

Workflow Improvement

Bringing Value to Your Organization
Through Information Technology
in the Revenue Cycle

By

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- **The region's leading imaging division – created over 20,000,000 images last year**
- **Works with Medical Practices, Hospitals, Legal Firms, and Corporate Entities across the US**
- **Workflow solutions specific to Healthcare organizations including enhancing revenue cycle management**
- **Industry-neutral solutions for Human Resources, Accounts Payable, internal document management**
- **Litigation support leader in the region**

Jonathan Adams

- Co-Founder and President of SALIX; over 2500 customers in the region
- 12 years in Records and Workflow management
- Past President of Cincinnati AARMA Chapter; serves on several Boards
- Graduate of Miami University with degree in Finance
- Designed and developed workflow solutions for major Fortune 500 companies

Ruth Sara Hart- Schneider

- 25+ years in the Healthcare Market as Co-President of Plettner-Hart Management Consultants Inc
- CPC since 2000
- Designed and implemented workflow solutions to enhance revenue cycle management and document/content management for Healthcare
- Graduate of University of Virginia with degree in Mechanical Engineering
- Has worked with hospitals, clinics, physician practices, MSO's, etc.



IMPART, LLC

- Practice Management Consulting
- Revenue Cycle Analysis
- MCO Contract Negotiations
- Full & Partnership Billing Service Solutions
- Business & Succession Planning

Timothy J. Kappes, PhD

- Physician Assistant -Board Certified by the NCCPA in Primary Care and Surgery
- Masters in Physical Medicine/Pain Management from University of Nebraska
- Certification in Occupational and Environmental Medicine from Duke University
- Doctorate in Health Care Administration
- Served as Director at Large Kentucky Academy of Physician Assistants & Reimbursement Chair
- Practice Management Consultant – IMPART, LLC focusing on both clinical and information system optimization

Adding Strategic Vision to Your Organization

- Look for Solutions to Everyday Problems
- Look for Patterns in What You Do Everyday
- Help identify technology and strategies to give you the competitive edge

Teams that are successful

- Ability and Suitability
- Motivated to help grow the business
- Manageable and Team Player
- Professional Behavior
- Problem Solver
- Initiative & Enthusiasm
- Willingness to Accept Responsibility
- Has a Pattern of Continued Learning
- Embraces New Technology and change

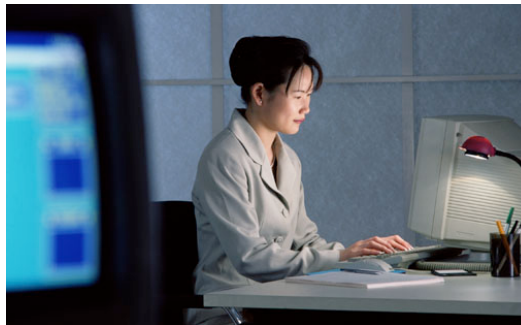
Recurring Issues

- Revenue Cycle
- Employees
- Expenses
- Keeping up with Technology
- Managed Care Contracting
- Patient Care Issues/Complaints
- Keeping providers focused on revenue-generating activities

Inherent Challenges for Change

People

- Big Picture
- Culture
- Integration vs. Functionality
- Individual Motivation
- Personnel Cost
- Fear of Computerization



Business Practice

- Clear Vision and Priorities
- Strategic Plan
- Work Flows
- Process vs. Task Orientation
- Data Ownership
- Access and Security
- Patience and Time

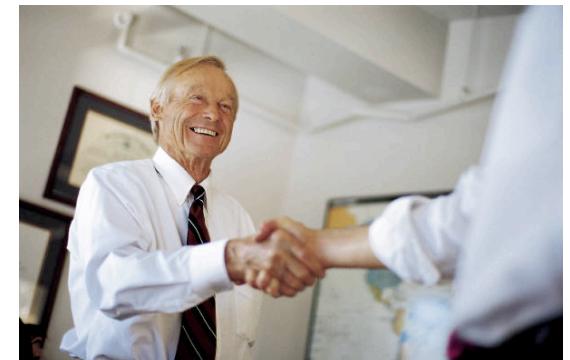
Systems

- Legacy vs. New
- Availability
- Best of Breed
- Vendor Strategies
- Integration
- Interoperability
- Devices/Mobility
- Portals/Single Sign-on

