



No Claim Left Behind:

Building a Seamless Biologics Workflow & Team

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**Director of Practice Operations, MedicoCX | Patient Advocate | Biologic
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My Journey

Who I Am and My “Why”

Over the past 8 years, I've built my career in healthcare, starting in billing and coding, where I earned my NRCCS certification. I later became a Biologics Supervisor, which sparked my passion for managing biologic medications. Today, as the Director of Practice Operations at MedicoCX, I focus on improving patient access to biologics and supporting practices in optimizing their biologics programs.

My “Why”:

I'm a wife and mother of four. My passion for healthcare advocacy grew from personal experience, our daughter was born with Hypoplastic Left Heart Syndrome (HLHS), a complex heart condition. Navigating her care opened my eyes to the challenges patients and families face. That journey gave me a voice, not just for my daughter, but for every patient needing support in this complex healthcare system.

Salina Morales, NRCCS



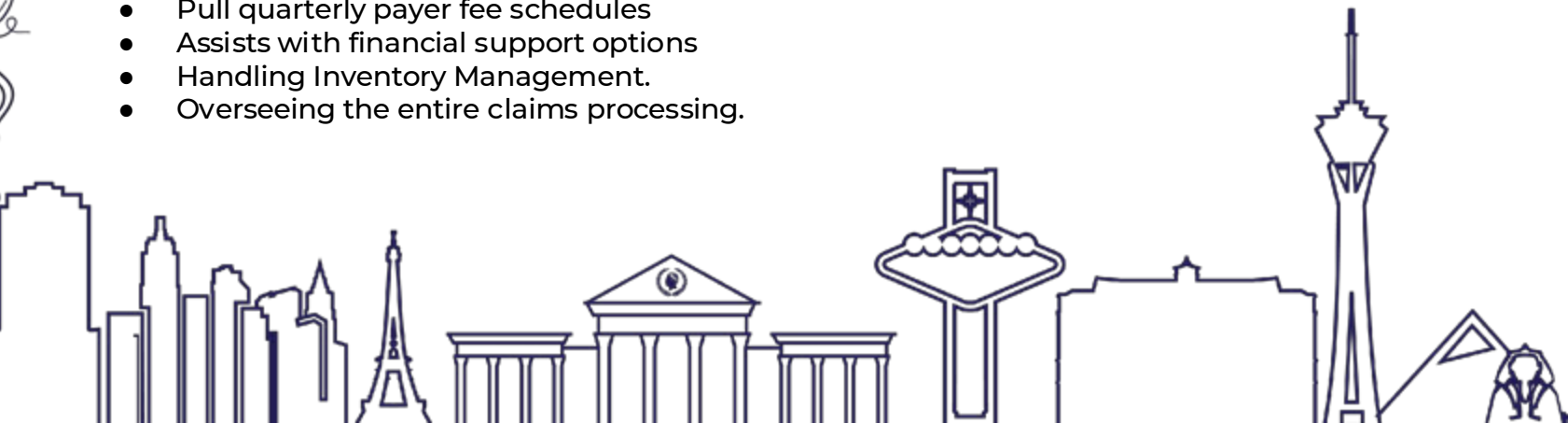
What is a Biologic Coordinator?

Why We Matter?

A Biologic Coordinator is a critical but often a misunderstood role within the clinic. We serve as the central hub between the provider, the patient, the pharmacy, the payer, the billing team, and every step in between.

A Biologic Coordinator:

- Verify benefits (both medical and pharmacy)
- Submits and tracks prior authorizations
- Audit the patients charts and ensures proper documentation for billing
- Navigates complex payer criteria and trends
- Pull quarterly payer fee schedules
- Assists with financial support options
- Handling Inventory Management.
- Overseeing the entire claims processing.

