Standardizing Excellence

1000 Sites with a Single Voice

The Starting Line of the Patient Experience

NAHAM'S 41ST ANNUAL EDUCATIONAL CONFERENCE & EXPOSITION
<table>
<thead>
<tr>
<th><strong>Tracy Manfredo</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Presenters</strong></td>
</tr>
</tbody>
</table>

- Director, Corporate Revenue Cycle, Central Recruitment/Floater Pool Services
- 32 years of Health Care experience
- Expertise in Patient Registration, Central Scheduling, and Medical Records
- Project lead in implementation of web-based Central Scheduling software
- Involved with converting several hospitals to new ADT systems
- Graduate of the Community College of Allegheny County-Medical Office Management
- Member of NAHAM (National Association of Healthcare Access Management)
UPMC Health Systems

UPMC is a world-renowned health care provider and insurer based in Pittsburgh, PA, inventing new models of accountable, cost-effective, patient-centered care.

- The largest non-governmental employer in PA (62,000+ employees)
- Operates over 20 academic, community, and specialty hospitals and 400 outpatient sites, employs approximately 3,500 physicians, and offers an array of rehabilitation, retirement, and long-term care facilities.

UPMC is ranked #12 nationally by U.S. News & World Report
UPMC Health Systems: Annual Patient Activity

- Admits more than 287,000 inpatients and observation cases
- Sees more than 3.9 million outpatient office visits
- Cares for more than 690,000 emergency visits
- Performs nearly 189,000 surgeries
- Makes more than 690,000 home care visits
UPMC Core Values: Patient Experience

Every patient believes that every individual involved in his or her care has demonstrated dignity, respect and kindness while listening to his or her unique needs. This vision is only achieved by showing every patient in every interaction that we truly care.

The UPMC patient experience vision is built upon our values as an organization.
UPMC Revenue Cycle Services

**Before – Operational Fragmentation**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>PSD</th>
<th>Corp</th>
<th>Integrated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access, Scheduling and Support</td>
<td>Access Operations</td>
<td>Access Operations</td>
<td>Provider Call Center</td>
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<tr>
<td>Coding</td>
<td>PSD Patient Scheduling</td>
<td>PSD Patient Scheduling</td>
<td>PSD Patient Scheduling</td>
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<tr>
<td>Back Office</td>
<td>Coding /Charge Mgmt</td>
<td>Coding /Charge Mgmt</td>
<td>PSD Back Office</td>
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<td></td>
<td>PSD Insurance Verification</td>
<td>PSD Insurance Verification</td>
<td>Hospital Patient Collections</td>
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<td>Hospital Patient Collections</td>
<td>Hospital Patient Collections</td>
<td>Charity Care and MA App.</td>
</tr>
<tr>
<td></td>
<td>Hospital Insurance Verification</td>
<td>Hospital Insurance Verification</td>
<td></td>
</tr>
</tbody>
</table>
UPMC Revenue Cycle Services

After – Centers of Excellence Approach

Patient-Focused Process

Integrated Centers of Excellence **

Patient Concierge Services

Provider Business Services

Provider Coding Services

Service Level Accountability

Corporate Services

Health Services Division
The UPMC Patient Experience
Translating Core Values into Action

Welcome New Patients
Recognize Return Patients

Engage Patients in Their Next Service and Follow-up Care

KPIs: Measure Patient Satisfaction and Business Metrics

Easier Payment Management

Coaching & Counseling is Collection Strategy

Open Scheduling
When Would You Like to Be Seen?

Lead Patients to Best Possible Care

Perfect Collaboration between Financial, Clinical and Health Plan Administration

Patient Centric Experience
An evidence-based management approach

- Proactively, point of service departments are given report cards that measure:
  - Department KPIs
    - Copays, Press Ganey scores, etc.
  - Operational KPIs down to the user level
    - Check-ins by users, scheduled appointments by user, etc.

Quality assurance checks are done via randomly monitored phone calls and department site visits. This data is available monthly for all departments to see and the data is shared among peers.
Centralized Recruitment Overview

Recruit, Place, Onboard & Train Access Staff to Support a Patient Centric Revenue Cycle

Direct Hires

Staff are placed directly into a permanent role

Floater Pool

Staff are placed in a pool of access staff to cover temporary needs
Centralized Recruitment – Who are the customers?

