

Cody Waldrop Vice President Revenue Cycle



Natalya Crowe
Director
Revenue Cycle



Amy Green
Director
Member Development



Dr. Airaj Waheed
Director
Clinical Documentation
and Coding



Audience Participation

Since we are virtual today, tell us a little bit about you? What organization do you represent?

- Independent community-based hospitals
- Hospital System (IDN)
- Physician Practice/Medical Group
- RC Vendor
- Other



Mission

TPC provides the framework for independent, community-based hospitals to achieve system value through strategies that optimize operational, financial and clinical performance.





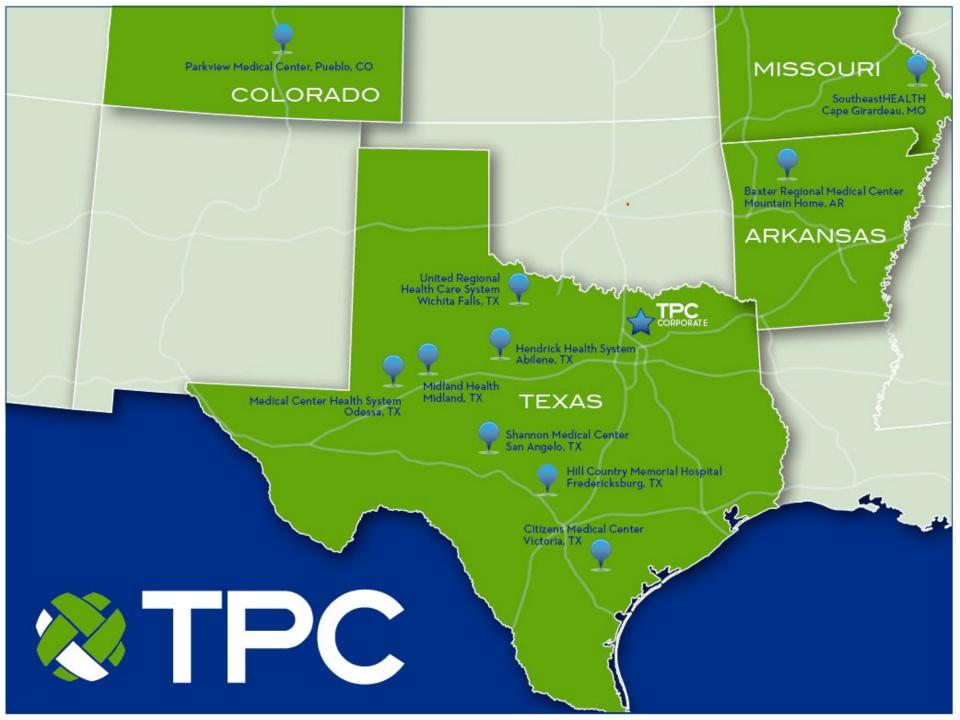
STRONGER TOGETHER, SUPERIOR RESULTS.

10 Health Systems MORE THAN 20 HOSPITALS over individual sites \$1 Billion \vec{v}

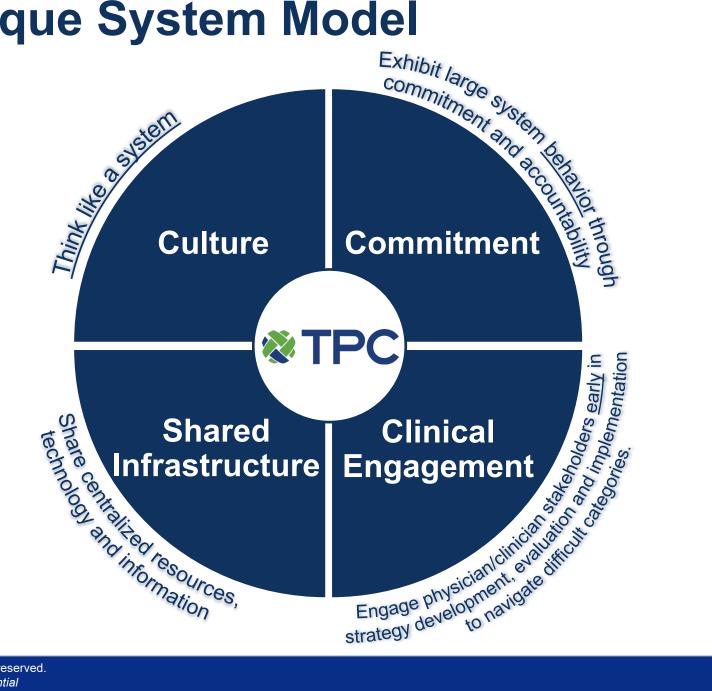
Net Patient Revenue 5

\$3.5 Billion





Unique System Model





Collaborative Member Governance



Set overall strategy, direction and culture





Promote TPC system behavior internally and externally, and approve key decisions

EVALUATION & IMPLEMENTATION

Business Line Committees Supply Chain Council, Support Services Council, Revenue Cycle Council, Administrative Value Analysis Teams (Supply Chain, Support Services and Revenue Cycle Leaders)