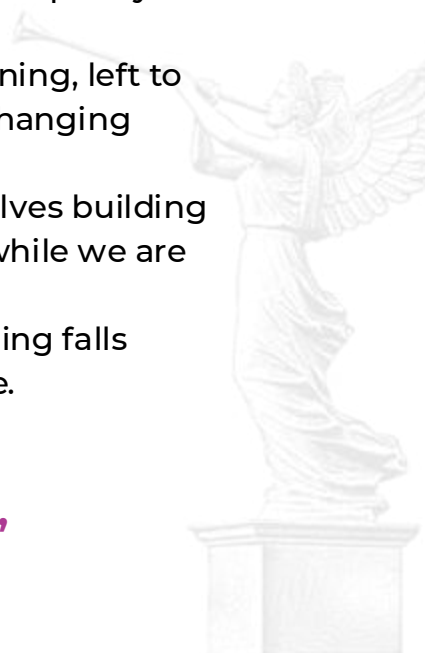


Why Biologic Coordinator's Can't Be Optional

Here's the Harsh Reality:

1. The role of a Biologic Coordinator is consistently undervalued, often seen as purely administrative or a “behind-the-scenes” supportive position.
2. In truth, most Coordinators step into this position without any formal training, left to learn as they go while still trying to navigate a highly complex and ever changing system.
3. There is rarely a standardized process in place and typically we find ourselves building our workflows from the ground up. Keep in mind that this is happening while we are still adapting to each payer, patient, and provider.
4. Yet despite all of that, we're still the ones held accountable when something falls through the cracks, whether it's a denial, a delayed start, or a billing issue.

**“We're not just filling out paperwork.
We're piecing together the entire puzzle of access.”**



The Impact of an Unsupportive Role

1. Increase in Denials

Payer criteria is missed, the wrong PA route is selected, or the documentation isn't aligned resulting in unnecessary rejections.

2. Treatment Delays

Each delay chips away at patient trust, it overall impacts outcomes, and can even lead to lost coverage windows for these patients.

3. Manual Processes & Unclear Ownership

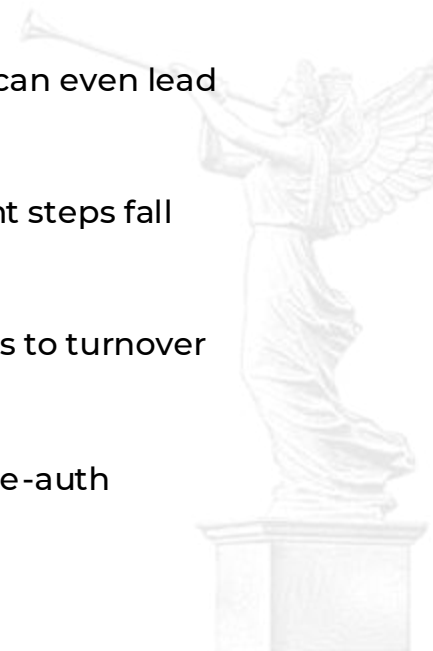
Without standardized workflows or designated responsibilities, important steps fall through the cracks.

4. Staff Burnout and Turnover

Expecting one person to manage this highly complex process alone leads to turnover and workflow breakdown.

5. Financial Loss for the Practice

Revenue slips through the cracks due to incorrect billing codes, missed re-auth deadlines and preventable denials.



Foundational Roles

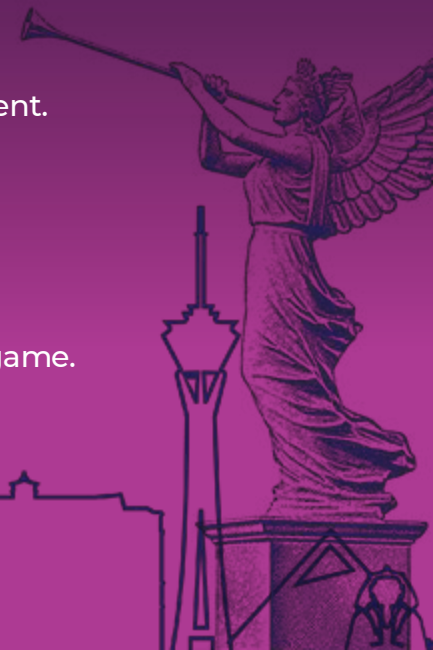
Setting the Stage for Biologics Success:

- **Front Desk / Intake Staff**

- Collecting both Medical & Pharmacy insurance cards
- Ensuring the patient is scheduled for their next F/U appointment during checkout.
- Confirming accurate patient demographics, insurance and referrals.
- Completing eligibility checks 24-48 hours prior to the patient's appointment.

