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Research Billing



Buzz

A Newsletter of the Office of Clinical Research Billing Compliance

Volume 3

June 2019

Financial Clearance-The Who, What and When



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What is Clinical Research Financial Clearance?

It is the process of verifying if a research participant is covered by his/her insurance if they participate in a clinical trial. Clinical Research Financial Clearance (CRFC) staff verify insurance coverage of potential participants for outpatient studies and coordinate alongside JHM Access Services to obtain inpatient services clearance.

Who is required to have financial clearance?

Every participant with a Prospective Reimbursement Analysis (PRA) is required to have clearance prior to enrollment. This also includes “notification only studies”.

What are the different types of research financial clearance?

The Office of Clinical Research Support Services (CRSS) based on the research protocol determines the type of financial clearance. There are three types of RFC: notification only, standard, and

retrospective

Type of Financial Clearance	Applies to:
Notification Only	Studies that are not billing any services to the participant's insurance. It serves for the study to notify the billing office about participation. The patient may be consented to start the study and the CRMS response is automatic.
Standard	Studies that have services that will be billed to the participant's insurance. The study must wait for a reply in order to consent the participant.
Retrospective	Studies that have an emergent component based on patient population. Research staff is asked to trigger the clearance within 24 hours of consent.

What is the process?

Once the participant is entered into the Clinical Research Management System (CRMS), the research staff initiates the request. This action will trigger an automatic email to Revenue Cycle Management (RCM) that will then triage the incoming request and work with the insurances to obtain financial clearance. Participants must have research financial clearance approval prior to enrollment on study. This green icon next to their record in CRMS indicates approval. Clicking the icon will reveal more information.

What can you do to help?

- Make sure you know what type of insurance clearance your study has
- Make sure that the green dollar icon is in CRMS before consenting your participant
- Read the approval or denial so you understand what is covered, what is not and why
- Do NOT enroll participants prior to financial clearance approval

Spotlight on: Dawn Coleman



Dawn is the Manager of Outpatient Financial Clearance for JHM Revenue Cycle

1. How long have you been in this role?

I have worked in the Financial Clearance department for 18 years with 14 of those years performing financial clearance for patients enrolled on clinical trials.

2. Why is research financial clearance important?

Research financial clearance is important because it helps eliminate some of the unknown financial burden a patient may face. Appropriate clearance allows the patient to get an idea of what their financial responsibility will be if they decide to participate on the clinical trial. Financial clearance also ensures the institution and physicians are paid for services that are not supplied or paid for by the sponsor.

3. What Can Research Teams Do to Facilitate the Process?

Research teams can assist in facilitating the process by reviewing the PRA to make sure all related services and treatments are listed. This is important since we use the PRA to determine what we need to verify with insurance plans. Prior to submitting the insurance clearance request via CRMS ensure that up to date clinical notes are available in Epic. Make sure to review CRMS for updates on the status of the insurance clearance. The updates documented by the Clinical Trial Coordinators (CTC) will provide the status obtained from the insurance plan, this may include request for additional information needed for the insurance plan to make a decision. Lastly, please make sure to read thoroughly the information documented in CRMS once a decision is received from the insurance plan. Feel free to email ASFCClinicalTrials@jhmi.edu if you have any questions or need clarification on the documentation in CRMS.

4. If your participant's insurance doesn't cover clinical trials what are the options?

There are options if the patient's insurance does not provide coverage. The patient can contact their human resources' department to see if they will grant an exception to the exclusion. There have been occasions where the patient was successful at having the exclusion removed for all employees by educating their employer on the importance of clinical trials. The other option is to be self-pay for services performed that are not covered by the study sponsor. If the patient elects to be self-pay, they will need to speak with a financial counselor for the clinical trial's overseeing department and make a deposit for the services before being performed. Once the financial counselor notifies the Clinical Trial Coordinator the deposit was received, CRMS will be updated to reflect the deposit was received and the status will be changed to "approved".



Need Help?

If you need help, have questions or want to suggest topics for future newsletters you can email us at:

CLINIRESBILLING@exchange.johnshopkins.edu

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