Facilitate, coordinate and implement TPC initiatives and programs



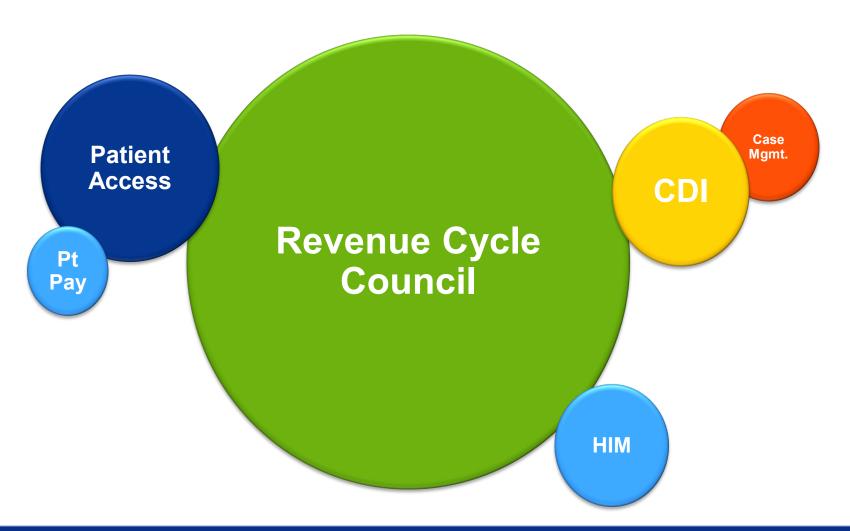
What are your biggest challenges in the Revenue Cycle?

Please answer using the chat feature

TPC Revenue Cycle

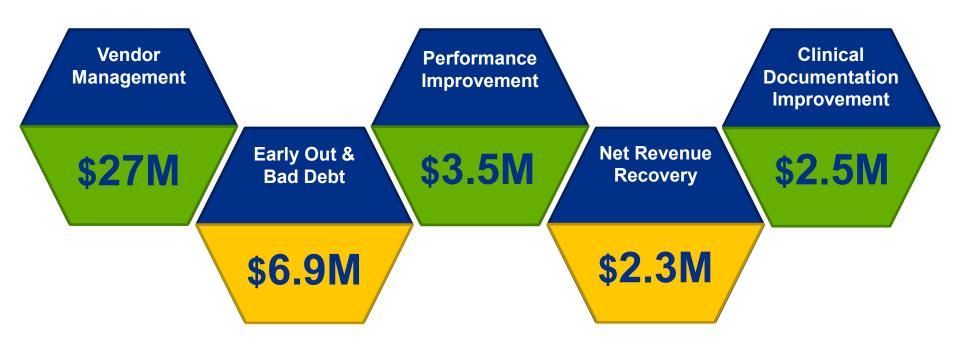


Engagement at Every Level



\$40M

IN SAVINGS AND PERFORMANCE IMPROVEMENT since 2016







How we work with our Members

	Member Driven Performance Improvement	Targeted by Revenue Cycle Council	
Q / = /	Benchmarking & Comparative Analytics	 Benchmark against TPC and National Peers Monitor system KPI's Analyze and Identify opportunities 	
	Strategic Vendors	 Identify and target specific initiatives May involve price savings and performance improvement Best in Class Vendors 	
	Shared Purchasing	 Individual and group contracting Price savings on products & services 	



Systemness Examples



Managed Care

- Created a program to provide analytic and at the table negotiation support
- Developed system strategy around Medicare Advantage

CD

- Member priority
- Developed post and prebill services
- Expanding to outpatient and physician education