- **Providers**

- Using clear detailed documentation to meet payer requirements.
- Understanding the risk factors of B&B off-label dosing.
- Staying engaged. Having monthly meetings to discuss current revenue, compliance and payer trends as they arise. You want to stay ahead of the game.



Foundational Roles

Setting the Stage for Biologics Success Continued:

- **Nursing / Clinical Staff**

- Staying informed on Specialty Pharmacy deliveries for in office therapies. Knowing when and what is being delivered ensures proper scheduling and overall patient care
- Ensuring accurate documentation of administration for billing and compliance.
- Coordinate the next injection based on the prescribed frequency

- **Billing / Revenue Cycle Team**

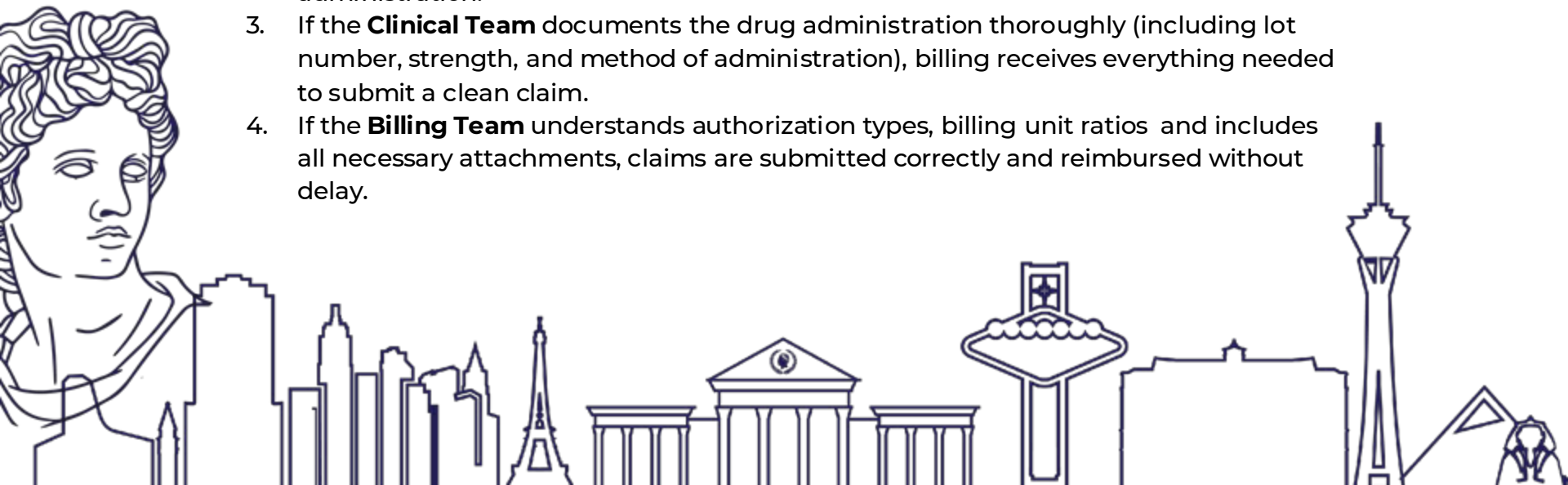
- Understand the key differences between a Medical vs. Pharmacy Prior Authorization
- Understanding J-Codes, NDC's and Billing Unit Ratio breakdown.
- Learning how the Copay Programs work and what they cover.



Bridging The Gap

Each Step Matters Throughout The Process!