Compromise



Compromise



Compromise

The Landscape has Changed

- Recession/Economy
- High Deductible Healthcare Plans
- Increased Patient Responsibility
- Reduction in Fee Schedules
- Increased Overhead

Solution –

Efficient Revenue Cycle Management

It's a matter of Survival

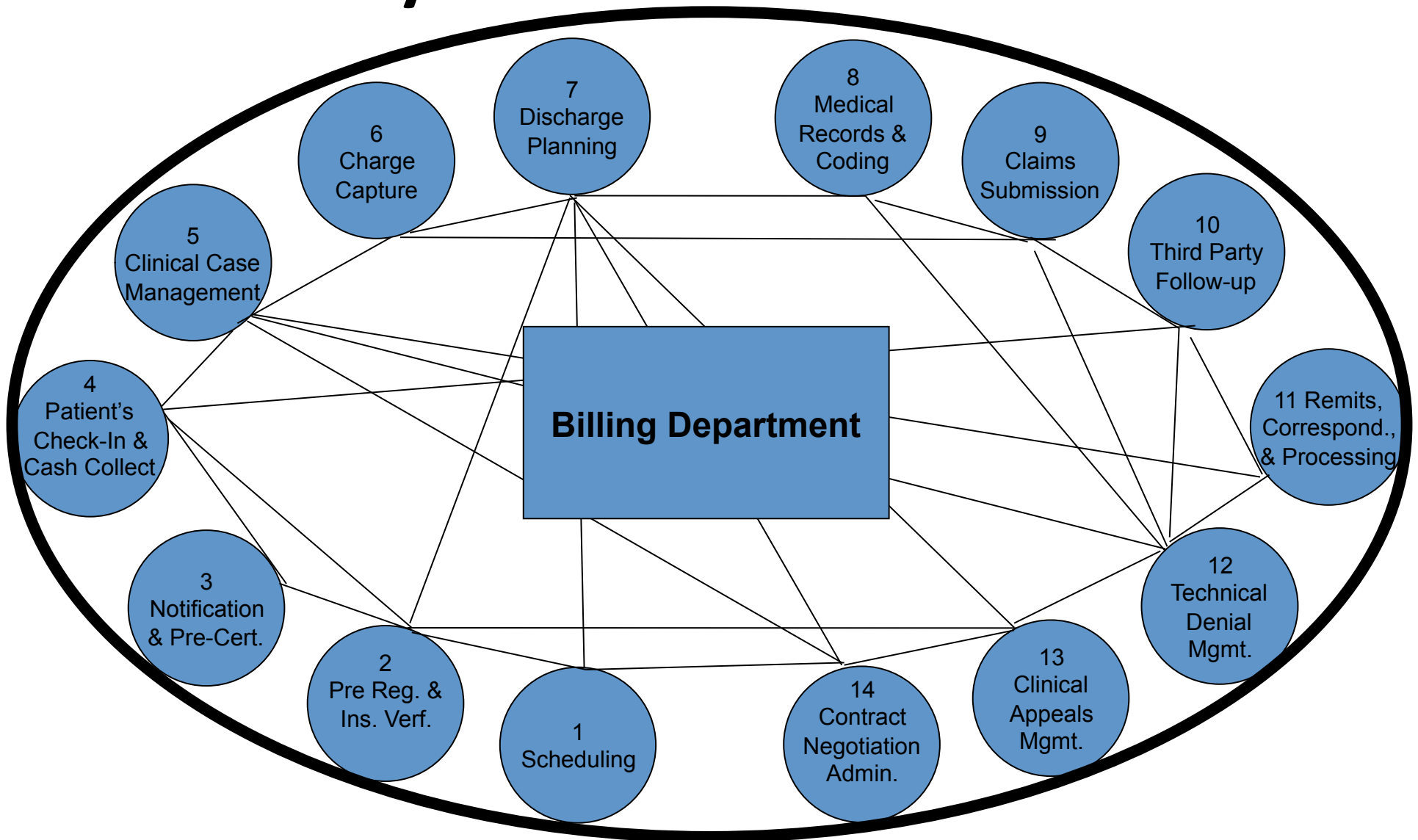
- Future survival will depend upon doing things radically differently than in the past and will require leveraging technology to maximize your employees' efficiencies
- Leverage your resources (internal and external) to bring solutions to your organization.
- Create a culture of embracing new solutions

