Engaging All Revenue Cycle Departments in Denial Prevention

MISSOURI WINTER CONFERENCE



# Agenda

Engaging All Revenue Cycle Departments in Denial Prevention

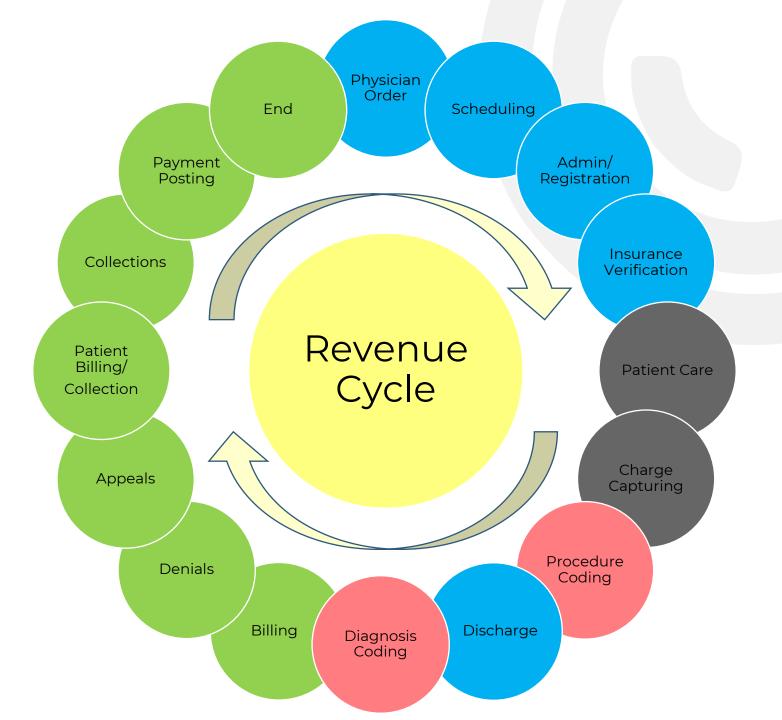
- Overview of Revenue Cycle and Departmental Impacts on Cash Flow
- 2 Patient Access Involvement in Reducing Denials
- **Engaging HIM and Physicians in Denial Management**
- 4 Improving RCM System Function to Improve First Pass Payment Rate

### REVENUE CYCLE MANAGEMENT DEFINED

"All administrative and clinical functions that contribute to the capture, management, and collection of patient service revenue."

-The Healthcare Financial Management Association (HFMA)