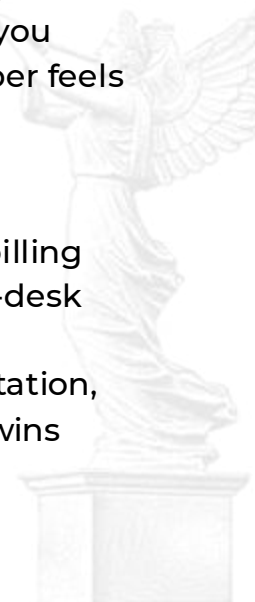
1. If the **Front Desk** collects accurate and complete insurance information, the benefit investigation can begin promptly and proceed smoothly.
2. If the **Biologic Coordinator** submits the prior authorization, efficiently orders and tracks the medication shipment then medication will arrive on time for the patient's administration.
3. If the **Clinical Team** documents the drug administration thoroughly (including lot number, strength, and method of administration), billing receives everything needed to submit a clean claim.
4. If the **Billing Team** understands authorization types, billing unit ratios and includes all necessary attachments, claims are submitted correctly and reimbursed without delay.



Mutual Respect Makes A Stronger Team

When We Honor Each Other's Roles, We Multiply Our Impact.

- **Recognize Shared Challenges:**
All positions within the clinic staff work under pressure, tight timelines, documentation demands, and high stake outcomes. Acknowledging each other's stress points fosters empathy and teamwork.
- **Build Trust Through Communication:**
Keep an open dialogue and have consistent feedback loops to help ensure nothing falls through the cracks. Most importantly you want to ensure that every team member feels valued, as they should!
- **Foster Curiosity and Understanding:**
Encourage team members to ask questions and actively learn about the roles, challenges, and contributions of their counterparts. Promote cross-functional learning to break down silos, enhance empathy, and drive stronger collaboration.
- **Celebrate Shared Successes:**
A clean, paid, timely claim isn't just a billing win! It's the result of an accurate front-desk intake, proper PA submission, timely medication delivery, clinical documentation, and billing accuracy. Celebrate those wins across all departments!



Solutions & Key Tools

Strategies for a Successful Biologics Program

- EMR Templates for Biologic New Starts
- Scheduling: Specific Biologic Appointment Types
- Chart Notes, Sticky Notes or Global Alerts.
- Patient Tracking List
- Inventory & Ordering Management Tracking Sheet
- Biologics Claims Tracking Sheet
- Biologics Email: Administrator Account
- Fee Schedules
- Patient Onboarding Education Packets
- Monthly Biologic Training Meetings
- Workflow Process Documents
- A “Phone-A-Friend” Mindset



Patient Tracking List Example

A	B	C	D	E	F	G	H	I
Patient	DOB	MRN	Therapy	ICD-10	Dose	Freq (days)	Payer Name	Notes

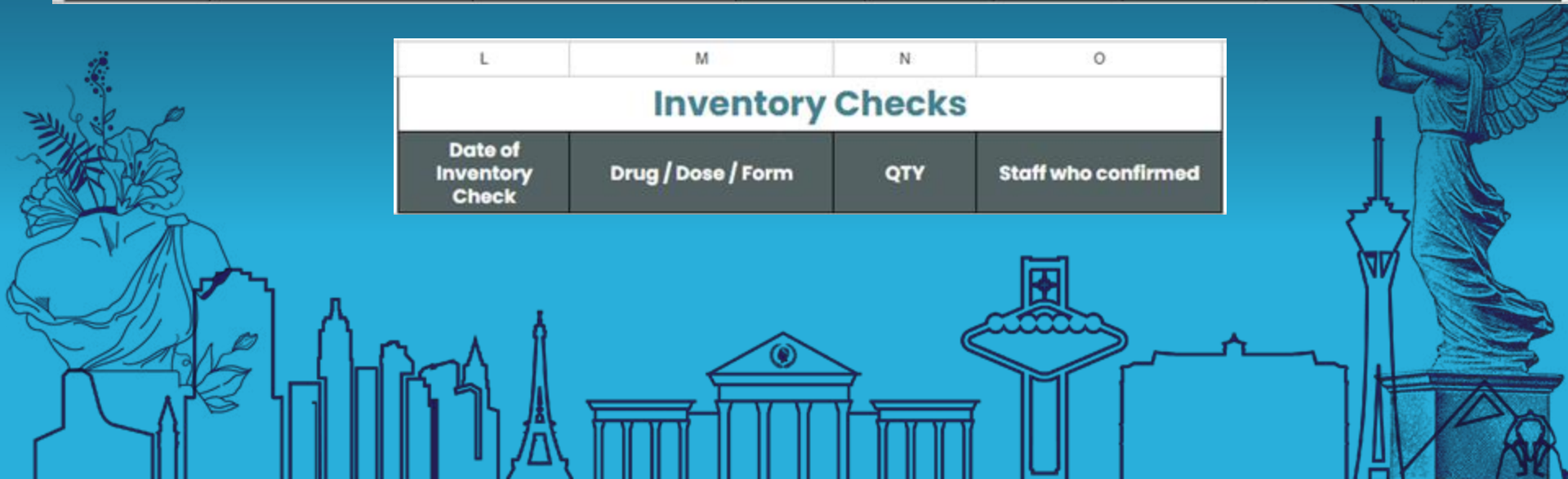
J	K	L	M	N	O	P	Q	R	S
Date of Next Injection	Prior Authorization Number	Start Date	End Date	Units Approved	New Start Date	Enrollment/Consent Complete	Benefit Investigation Completed	Copay Assistance Effective Date	Meets Medical Necessity