If you're not the lead dog... the view never changes

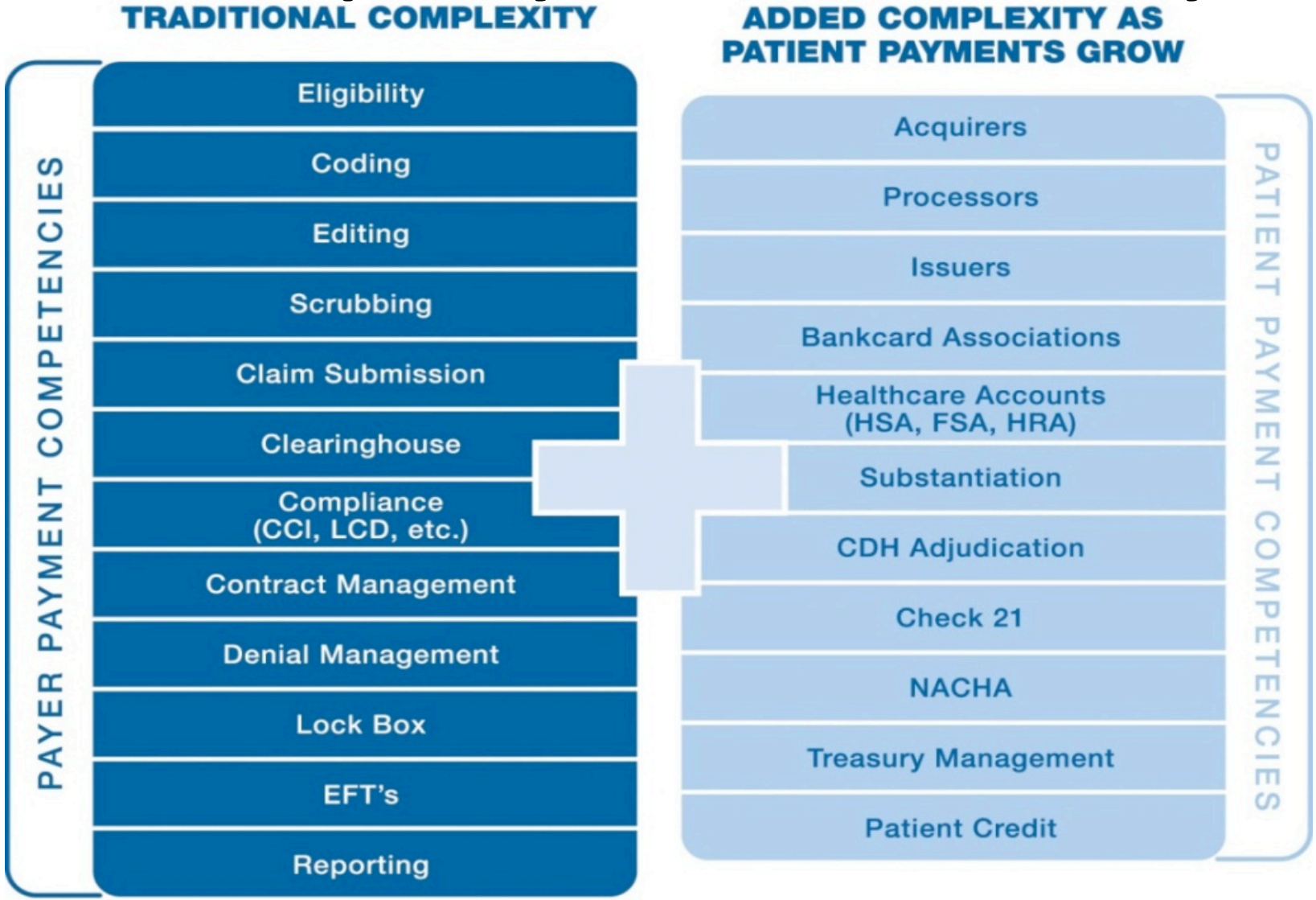




Revenue Cycle



Added Complexity for the Revenue Cycle



Bottlenecks



Service Line	Issues
Registration & Pre-Certifications	Failure to perform in a timely manner Fraught with errors Missing Information
Prior Authorizations	Failure to perform in a timely manner Multiple submissions Lost Requests
Clinical Documentation	Lack of Medical Necessity Document does not support Dx or Coding Lack of Protocol
Check In / Check Out	Missed Appointments Missing Encounters Failure to know what or how much to collect
Billing	Registration/PA/Co-pays Documentation/Coding/Denials Insurance Carriers Patient Responsibilities/Collections