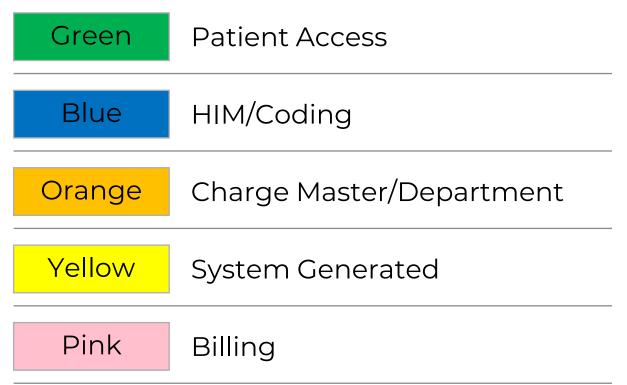


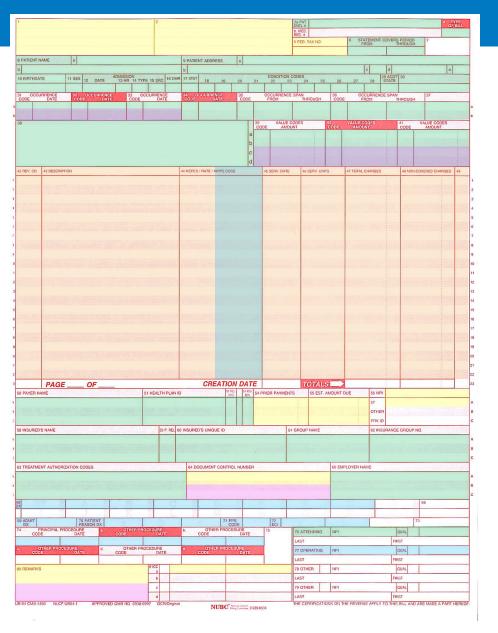




# **Institutional Claim Form**

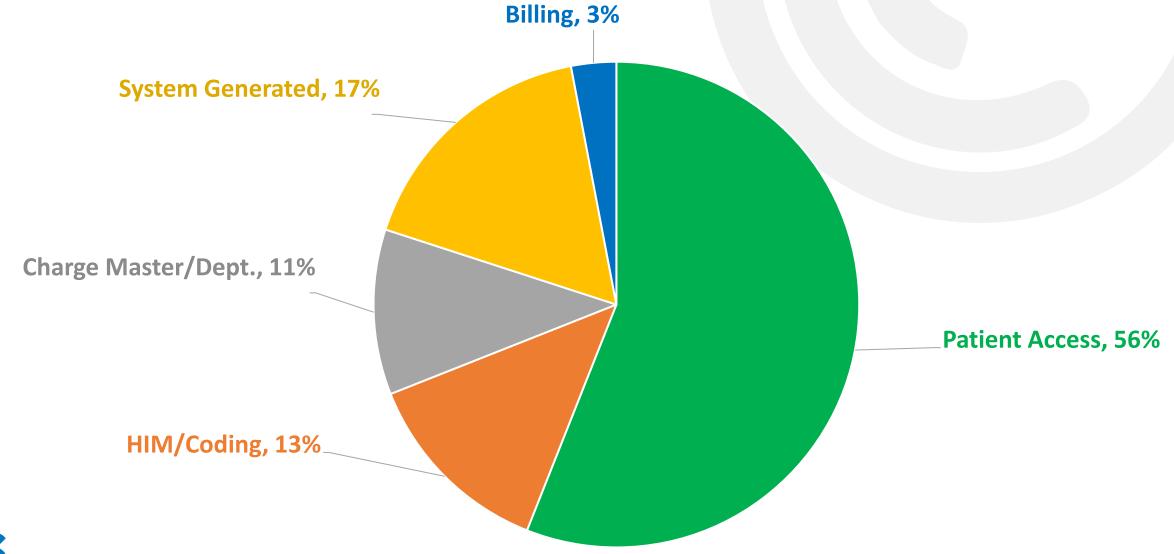
Who is responsible for completing each section of this form?







