



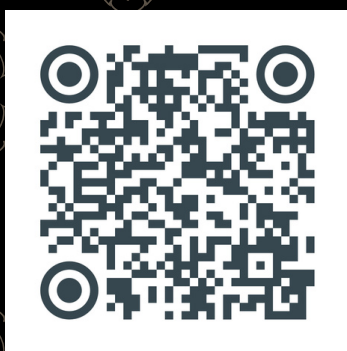
PainMed PA

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The world's first pain management focused AI model

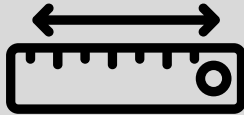
The Pain-Practice Billing Diagnostic Booklet

Schedule a Free Review

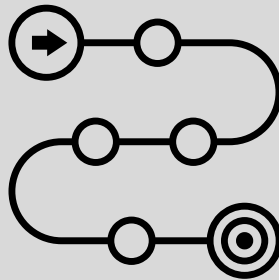


<https://painmedpa.com/>

Benchmark Your Pain Management Practice & Discover Where Revenue is Left Behind



**Billing
Metrics**



**Aligned
Procedures**



**Denial & AR
Follow Up**

The Problem

Most pain practices lose 5%–15% of annual revenue due to denials, underbilling, or preventable workflow gaps.

This diagnostic helps answer:

- How do your billing metrics compare to peer benchmarks?
- Are you capturing all procedures correctly?
- Do your denial and AR follow-up processes meet best practice standards?

Rate each item on a scale of 1–5

(1 = Needs Major Improvement | 5 = Strong Performance)

Diagnostic

1. Eligibility & Authorizations

We verify insurance eligibility at scheduling and again before the date of service

☐

We have a documented workflow for obtaining and tracking prior authorizations

☐

Our auth denial rate is below 2%.

☐

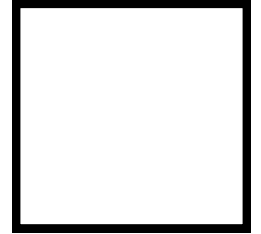
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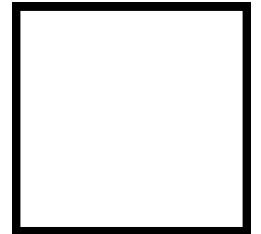
Diagnostic

2. Coding & Charge Capture

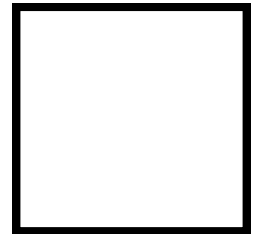
Our coders are trained in interventional pain coding, including laterality and modifiers.



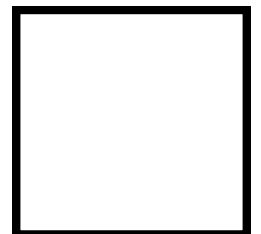
We use templates to ensure documentation supports multi-level or bilateral procedures.



We audit procedure coding quarterly to check for underbilling.



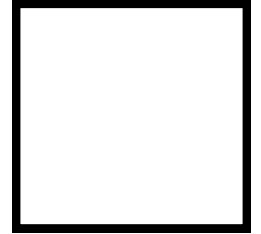
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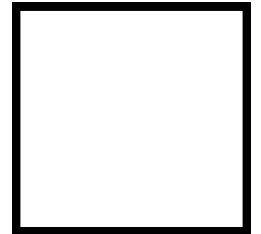
Diagnostic

3. Denials & A/R Follow-Up

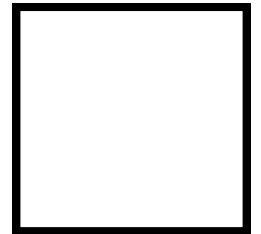
We track denials by type (auth, coding, documentation, etc.) and address root causes.



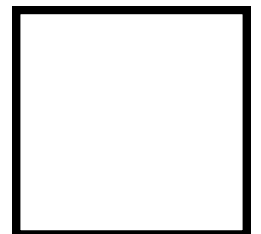
Our days in A/R is consistently under 40 days.



Denials are worked within 3–5 days of receipt.



