

Client: Large Urban Health System in SE

Accelerating Collections and Recovering Lost Revenues While Streamlining Workflows

Business Challenge

A multi-hospital health system in the Southeastern U.S. with a centralized business office was working with an outside vendor to retroactively identify incremental Medicaid eligibility on unpaid accounts. The vendor worked in competition with early out and bad debt vendors and received a contingency fee based on incremental payments that were generated. The vendor completed bulk searches and provided standard data reports that did not take into account the specific problems facing the health system which limited the health system's ability to maximize results and streamline internal efforts.

To control the cost of identifying existing eligibility, the health system's internal teams were forced to withhold large accounts for internal review and ultimately overlapped their own efforts with that of the vendor. This workflow created an adversarial relationship with the vendor and frequently resulted in complicated fee reconciliation processes. Time spent duplicating efforts and reconciling accounts diverted limited internal resources away from other core patient account responsibilities, impacting productivity and slowing the revenue cycle.

Solution

The health system engaged Auditiz to perform Payer Search, which utilizes proprietary "intelligent" software to identify Medicaid, Medicare and commercial insurance eligibility that was previously missed by internal systems and external eligibility vendors.

Auditiz is focused on maximizing hospital and health system reimbursement by applying proven processes, advanced technologies and complex algorithms developed from decades of experience in the payer and provider markets. Auditiz generates information-rich reports based on customized filters and workflows that group claims by payer classification and value, enabling clients to more effectively and efficiently prioritize workflows and assign appropriate resources to revenue recovery efforts.

Results

The health system wanted to test Payer Search prior to signing a contract and was pleased to learn of the risk free assessment offered by Auditiz. Without signing a contract, Auditiz completed the full Payer Search scope of work with a nine-month population of accounts at one facility. At the end of the assessment, Auditiz had identified more coverage from a smaller sample of accounts than the original vendor had from the original larger sample set.

Challenge

- Control costs and decrease lost revenue from missed insurance coverage.

Solution

- Utilize Payer Search to identify Medicaid, Medicare, and commercial insurance eligibility and enable more efficient and effective workflow.

Results

- The health system was able to increase reimbursement and decrease cost of current vendors by selecting Payer Search and Transfer DRG Review.

Having proven its value, Auditiz was engaged to manage retrospective eligibility identification for the full health system, including all inpatient and outpatient facilities, for a low fee. As a result, the health system was able to fully benefit from the upside of Payer Search and decrease both internal and external costs.

As part of the Payer Search implementation, Auditiz was able to identify more value for the health system by identifying specific problematic areas and customizing reports around existing workflows. The health system has been able to streamline workflows and increase productivity in other areas of revenue cycle by using the Payer Search information. For example, because of the speed and accuracy with which Auditiz identifies Medicare and Medicaid eligibility, fewer internal resources must be dedicated to the process of retrospectively qualifying patients and completing disproportionate share analysis. Further, Auditiz customized their reports so that the data could be plugged directly into workflows, eliminating the bottlenecks created when information must be parsed and reports reconciled.

The health system was so impressed with Auditiz' services that they elected to complete a risk free assessment for Transfer DRG Review as well. Once again, Auditiz outperformed the existing vendor and delivered a superior return at a fraction of the cost.

"Since engaging Auditiz, not only have we recovered significant amounts of revenue that would otherwise have been lost, but we have also been able to streamline and accelerate multiple workflow processes. That directly impacts the bottom line by expediting the overall collection process," said the health system's billing team leader. "Partnering with Auditiz has increased productivity, eliminating backlogs and allowing us to refocus our resources on achieving the health system's financial objectives."