### Responsibility for Billing and Timely Collection of Revenue

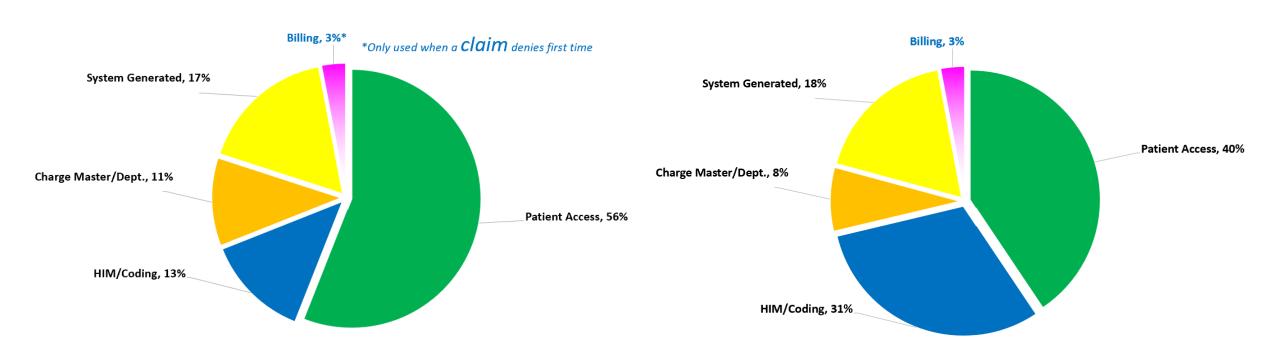




# Billing Requirements v. Denials

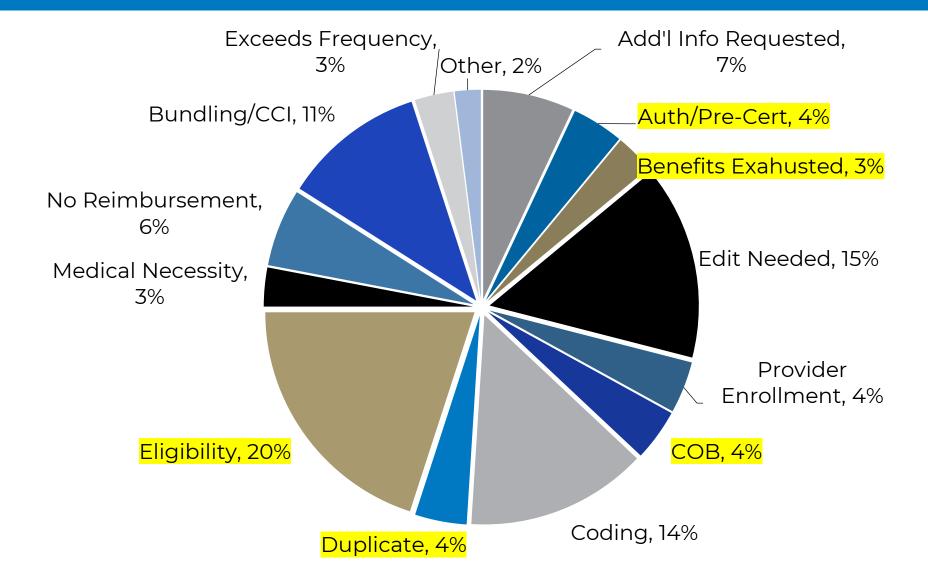
### **UB Fields by Department**

### **Denials by Department**





# **Denials by Category – First Pass Denials**





### **Patient Access**

### Engagement in Denial Prevention





- Reporting of denials by root cause and individual
- Assessment of eligibility tools and process
- Financial pre-clearance workflow and procedures
- POS Collection process
- Authorization workflow



#### **Training**

- Insurance basics & denial prevention
- Eligibility systems
- Frequency?
- Reference tools & procedures
- Shadowing/Job share
- Collection techniques



### Redesign

- Onboarding process
- Engagement in denial prevention
- Effective workflow to eliminate touches
- Financial pre-clearance procedures
- Pay structure

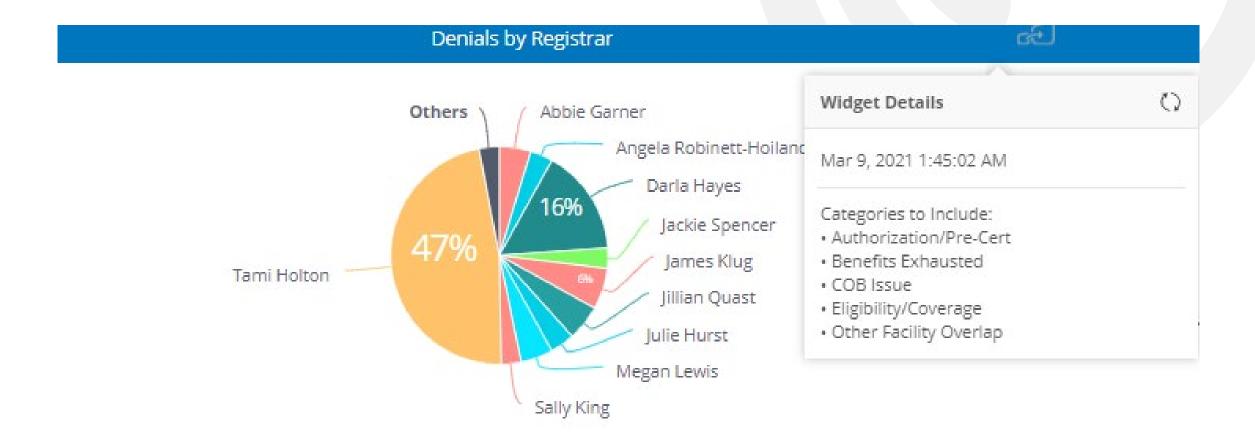


# Feedback and Reporting

- Collections based on a percent of opportunities
- Registration related denials by registrar
- Authorization by department
- Write offs root cause
- Department and individual scorecards