PAGE SCORE



Diagnostic

4. Patient Collections

We provide upfront cost estimates and financial counseling.

☐

At least 80% of patient balances are collected before procedures.

☐

We offer multiple payment options, including online and payment plans.

☐

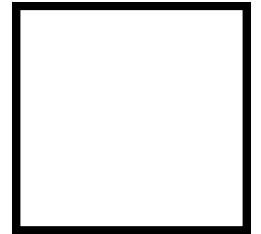
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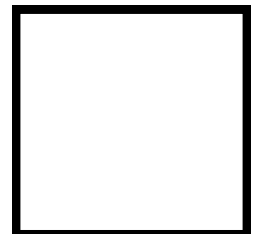
Diagnostic

5. Billing Analytics & Metrics

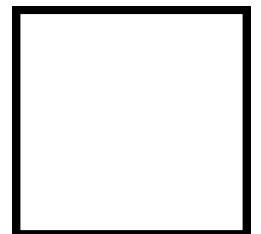
We track KPIs monthly (denial rate, clean claim rate, net collections, etc.).



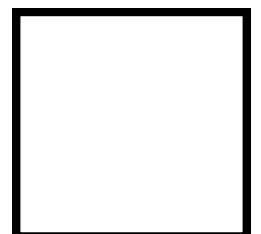
Reports are reviewed with billing and clinical leaders.



We benchmark performance annually against peer practices or national data.



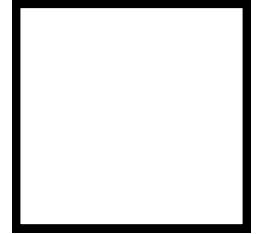
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Diagnostic

Assessment

TOTAL OF ALL PAGE SCORES ON A MAX OF 75



60 – 75

You're performing at or above benchmark. Keep optimizing.

45 – 59

Moderate revenue risk. There are high chances of gaps in your billing processes that can be tightened to prevent collection leakage.

< 45

High risk. You're likely leaving significant revenue uncollected.

Common Revenue Leakage Points in Pain Practices

- Missed Modifiers Common errors with -50, -59, -LT/RT impact reimbursement for multi-site procedures.
- Auth Failures High denial rates tied to SCS trials, RFA, or SI joint injections without proper documentation.
- Inaccurate Coding Missed codes for fluoroscopy, bilateral injections, or multi-level procedures reduce revenue.
- Patient Payment Gaps Inadequate collection at the time of service causes write-offs or bad debt.
- No Analytics Practices that don't track denials or A/R trends miss out on fast wins.

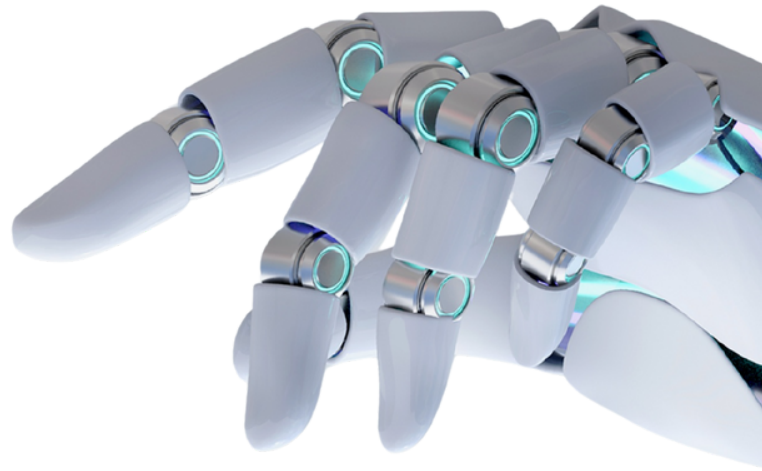


What's Next?

Use this diagnostic to guide billing meetings, contract reviews, or tech upgrades.

If you scored below 60, or if you're not sure how your performance compares to peers—let's talk.

POWERED BY MAINER.AI



PainMedPA + Mainer.ai Can Help

We combine specialty billing expertise with AI-powered tools to help outpatient pain practices:

- Reduce denials
- Improve documentation & coding compliance
- Automate revenue cycle intelligence
- Maximize revenue from every procedure

Schedule a Free Billing Review



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