

Statutes to Follow Up On:

Request Sent

- The last action taken was the request being sent to the facility. We need to call and verify that they received it.
- This status covers the first request sent, as well as second, third, fourth, etc.
- Read the notes to see how many times, and on what dates, the request was sent.
- If possible, get a turnaround time, as well as any other helpful information.

Follow Up – Provider Processing

Follow Up – Request Received

- We have verified the request was received already. Now we must determine the turnaround time for receipt of the records.
- There will be more notes to review in the task – make sure you are familiar with how to read our notes and understand what has happened in the collection so far. A facility legally has 30 days to respond to our request, so be able to figure out how long they have been processing it.
- Be familiar with how to check the internal documents at the bottom of the worksheet. Has the facility sent us an invoice or a confirmation of receipt?

Follow Up – Provider Resending


- The provider sent the records (or an invoice, a Statement of No Records, etc.) but we did not receive it. We asked them to resend it. You will be calling to make sure that they did resend, when, and the method (fax, email, etc.)

Payment – Paid Invoice

- We have verified the request was received already. You are making sure our request is still being processed and asking when we can expect to receive the records.
 - Main difference is that we have already received an invoice and paid it. Make sure you can see in the notes when and how we paid the invoice. Confirm with the facility that they received our payment
 - Example: “We mailed a check for \$29.09 to your facility on 6/15/20. Did you receive that payment?”
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Reminders for Existing Procedures and Tips for the Newer Agents:

- Rush Requests – please pay attention if the task is marked as a rush or not:

Follow-Ups:	Call provider & check status: update follow-up date; request again if necessary	<input checked="" type="checkbox"/> RUSH?
Internal Status:	Records Received - Needs Returned	UPDATE
Follow-Up Date:	01/14/2020	
Assignee:	Unassigned	
Worksheet Notes		

If it is a rush, it needs to be handled a little differently. We call on these every few days, and we ask the facility if they are able to expedite the request. We can offer to send a pre-paid shipping label for the records.

- If the records (or an invoice, or rejection, or statement of no records) have been sent to us, please verify
 - Date and time sent
 - Method it was sent (email, fax, mail – get tracking number if they used a traceable method like UPS or FedEx)
 - If it was sent to a copy service (CIOX, MRO, ShareCare, etc.) please verify which website we need to check, and their reference number (or invoice number).
- If the facility states they have no records for the patient, that is fine, but please make sure they are sending that **in writing** (A Statement of No Records – a blank form was included with the request for their convenience, but we are happy to send them another copy if needed).
- If the facility states they are rejecting our request for any reason, that is also fine, but again please make sure they are sending that **in writing** so we can adjust our request for them.
- If the facility tells you they have sent us something, OR posted something on their portal for us:
 - Records
 - An invoice
 - A rejection
 - A Statement of No Records

You do not need to assign these to anyone. Make a good note with all the information, set the status to **Sent by Provider**, and unassign.

- When making call notes, document the options you used to get to your destination, if it was successful. That way, the next caller has an easier job getting to the right place. Also, once you get to the person you need, try getting a direct line so all those options won't be needed next time.
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- If the provider needs further patient info from us, there are a couple places you can check for that information:
 - The blue case notes (top left corner of the worksheet)
 - The key documents – the Answers to Interrogatories (IROGS) will often have addresses and full social security numbers on the first couple pages. The Medicare authorization often has the full social as well. The authorizations will often have a full social and/or the patient's address.

NEW COLLECTION REQUEST: Update trial date; Generate cover letter; Print auths request; Set follow-up date

Key Docs:

Visible?	File Name	Upload Date
<input checked="" type="checkbox"/>	Authorizations - Medicare	11/24/2020
<input checked="" type="checkbox"/>	Plaintiffs Responses to Request for Production	08/21/2020
<input checked="" type="checkbox"/>	Plaintiffs Responses to Request for Production	08/21/2020
<input checked="" type="checkbox"/>	Plaintiffs Answers to Interrogatories	04/30/2020
<input checked="" type="checkbox"/>	Authorizations - Defense	04/13/2020
<input checked="" type="checkbox"/>	Authorizations - Bohlman	04/13/2020
<input checked="" type="checkbox"/>	Authorizations - Medicare	04/13/2020
<input checked="" type="checkbox"/>	Anthony Complaint.pdf	03/18/2020

Worksheet #154768

It is perfectly acceptable to ask the representative from the facility to wait just a moment while you look up the information.