Keys to Improved Workflow

- You Can't Manage What You Don't Measure
- Know What to Measure – See Handout
- Understand and Manage each key element of the Billing and Collection Process
- Hire the Right People
- Look for manual, paper-based processes to address- they are your “low-hanging fruit”

The Revenue Cycle

- Traditional Revenue Cycle Management has focused on insurance collections
- Expanding efforts to all points in the revenue cycle will yield tremendous benefit from patient collections
- Investigate new technologies that are available

Opportunities to Optimize \$\$

Scheduling – Maximize encounters, minimize waiting times, & minimize no shows.

Credentialing – Is your provider credentialed for the patient's carrier? Do your scheduling people have the tools to know?

Registration – Demographics, patient education of financial policies, & eligibility verification for every encounter.

Pre-cert Process- Streamline processes so that patients can be seen and treated on a more timely basis

Encounter – Collection of co-pays, deductibles, estimated fees, collection of outstanding and past due amounts.

Patient Statement – send out immediately after adjudication, shorter pre-collection periods, payment options & anticipated assistance

Online – Multiple payment venues, ability to store HSA, HRA, CC information for future use, & email notification

Back Office Follow Up – Pre-emptive calling on claims, efficient tracking and automated appeals/denial management

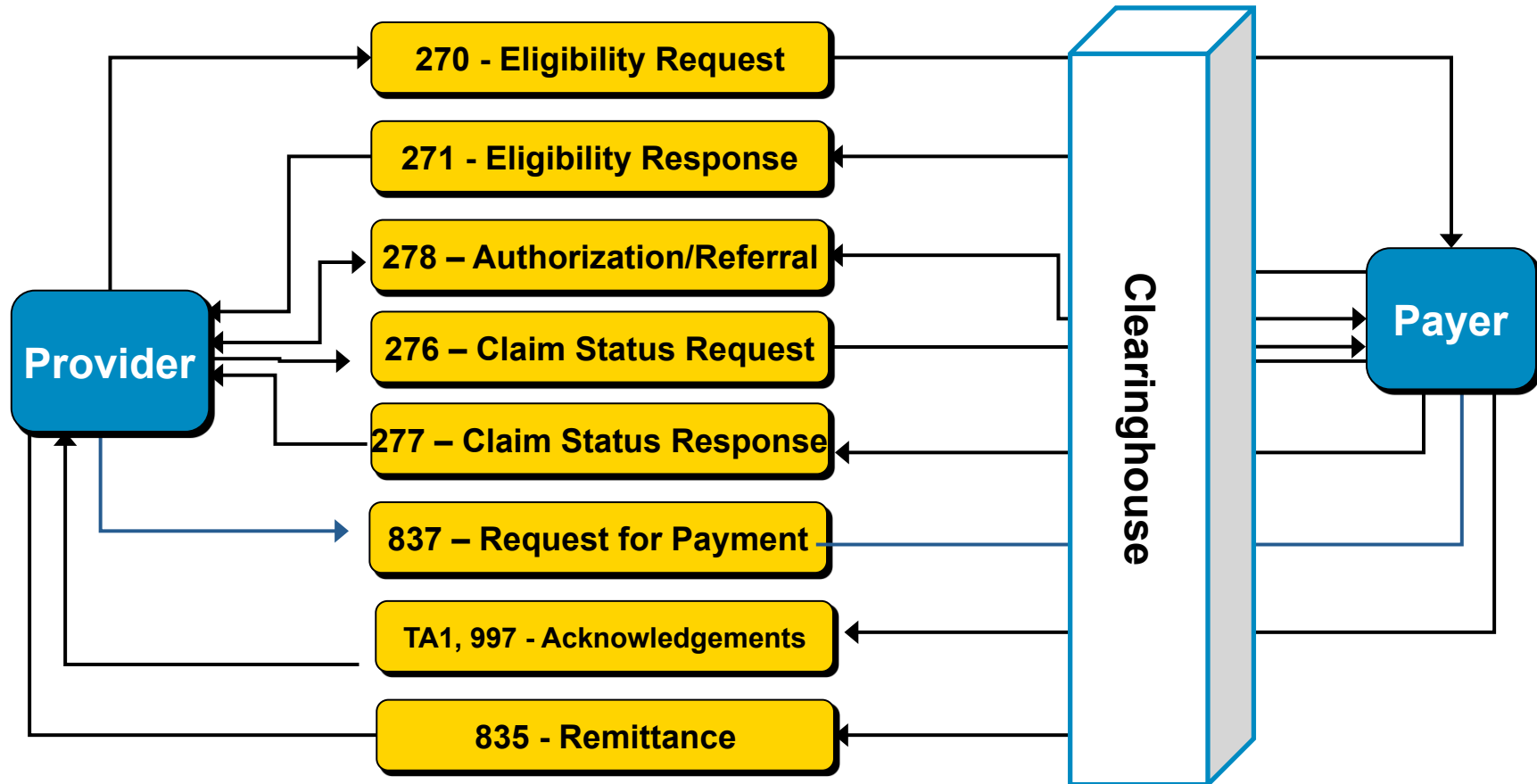
Evaluate your denials- What could you be doing differently to minimize rejections?