Inventory & Ordering Example

A	B	C	D	E	F	G	H	I
Buy and Bill Biologics Inventory / Ordering								
Invoice #	Drug / Dose / Form	STOCK LOCATION	QTY IN STOCK	QTY REQUIRED	QTY ORDERED	PURCHASED DATE	EXPECTED DATE OF DELIVERY	DATE ORDER RECEIVED

L	M	N	O
Inventory Checks			
Date of Inventory Check	Drug / Dose / Form	QTY	Staff who confirmed

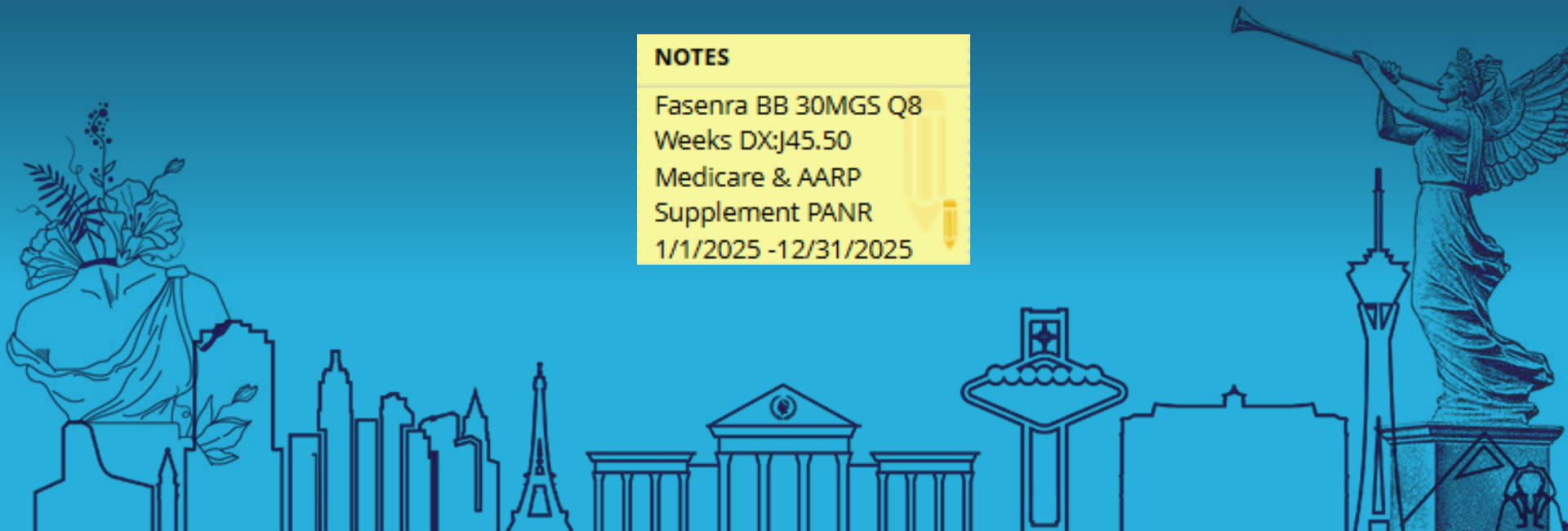


Global Alert Examples:

