Monthly Revenue Meeting Kit

Use your existing billing reports to agree what needs attention, who owns the next step and when to check again. This worksheet supports a management discussion; it does not calculate performance or guarantee payment.

Review month _____

Meeting date _____

Meeting lead role _____

Next review date _____

Prepare before the meeting

- ☐ Bring the agreed aggregate billing reports for the current and comparison periods.
- ☐ Check each report's period, run date and definition before comparing it.
- ☐ Mark missing or unverified information as "Not available"; do not enter zero instead.
- ☐ Review last meeting's open actions and bring only a high-level status.
- ☐ Decide which questions need the billing lead, practice manager or financial reviewer.

Suggested 30-minute agenda

Time	Discussion
5 minutes	Check earlier actions and report completeness
10 minutes	Review changes and unanswered questions
10 minutes	Agree priorities and responsible roles
5 minutes	Confirm next actions and review dates

Adjust time to your team: _____

Compare like with like

Use the same reporting population and definitions when comparing periods. If they changed, note the difference and treat the result as a question until reviewed. Keep patient and claim-level investigation in your approved systems.

Use aggregate operational information only. Do not enter patient names, dates of birth, account or claim identifiers, clinical details, payer credentials or financial account numbers. Keep supporting records and completed worksheets in your practice's approved secure systems. Do not upload or send this worksheet through a public website form.

General operational planning aid. Adapt it to your agreed scope and approved reporting definitions. It is not coding, clinical, legal, financial or payer advice, and does not guarantee approval, reimbursement or recovery.

What changed, and what needs review?

Summarize only what your approved reports support. Distinguish a known observation from a possible explanation. Review payment or adjustment questions with the appropriate authorized person. Do not treat this worksheet as a financial statement, payer decision or claim record.

Review month: _____ Meeting date: _____

Review area	Aggregate observation or Not available	Report name, period and run date	Question or next review needed
Claims activity			
Payments and posting			
Rejections and denials			
Insurance A/R			
Payer follow-up			
Practice dependencies			

If report coverage or definitions changed, record that limitation before deciding what the change means.

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Leave with a next action and an owner.

Record the agreed next step, the responsible role and what will support the next review.

Review month: _____ Meeting date: _____

Priority or question	Agreed next action	Responsible role	Review date	Status or evidence still needed

Suggested status: Open | Waiting on information | Ready for review | Closed with evidence

Illustrative example - not a client case or payer instruction

Priority/question: Posting summary is incomplete.
Next action: Ask the authorized reporting owner to confirm report coverage before comparing periods.
Responsible role: Billing lead.
Review date: Set by the practice.
Status/evidence: Waiting on report coverage confirmation.

Which earlier actions remain open?

Who will circulate this summary inside the approved practice workspace?

What must be reviewed before the next meeting?

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