Collections - Begin process at 90 days

Automated Solutions at Every Step of the Process



HIPAA Transaction Sets

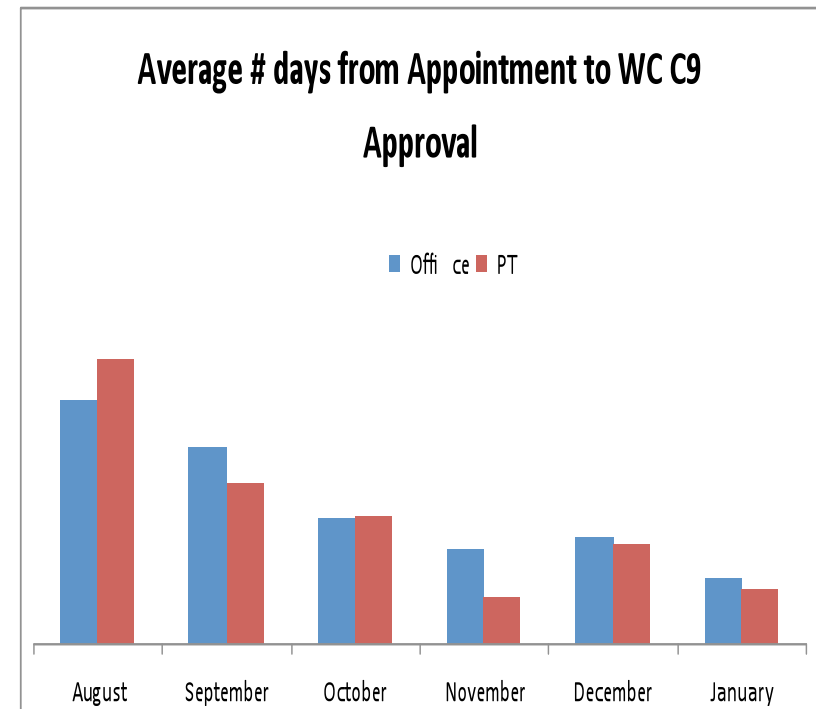


Workflow Examples

- Pre-Cert/ Prior Auth – Workers Comp and Commercial Payers
- Eligibility Verification/Payment
- Paper in the office- Refund requests, denials, medical records requests
- Manual completion of forms- can they be pre-populated by interfacing with existing data?
- Consider peripheral functions- Credentialing, Pre-collection processes, Accounts Payable...

Choose an Area to Increase Performance

- Know your benchmarks
- Look for proven solutions
- Measure progress
- Look to eliminate paper, faxing, manual and redundant functions
- Seek electronic solutions to give everyone access to key data
- Look for manual processes and forms being filled out by hand
- Look for interoperability between software products