• Central Contact Center
  • Scheduling
  • Customer Service
  • Answering Service

• Physician Services Division Front desks in Allegheny County
  • Providing service at more than 340 unique locations

• Emergency Department & Same Day Surgery Front Desks

• Floater Pool
  • Staff trained to work on specific projects and backlogs to minimize the use of overtime
  • Project work included charge edits and denials, charge entry, customer service and pre-registration
Centralized Recruitment Mission and Scope

**Goals**
- Provide consistency in staffing and training
- Contribute to overtime reduction/ cost savings
- FMLA
- Simplified recruitment process
- Minimize time frame of vacancies

**Services**
- Recruitment
- On-boarding
- Intermittent coverage
- Staff management/ Placement

**Job Titles**
- PIC I
- CCS I
- Office Assistant

**Place of Service Coverage**
- Physician Services Division
- Emergency Department
- Same Day Surgery
- Central Contact Center
- Hospital-Based Clinics, Ancillary Services, CRS, and Cancer Centers
Centralized Recruitment Advantages

**Applicants**
- Simplify interview process
- Reduced time to placement
- Consistent training/orientation

**Human Resources**
- Applicants one-touch processing
- Streamlined workflow
- Collaboration instead of competition

**Site Management**
- Recruitment duties alleviated
- Appropriate candidate-opportunity matching
- Cost-effective staffing
Centralized Recruitment Workflow

1. Applicants perform an online assessment
2. Qualified applicants undergo phone screening by HR
3. Centralized Recruitment interviews & places candidates
   - Candidates are recommended for Direct Hire or Floater Pool
4. HR extends offer, completes background screening and schedules orientation
5. Site managers approve all direct hire offers
Floater Pool Services Overview

Floater Pool Services
- Recruitment
- On-boarding
- Placement

Floater Pool Coverage
Allegheny County & beyond
- Physician Office
- HBC
- Emergency Department
- Same Day Surgery
- Ancillary services
- Central Contact Center
- Other BUs Patient Access sites (i.e., CRS, Cancer Centers)

A cohesive approach to meeting Patient Access staffing demands

Employment Status
- Full time
- Part time
- Casual
- Student Worker

HR/Recruitment
- Physician Services Division
- Hospital
- Other BUs

Training
- Epic
- Medipac

Service Excellence
- Insurance
Centralized Recruitment – Success Factors

- Leadership
- Relationship Management
  - Human Resources
  - Training
  - Customers
- Technology
- KPIs
Centralized Recruitment & Training

- Onboarding Consistency
- Ensuring staff receive necessary job skills and training for success
- Training
  - Scheduling & Billing Systems
  - Customer Service/soft skills
  - Insurance fundamentals
  - Upfront self-pay collections
  - Cross training and site/skill specific training
  - Mandatory ULearn
- Orientation Checklist
- Policy/Procedure Review
- IMS Requests/System Security
Centralized Recruitment & The Customers

Open communications with site and administrative management: *Daily Huddles*

- **Survey Monkey - Customer Surveys**
  - Survey questions quantify and qualify experience over time
  - Offices requesting floaters offered satisfaction survey based upon assignment type

- **Survey Monkey - Staff Surveys**
  - Orientation for Floaters
  - Floater Pool Shiftboard
  - Floater Pool Experience
  - Floater Pool Assignment Review
  - Direct Hire Survey

Ongoing communication with site management regarding needs, volumes and staff performance along with expanded Survey Monkey utilization.
Centralized Recruitment Services & Technology

Shiftboard staff scheduling software

- Complete Web-based application available from anywhere 24/7/365
- Geographically appropriate staff assignments
- **Enhanced Communication**
  - Alerted via email and/or text message immediately on any schedule changes
  - Every employee has a profile that holds contact information, skills, certifications, notes, etc.
- **Eliminate Manual Processes**
  - Eliminated the need of multiple spreadsheets and manual reports
  - Automated reporting for staff schedules and office manager reports
- **Detailed Reporting**
  - Automated, custom reports that can be generated to highlight trends in staffing
  - Reports on: employee hours scheduled, available hours, utilized vs. available hours, Department hours utilized and days spent in floater pool
Centralized Recruitment KPIs