Sticky Note: Tezspire B&B 210MGS PFS Q4 Weeks DX:J45.50, Medicare & BCBS Medicaid - PANR 1/1/2025 - 12/31/2025

NOTES

Fasenra BB 30MGS Q8
Weeks DX:J45.50
Medicare & AARP
Supplement PANR
1/1/2025 -12/31/2025



Need To Know BEFORE Starting!

- Internal Benefits Investigations = **MUST**
- Payer Contracting & Fee Schedules = **REQUIRED**
 - Auditing = **MONTHLY**
 - Copay Programs = **NEED**
- Educating the Patients = **ALWAYS**
- Inventory Management = **CRUCIAL**



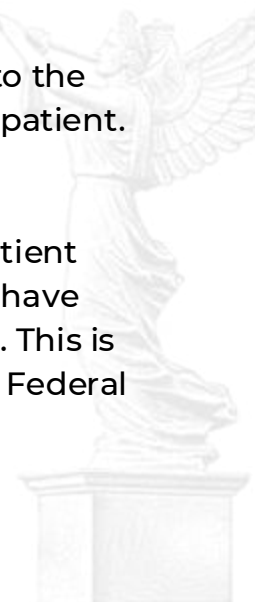
Making It A Little Bit Easier:



Complicated Factors:

As If Things Weren't Already Complicated Enough!

- **Copay Accumulator Plans:**
Insurance programs that do not count manufacturer copay assistance programs towards a patient's deductible or out-of-pocket costs. This can ultimately lead to unexpected high costs once the assistance is exhausted.
- **Off Label Diagnosis / Frequency:**
A medication that is prescribed for a condition that is not FDA-approved or not listed in the drug's labeling. Insurance may deny coverage unless there's strong clinical support or guidelines.
- **Step Edits (Step Therapy):**
Insurance plans require patients to try and fail one or more lower-cost treatments before approving the prescribed (often more expensive) therapy. May delay access to the providers first choice medication for a patient.
- **Income Limits::**
Many assistance programs (such as Patient Assistance Programs or Foundations) have income eligibility thresholds to qualify. This is typically based on a percentage of the Federal Poverty Level.



Cross Training

Success Through Shared Responsibility:

The Biologics Program is not a “one-person job.”
While the Biologic Coordinator may lead the charge, every department plays a vital role in the process.
When the Coordinator is cross-trained across the entire workflow, they can step into a leadership role, serving as a resource and support for every department, rather than replacing or challenging anyone’s responsibilities.



How Can I Play My Part?

It takes an investment to make an impact.
The success of your Biologics Program relies heavily on listening,
supporting and empowering your team.

Key Factors:

- Listen to your team.
- Collaboration over competition.
- Encouraging open dialogue
- Investing in your team.



Remembering Our Why

This work is more than just paperwork.
It's people. It's impact. It's life-changing.

It's about showing up for those who depend on us at every step of
the way.

Behind every form, every call, every appeal. There's a patient
waiting, hoping & trusting in us to help them move forward.

We may see a process.
They feel the outcome.



Remembering Our Why

Every delay, denial, or misstep isn't just a system issue. It's a setback for someone's mother, father, grandparent, or child.

Whether you're a provider, coordinator, nurse, biller, or part of the front desk team, know that your role holds weight.
Your actions have power.

We have the privilege of helping patients access therapies that can change, extend, and improve their lives.

Let's treat every patient the way we'd want our own family treated, with empathy, clarity and commitment.



No Claim Left Behind IS No Patient Left Behind

Q & A



THANK YOU!

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