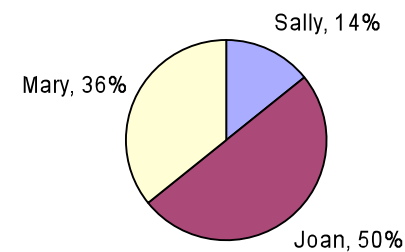


This practice saw a 66% decline in time it took to get C-9's approved

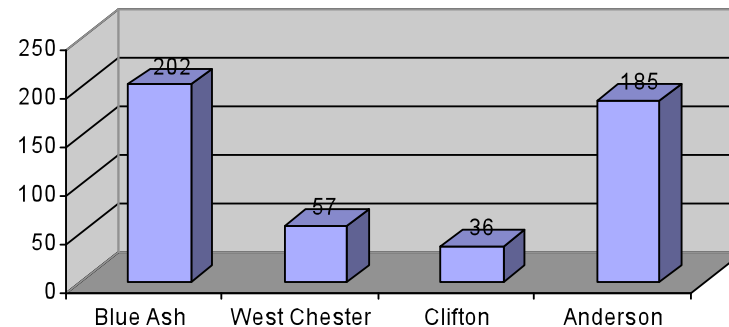
Workflow Management to “Drill Down” and Identify Issues

- Make sure your workflow solution can give you the data you need to identify:
 - Bottlenecks
 - Inefficiencies
 - Productivity issues
 - Volume data
 - Variances by location
 - Variances by provider
 - Etc.

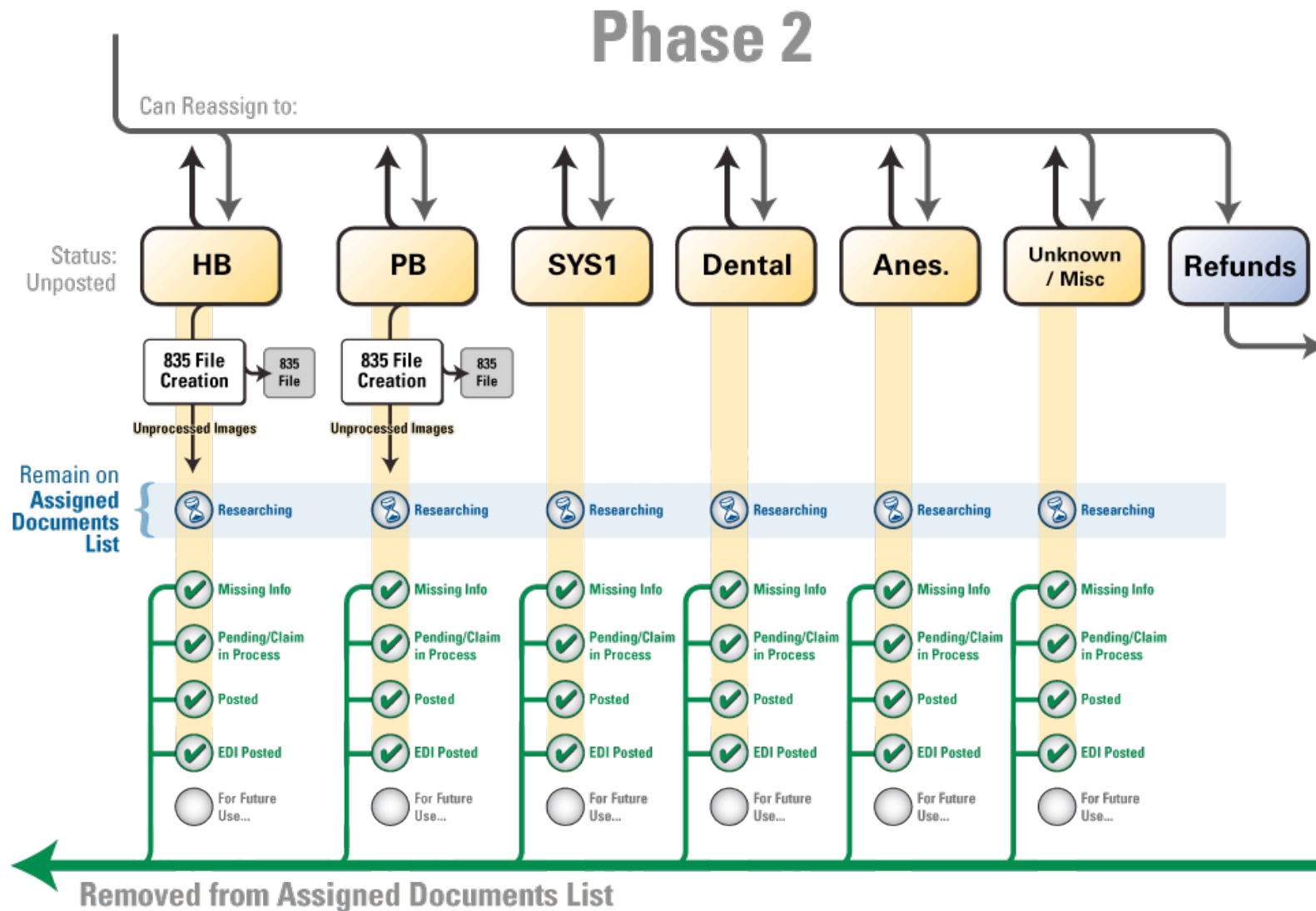
Number of Denials by Employee - Jan 2011