Recruitment Tracking
- Position open/filled
- Days to fill open position in pool/site
- Select International
- Days to direct hire

Interview Tracking
- Interviews per day/open position
- Interviews completed per week/FPS management
- Monthly measure utilizing working days

Staff Tracking
- Biweekly Agent Report Cards for CCS Agents
- PIC Report Cards (Front Desk Assessment Data)

Resource Allocation
- Staffing request fulfillment/denial rate by request type
- Casual Staff availability/deployment rate

Service Satisfaction
- Customer base
- Staff
SUPPORTING AN AGILE BUSINESS MODEL

*Strategic Collaborations*: Centralized Recruitment & Central Contact Center
Central Contact Center

Workforce Management

The Patient

Central Scheduling Contact Center

Decentralized Ancillary Schedulers

Decentralized Department Schedulers

“Virtual Call Center”
Contact Center Overview

- 34/7 Consumer Contact Center
- 3.5 Million calls handled per year
- 5,657 Online Chat interactions per year
- 129 Virtual Call Centers
## Services & Initiatives: Central Contact Center

### Scheduling
- Telemedicine
- Pre and Post Reg
- Patient Quality Outreach

### Answering Service
- Servicing over 170 departments
- Answers for 1,441 clinical providers
- 24/7 operation

### Customer Service
- Hospital Customer Service
- Physician Customer Service
- Cancer Center Customer Service
- Customer Service for MSO’s
- Self Pay Collections

### Consumer Referral Service
- UPMC Find a Doctor line
- UPMC Marketing and Research line
Services & Initiatives: Central Contact Center

Discharge Planning
• Contact patients to schedule follow-up PCP and specialist appointments post discharge
• Specific initiatives include various patient populations; most notable is the COPD, CHF, CAP and AMI patient population

Welcome Calls
• All New Patients to UPMC
• Provide directions and payment expectations

Price Estimation Team
• Provide expected patient liability in advance of service
• Increase ability to collect earlier in the revenue cycle, reducing overall cost to collect
• Increase overall self pay cash flow and reduce uncompensated care

UPMC Insurance Hotlines
• Insurance Question Hotline
• Senior Insurance Line
• Government Relations Line
• Physician Hotline

Financial Assistance
• Assist patients with self-pay liability
• Mini-screening for Medical Assistance eligibility
Implementing New Initiatives
Standardized Agility in a Dynamic Healthcare Market

Work Force Management

Centralized Recruitment Model

New Initiative: Insurance Hotline

Scheduling

Customer Service
Innovative Technology: Overview

- Epic CRM
- Epic Scheduling Questionnaire
- NICE IEX
- MyUPMC
- Microsoft CRM
- Agent Scheduling System
- Telephonic Patient Outreach
- Call Monitoring and Quality Assurance Software
Epic Questionnaires

- Used as a decision support tool by the Contact Center to allow cross training of scheduling agents

- Enables scheduling agents to schedule for 20+ diverse sub specialties. Including: Orthopaedics, ENT, Neurosurgery, and Dermatology
Questionnaires: Facilitating Efficient and Effective Care

The entered Visit Type was ORTHO UPP SHOULDER ELBOW QNR [70484]. It has been changed.

The following visit type will be scheduled:

NEW PATIENT [6]

Search for first available timeslot using the ORTHO SHOULDER subgroup. If no availability in the ORTHO SHOULDER subgroup, search 2nd using the ORTHO GENERAL ORTHOPEDIST subgroup.
Always enter Reason for visit in the Appt Notes/be as specific as possible with body part/side/insurance coverage/prior XRays and films
CRM (Customer Relationship Management)

- Epic feature utilized by the Contact Center to allow a concise communication pathway between Patient Access Specialists, Centralized Billing and decentralized department staff

- CRM topics used to kick off backend automation. For example, patients removed or added to work queue.

