



Client: Mid-Atlantic Multi-Hospital Health System

Attacking Medicare, Medicaid & Third-Party Underpayments from Unique Angles

Business Challenge

A multi-hospital health system in the U.S. Atlantic Coast region lacked the resources necessary to aggressively pursue appropriate reimbursement for claims paid according to the Medicare post-acute inpatient transfer rule. While the health system had dedicated resources to review these accounts, the account volume and complexity in the regulations resulted in mandatory charge thresholds, missed opportunities and regular underpayments that went undetected.

Solution

Auditiz was already providing the health system with Payer Search, which utilizes proprietary “intelligent” software to identify previously unrecognized Medicaid, Medicare and commercial insurance eligibility. As with every engagement, Auditiz had customized the implementation of Payer Search to fit the client’s specific needs and was also assisting the hospital system in the billing process by performing certain business office functions remotely.

Because Auditiz was already collecting and validating a significant volume of patient data as part of Payer Search, identifying and pursuing additional sources of uncollected revenues was a natural expansion of the relationship. Auditiz performed a complimentary assessment with the account information it had on file. In a few days, Auditiz was able to present a robust report that uncovered specific incremental revenue opportunities. Based on the results of the assessment, Auditiz was engaged by the health system to provide Transfer DRG Review and identify Medicare underpayments related to inpatient transfers.

Results

The powerful combination of Auditiz’ proprietary technology, comprehensive understanding of Medicare and Medicaid rules and regulations, and intimate knowledge of fiscal intermediary policies delivered immediate and impressive results. The retrospective analysis and continued monitoring of Medicare accounts has resulted in approximately \$350,000 of incremental reimbursement to the health system. This return was provided quickly and at a fraction of the expense that internal resources would have cost and other vendors would have charged.

As a result of Auditiz being able to work with similar information for both Payer Search and Transfer DRG Review, the resources required to implement Transfer DRG Review were marginal. As many hospital and health systems complete system conversions, the ability to produce meaningful returns with minimal hospital technology and business resources is key.

Challenge

- Resource and technology constraints led to a high cost to collect complex accounts and missed revenue opportunities.

Solution

- Utilize Payer Search to identify and pursue additional sources of uncollected revenue, and Transfer DRG Review to recoup missed Medicare reimbursements.

Results

- The combination of Payer Search and Transfer DRG Review have resulted in \$2 million of incremental reimbursement to the health system.

“The partnership with AuditZ has benefitted us in ways we could not have imagined at the start of this relationship. They are proactive about identifying overlooked revenue opportunities and have significantly impacted our bottom line without requiring us to divert any of our internal resources to help them do so,” said the System Director of Patient Business Services. “Equally impressive is the fact that they accomplished all this in less time and delivered better results.”