>	<b>\$22,092,441</b>	<b>\$19,769,359</b>	<b>\$15,211,529</b>	<b>\$18,283,009</b>	<b>\$20,069,045</b>	<b>\$20,470,181</b>



## SUNSHINE MEDICAL CENTER

### Denial Recovery by Reason – October 2012 Denials

FOR DATES RECEIVED 10/01/2012 THROUGH 03/31/2012

<b>Denial Group</b>	<b>Count</b>	<b>Amount</b>	<b>Contractual</b>	<b>Recovery</b>	<b>% Recovered</b>
Documentation	1211	\$2,367,571	\$828,650	\$325,565	39.29%
Duplicates	1415	\$3,803,282	\$1,331,149	\$251,104	18.86%
Bill - Data Quality	234	\$1,974,544	\$691,091	\$104,345	15.10%
Authorization	127	\$650,407	\$227,643	\$102,085	44.84%
Exhausted/Expired Benefits	41	\$410,932	\$143,826	\$21,661	15.06%
Reduction	5300	\$9,366,923	\$3,278,423	\$20,666	0.63%
Pending	46	\$87,181	\$30,513	\$18,789	61.58%
Eligibility	182	\$552,544	\$193,390	\$18,708	9.67%
Coordination of Benefits	248	\$483,833	\$169,341	\$17,076	10.08%
Provider	8	\$29,651	\$10,378	\$14,376	138.53%
Registration	106	\$294,841	\$103,194	\$12,329	11.95%
Non-covered Service	289	\$478,546	\$167,491	\$10,536	6.29%
Coding	185	\$4,254,731	\$1,489,156	\$9,094	0.61%
Untimely Filing	43	\$76,470	\$26,764	\$8,727	32.61%
Experimental	11	\$39,397	\$13,789	\$5,378	39.00%
Medical Necessity	90	\$324,443	\$113,555	\$2,252	1.98%
Review	14	\$13,238	\$4,633	\$20	0.44%
	<b>9550</b>	<b>\$25,208,533</b>	<b>\$8,822,987</b>	<b>\$942,711</b>	<b>10.68%</b>



## SUNSHINE MEDICAL CENTER

### Denial Recovery by Plan – October 2012 Denials

FOR DATES RECEIVED 10/01/2012 THROUGH 03/31/2012

<b>Plan</b>	<b>Count</b>	<b>Amount</b>	<b>Contractual</b>	<b>Recovery</b>	<b>% Recovered</b>
BLUE CROSS/BLUE SHIELD	530	\$3,198,981	\$1,119,643	\$285,044	25.46%
STATE MEDICAID	6863	\$12,045,018	\$4,215,756	\$177,259	4.20%
ANTHEM BLUE CROSS AND BLUE SHIELD CT	293	\$1,127,869	\$394,754	\$113,103	28.65%
UNITED HEALTHCARE INSURANCE COMPANY	451	\$924,081	\$323,428	\$96,760	29.92%
NATIONAL GOVERNMENT SERVICES #	384	\$5,599,147	\$1,959,702	\$64,613	3.30%
OTHER BLUECROSS AND BLUESHIELD	30	\$234,119	\$81,942	\$59,551	72.67%
CIGNA	144	\$547,027	\$191,460	\$39,060	20.40%
AETNA	160	\$535,980	\$187,593	\$31,768	16.93%
NATIONAL GOVERNMENT SERVICES, INC.	557	\$409,011	\$143,154	\$31,177	21.78%
CARE, INC	84	\$316,096	\$110,634	\$30,251	27.34%
HOMETOWN HEALTH PLANS	48	\$258,244	\$90,385	\$9,778	10.82%
MATTHEW THORTON HEALTH PLAN, INC.	4	\$10,513	\$3,680	\$4,348	118.17%
ANTHEM BCBS HEALTH PLANS OF NH	2	\$2,446	\$856	\$0	0.00%
	<b>9550</b>	<b>\$25,208,533</b>	<b>\$8,822,987</b>	<b>\$942,711</b>	<b>10.68%</b>

## SUNSHINE MEDICAL CENTER

Gross Annual Revenue		\$1,078,864,450	AHD 2012
Net Annual Revenue		\$375,684,300	
Current Contractual Adjustment	<b>65%</b>		
Total Gross Monthly Denied Amount (6 Month Aver.)		\$20,470,181	Audit Results
Gross Denial Rate	<b>23%</b>		
Adjustment: Duplicates/Unlikely Recoverable (per review)		\$11,765,819	
Remaining Balance		\$8,704,362	
Total Days Audited	<b>21</b>		
Gross Daily Denied		\$414,493.43	
Estimated Gross Annual Denials: 252 Days		\$104,452,344	
<b>Estimated Net Annual Denials</b>		<b>\$36,372,601</b>	
Net Denial Rate	<b>10%</b>		
Current Recovery Rate (based on review)	<b>30%</b>	\$10,911,780	
Additional Denial Recovery Opportunity		\$25,460,820	
HBS Proven Recovery Rate (based on review)	<b>50%</b>	\$18,186,300	
<b>Projected Cash Improvement</b>		<b>\$7,274,520</b>	