- You can also check previously completed collections, and look at sets of records we have already collected. The records will often contain patient information. Search by case number or patient name, and you can see all collections for that case:

Record Collections

(Displaying 1-21 of 21) Display 25 ▾

[Assign Multiple](#)

Case	Trial Date	Provider	Created	Internal Status	Follow-Up Date	Requesting Firm	Assignment
ANTHONY, MICHAEL 20-L-351		Medical Reading Hospital - Supplemental Request Reading, PA	09/01/20	New Request - Pending Information	10/14/20	Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY, MICHAEL 20-L-351		Medical University of Michigan Health System Ann Arbor, MI	09/14/20	Follow-Up - Escalated for Review	01/26/21	Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Josh Ema Assign
ANTHONY, MICHAEL 20-L-351		Social Security Social Security Earnings Baltimore, MD	06/05/20	Request Sent	01/27/21	Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY, MICHAEL 20-L-351		Billing Reading Hospital Reading, PA	09/01/20	Collection Completed		Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY, MICHAEL 20-L-351		Radiology List/Report McGlinn Family Regional Cancer Center West Reading, P	09/01/20	Collection Completed		Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY, MICHAEL 20-L-351		Pathology List/Report McGlinn Family Regional Cancer Center West Reading, P	09/01/20	Collection Completed		Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY, MICHAEL 20-L-351		Radiology List/Report Reading Hospital - Supplemental Request Reading, PA	09/01/20	Collection Completed		Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY, MICHAEL 20-L-351		Medical Reading Hospital Reading, PA	06/05/20	Collection Completed		Lewis Brisbois Bisgaard & Smith, LLP - Edwardsville	Unassigned Assign
ANTHONY		Billing					Unassigned

Look at one of the tasks set to Collection Completed, in the Defense Collected Files section:

SET ITEM/RECORD COLLECTION COSTS AND PRICE: <small>Set record/item collection fees; Charge the requesting firm, if necessary</small>						
Date 07/15/2020	User Tiffany Barrows	Provider Fee \$790.05	Pohlman Fee + \$55.00	# of Firms / 3	Per Firm Price = \$308.02	Req Firm Price \$944.06
Add Price						
DEFENSE COLLECTED FILES: <small>Set record price; Set client side visibility</small>						
Description	Date Received	Pages	Set Download Fee	Associate to Prov. F		
20-L-351 - ANTHONY, MICHAEL - Reading Hospital - Medical - Record - Part 1.pdf Change	07/29/2020	592	\$207.20	Available		
20-L-351 - ANTHONY, MICHAEL - Reading Hospital - Medical - Record - Part 2.pdf Change	07/29/2020	551	\$192.85	Available		
DEFENSE INVENTORY:						

These are records we have already collected. Click the link to open the records and see if the patient's social or address (or medical record number, or whatever information you need) is located there.

Escalating Tasks – Reminders

What needs to be escalated?

- Requests that need to be resent by mail
- The phone number is not working, or we need new contact information for the facility, etc.
- The facility is located outside the country. (exception: we may, on occasion, have you converse with a Spanish-speaking facility)
- We need more information about the patient before the facility will speak to us (address, full Social, etc.), and you cannot find that information by one of the methods listed above.
- We need to follow up with ShareCare or Chartswap via chat
- Requests that need to be resent by email or fax
 - Your supervisor handles faxes in RingCentral and emails in ShareFile
- We need to alert our client about any delay in records processing
- If you are not sure if it needs to be escalated, ask your supervisor. She will consult with Pohlman if she does not have the answer.

How to properly escalate the task:

- Make a good task note about the call and what needs to happen next/why you are escalating it.
- Set the internal status to **Escalated for Review**
- Leave the follow up date as **today's** date
- Assign the collection task to one of your escalation assignees as detailed below:
 - **Asbestos:** Josh Ema
 - **PC (non-Simmons):** Michele Epplin
 - **Simmons PC:** Kristi Admire (A-M)/Tiffany Street (N-Z)
 - **Chartswap:** Sarah Durrett

- If the request needs to be resent by FAX or EMAIL, please escalate to your supervisor (Follow Up Agent 1)

Dispositions

Direct:

- **Successful call** – you spoke with a person and received information. Either confirmed the request was received, or that it needed to be resent.
- **Re-Route** – you spoke with either a person or a machine, and received a second number to call (they were not able to transfer you – you had to hang up and dial yourself).
- **Agent Disconnects** – You are sure you were calling the correct place/department, but you were on hold for the allotted amount of time, and decided to hang up because it was taking too long. Agent decides to hang up.
- **Facility Disconnects** – The facility hangs up on you or drops the call, before it is successfully completed.
- **Transfer No Answer** – You speak to a person who transfers you to the correct place, but the phone rings with no answer, no hold music, and no voicemail. You wait for a couple minutes and decide to hang up.
- **Left Message** – You speak with someone, but it is not someone who can help you. You leave a message with that person (not on a machine) who says they will have someone call us back.
- **Records Received** – by the time you access the call, we have received the records (or an invoice, or other correspondence) and Pohlman has already started handling the next steps. Call no longer needs to be made.
- **Case Worked** – by the time you access the call, it has already been called on by a different rep. Call no longer needs to be made.

Indirect:

- **Closed** – the facility is closed for the day, for an emergency, permanently, etc.
 - **No Answer** – The phone rings and is not answered, no hold music, no voicemail, etc. This can also include phone numbers that are disconnected or busy signals.
 - **Voicemail** – you do not speak to a person at all, but you leave a voicemail for someone.
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