COVID-19 Response

- CARES Act
- Medicare APP
- Forum for discussion



Member Case Study

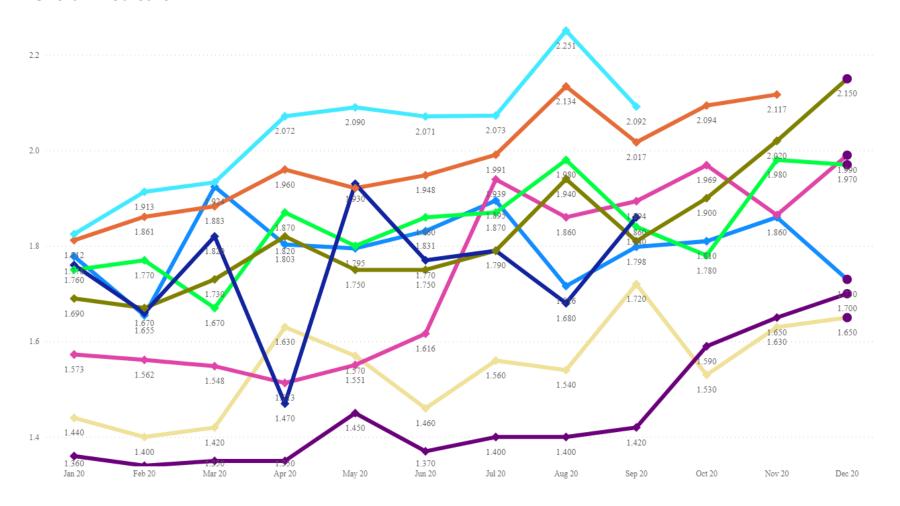
- Over \$6.6M in savings and performance improvements from 2018
- 10% improvement in overall Medicare CMI from Q1 2020 to Q3 2020
- 5% growth in Net Revenue per CMI adjusted discharges Q1 2019 Q3 2020

	Member Driven Pl	Benchmarking and Comparative Analytics	Strategic Vendor Initiatives	Shared Purchasing
•	Managed Care CDI Patient Pay Denials Unbilled (DNSP)	 AVP of Revenue Cycle serves as the Chair for our monthly Revenue Cycle Council Contributes data to HFMA Map App Leader in developing TPC KPI dashboard 	 Vendor Management T-DRG LIL Eligibility Underpayment Review 	 Contract Savings: Consulting Services Bad debt vendors Medicaid eligibility Statements CDM/Charge Capture Price Transparency Case Management



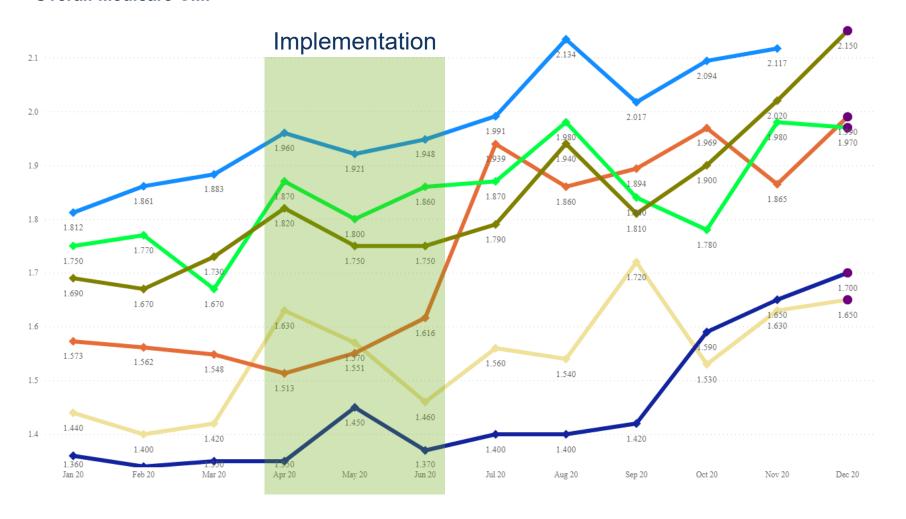
Members working together

Overall Medicare CMI



Results of the Work

Overall Medicare CMI





What Revenue Cycle solutions are you implementing in 2021?

Please answer using the chat feature



Key Initiatives for 2021



Implement Enhanced Comparative Analytics Platform



Vendor Management



- Reduce vendor costs and improve outsourced vendor performance
- Utilize strategic vendors to enhance net patient revenue

CDI



- Utilize subject matter experts to enhance Member CMI
- Utilize CDI Council to develop programs and education for physician and staff
- Improve Productivity and Workflow
- Develop outpatient initiative

Patient Pay



- Continue implementation of digital platform
- Develop patient self service
- Improve vendor performance
- Enhance POS processes

Managed Care



Maintain strategic partnership to support Member

- Analytics
- Reimbursement benchmarking
- At the table negotiation support
- Shared education and best practices

Unbilled



- Utilize
 comparative
 analytics to
 identify root
 causes for
 delays in billing
- HIM coding subcommittee

Denials



- Utilize comparative analytics to identify root causes for denials
- Implement best practice identification and reporting
- Develop denial avoidance strategies

Value & Benefits

Stronger Together

Acting as one large system, leverage economies of scale and relentless innovation to achieve more together than can be done individually

Superior Results

Documented success in optimizing savings, revenue and non-financial value



Questions?



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