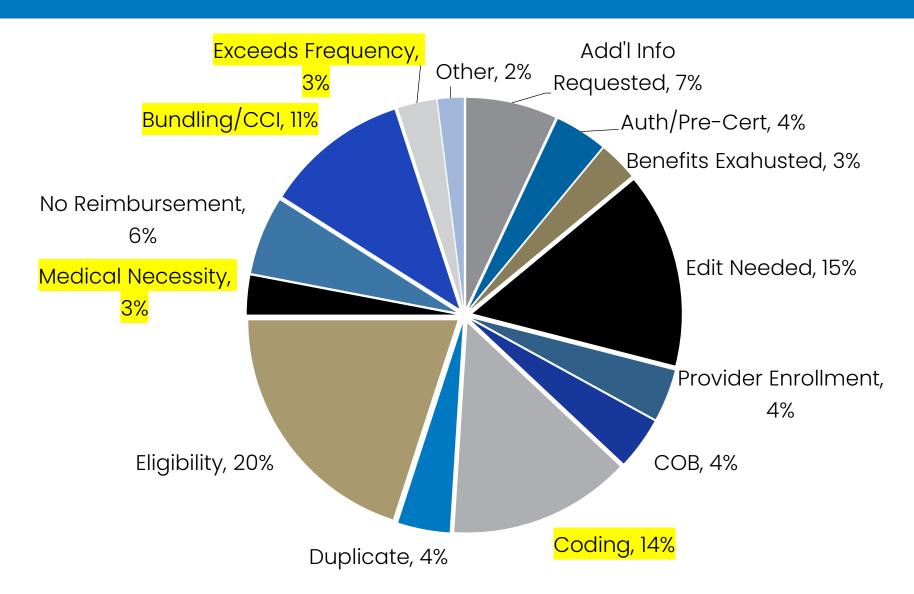


## **Denial Rate Alignment to Team Members**





# Denials by Category – First Pass Denials





### **HIM/Medical Records Department**

Engagement in Denial Prevention









### **Identify Issues**

- Reporting of denials by root cause and individual
- Assessment of coding tools and process
- Coding division of responsibility and workflow

### **Training**

- Insurance basics & denial prevention
- Coding systems
- Frequency?
- Reference tools & procedures
- Shadowing/Job share

#### Redesign

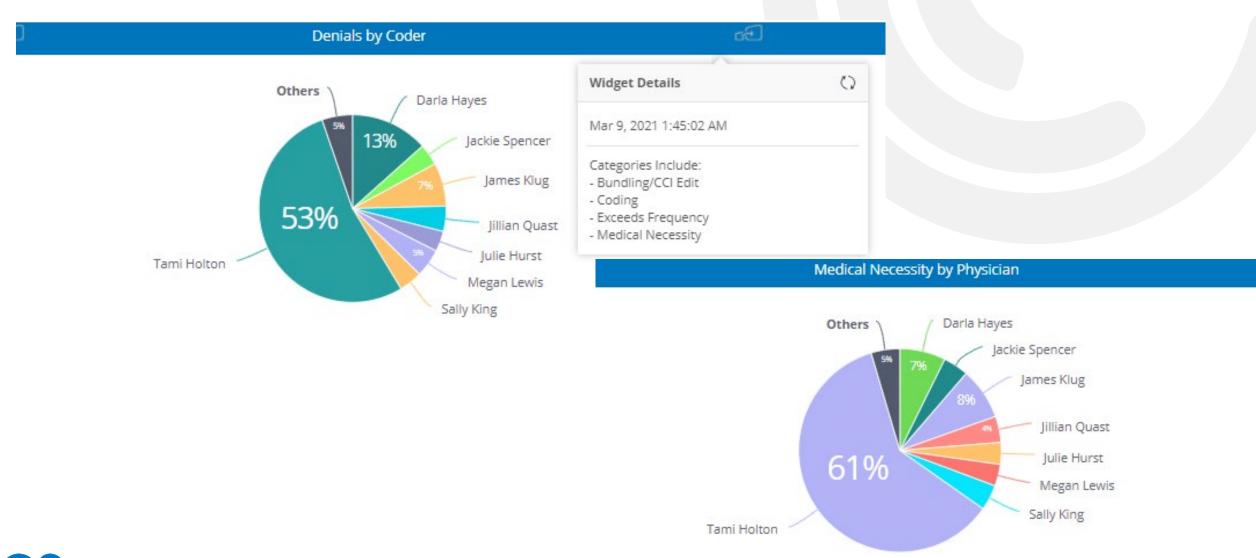
- Onboarding process
- Engagement in denial prevention
- Effective workflow to eliminate touches
- Coding denials and appeals
- Record requests

#### **Reporting and Feedback**

- Coding related denials by coder
- Medical Necessity by department and physician
- Write offs by root cause
- Department and individual scorecards



# **Denial Rate Alignment to Team Members**





### System Impact on Denials and Cash Flow

Engagement in Denial Prevention





- Eligibility tools
- Patient estimator
- Coding systems
- Claim scrubber
- Denial reporting
- Appeal tracking
- Chargemaster Issues



### Redesign

- Pre-service financial workflows using effective eligibility and patient estimator tools
- Active learning claim scrubber based on provider-specific denials
- System contracts to include deliverables based on results



### **Reporting and Feedback**

- Denial reporting by root cause
- Write offs based on root cause
- Appeal success rate
- Contract deliverables/Quarterly reviews
- Monitor First Pass Payment Rates



# First Pass Payment Rates





## Conclusion

Engaging All Revenue Cycle Departments in Denial Prevention

- Revenue cycle is not revenue unless collected
- 2 Each department within the Revenue Cycle has responsibility for collection of revenue
- 3 All departments must be engaged in denial prevention
- 4 Engagement includes regular reporting and feedback on performance

# **Questions - Thoughts**





# Contact Me

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