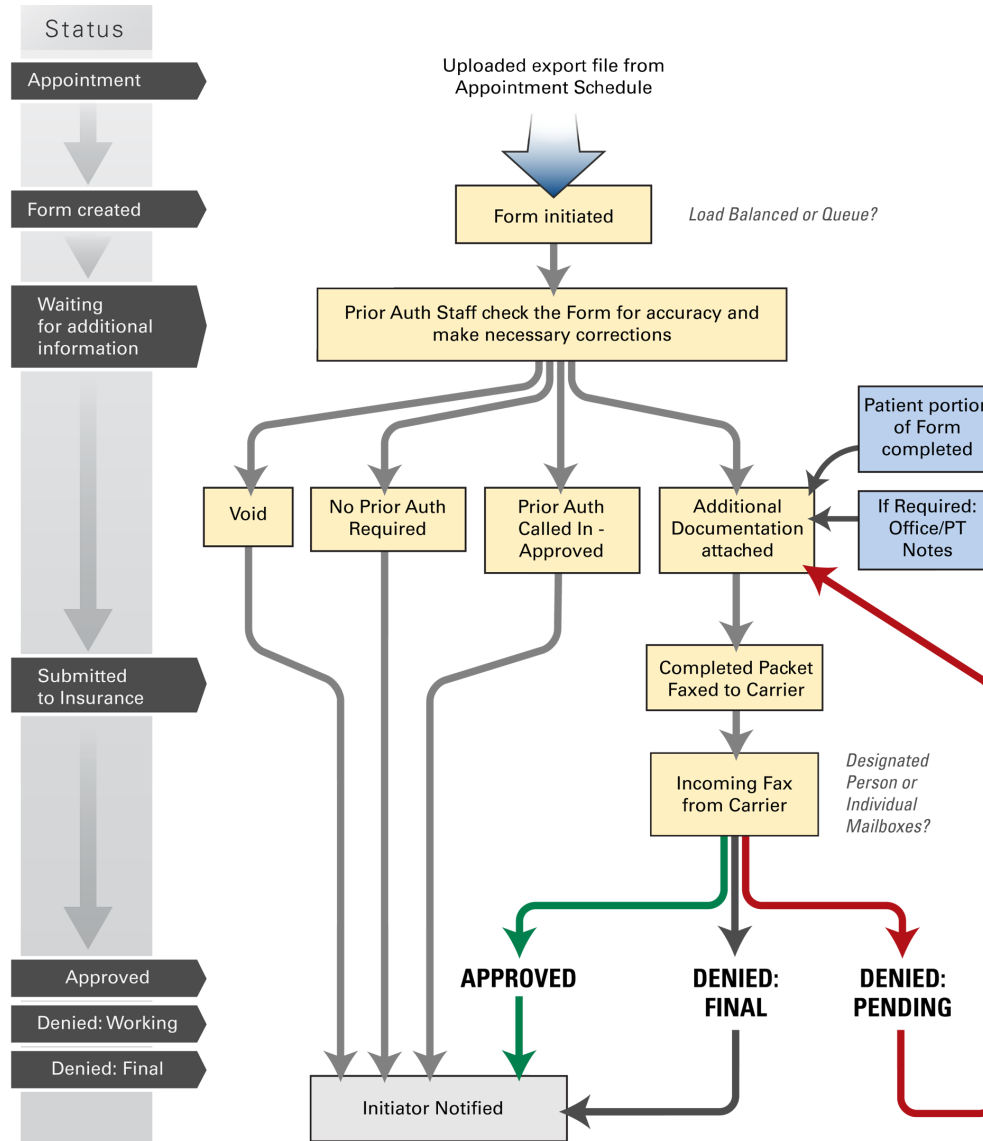
Prior Auths by Office for Jan 2011



Workflow Solutions to Minimize Paper Shuffle



Prior Auth Processes

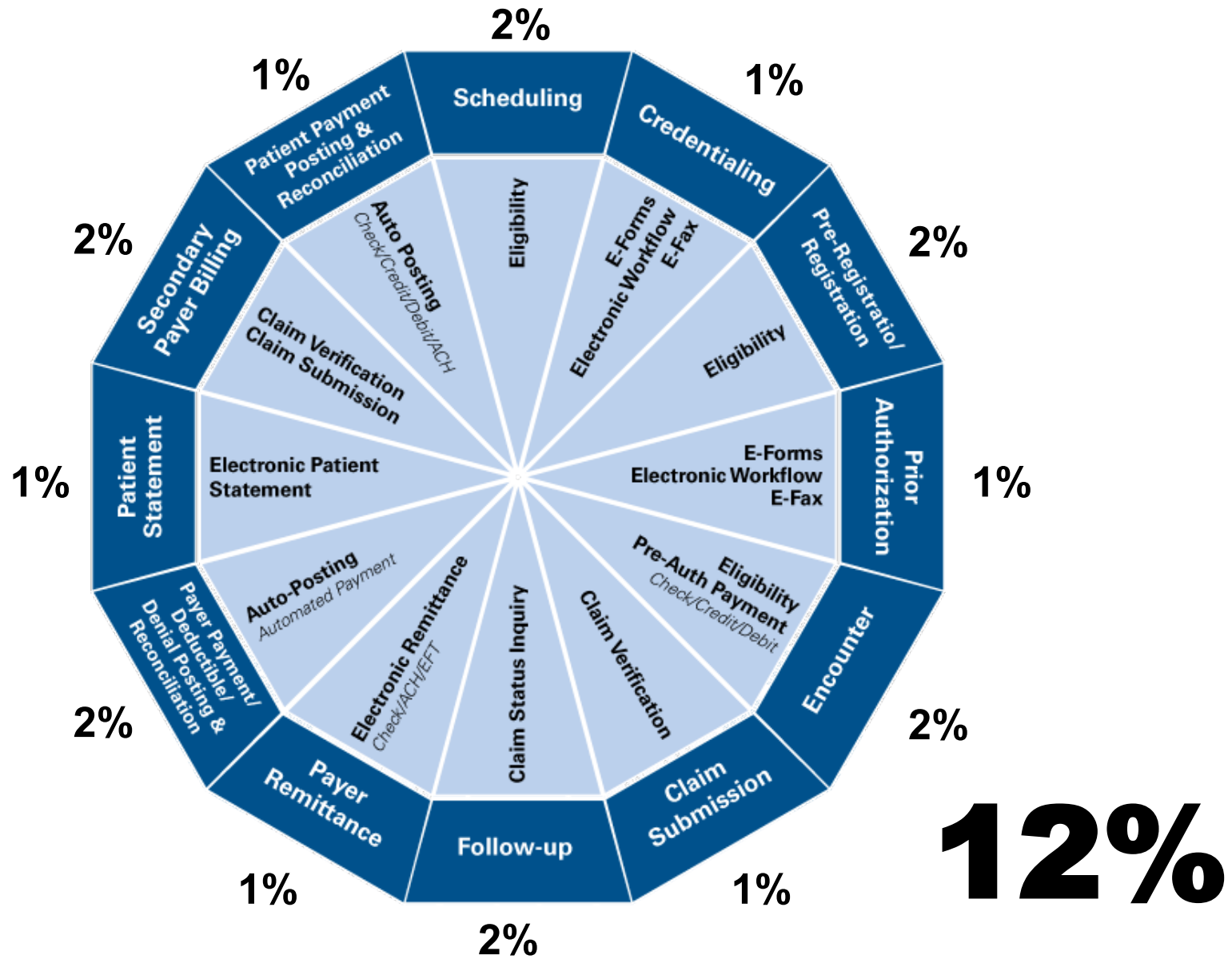


Long Term Results

- Improved reporting: Audits, rules, roles, access
- Eliminate reporting boundaries between electronic systems (PM, EMR, OARRS, Availity, Healthbridge, Nexus, etc.)
- Improved management
- Improved quality thru end to end process automation
- Provide Data to your employees to enlist their creativity
- Provide Data to stakeholders to improve decision-making

End Result
Profitable, Well Run Organization

The Financial Impact



What Solutions Are You Using?