- Provides central location for documentation of patient contact, call activity and resolution
NICE IEX Workforce Management

- Provides accurate staffing and capacity planning
- Long and short-term forecasting
- ‘What-if’ analysis
- Real-Time and Intra-day change management
- Historical adherence and reporting
- Centrally managed by Workforce staff
- Ability to plan and staff around shrinkage
Digital Business Office: Enabling Patient Preference and Convenience

Patient Portal Allows Self-Services

Requested items/actions instantly sent back to patient

Systems automatically updated with patient updates

Automatic work queue and work flow initiation
Innovative Technology: Digital Business Office

Directly schedule appointment

Request, cancel, or reschedule appointment
- Chat with scheduling agents to cancel and reschedule appointments

Pre-registration
- Pre-registration forms for review and updates prior to appointment

eStatements and Payments
- View current statements and pay patient liability

In Progress
- Utilize real time notifications and text messages to:
  - Alert patient to wait times or traffic issues
  - Remind patient of copay and documentation needed for visit
  - Online check-in day of appointment
- Set up & manage payment plans
- Expand chat and online functionality to include cancellation and rescheduling
Analytics Drive Process Improvement: Scheduling & Monitoring Staffing Levels

Live Intra-day monitoring
CMS Interval reports are delivered every 3 hours:

### Monthly Agent Report Card

<table>
<thead>
<tr>
<th></th>
<th>QA Score</th>
<th>90%</th>
<th>90%</th>
<th>98%</th>
<th>95%</th>
<th>97%</th>
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</thead>
<tbody>
<tr>
<td>Adherence</td>
<td>88%</td>
<td>88%</td>
<td>94%</td>
<td>96%</td>
<td>96%</td>
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<tr>
<td>Other Job Duties</td>
<td>2</td>
<td>2</td>
<td>1.0</td>
<td>1.0</td>
<td>0.8</td>
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<tr>
<td>Scheduling</td>
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<td>420</td>
<td>323</td>
<td>299</td>
<td>293</td>
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<tr>
<td>Overflow AHT</td>
<td>111</td>
<td>180</td>
<td>74</td>
<td>60</td>
<td>52</td>
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<tr>
<td>Overflow Calls Taken</td>
<td>918</td>
<td>543</td>
<td>837</td>
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<tr>
<td>Consumer Referral AHT</td>
<td>359</td>
<td>360</td>
<td>319</td>
<td>295</td>
<td>263</td>
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<tr>
<td>Consumer Referral ACW</td>
<td>107</td>
<td>150</td>
<td>87</td>
<td>67</td>
<td>58</td>
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<tr>
<td>Consumer Referral Calls Taken</td>
<td>186</td>
<td>101</td>
<td>162</td>
<td></td>
<td></td>
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<tr>
<td>Televox AHT</td>
<td>407</td>
<td>510</td>
<td>388</td>
<td>391</td>
<td>360</td>
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<tr>
<td>Televox ACW</td>
<td>113</td>
<td>312</td>
<td>101</td>
<td>140</td>
<td>63</td>
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<tr>
<td>Total Calls Taken (All Skills)</td>
<td>1368</td>
<td>764</td>
<td>1259</td>
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<tr>
<td>Outbound Calls</td>
<td>311</td>
<td>233</td>
<td>248</td>
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<tr>
<td>#N/A</td>
<td>102</td>
<td>202</td>
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</table>
### Customer Service CRM Reporting for Operations

Customer Service provides Access feedback on why patients are calling, and how future calls may be prevented. Tutorials/training sent with report cards.

<table>
<thead>
<tr>
<th>SUB TOPIC</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>6 Mo Trending</th>
<th>6 Mo Avg</th>
<th>6 Mo Min</th>
<th>6 Mo Max</th>
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<tbody>
<tr>
<td>1 - Incorrect Copay Collected</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1.17</td>
<td>1</td>
<td>2</td>
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<tr>
<td>19 - Duplicate Charges</td>
<td>3</td>
<td>16</td>
<td>8</td>
<td>11</td>
<td>11</td>
<td>5</td>
<td>9.00</td>
<td>3</td>
<td>16</td>
<td></td>
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<tr>
<td>46 - Quality of Care</td>
<td>5</td>
<td>12</td>
<td>14</td>
<td>14</td>
<td>10</td>
<td></td>
<td>11.00</td>
<td>5</td>
<td>14</td>
<td></td>
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<tr>
<td>48 - Wait Time at Office</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.00</td>
<td>1</td>
<td>1</td>
<td></td>
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<tr>
<td>52 - Incorrect Insurance Information</td>
<td>279</td>
<td>298</td>
<td>333</td>
<td>348</td>
<td>253</td>
<td>240</td>
<td>291.83</td>
<td>240</td>
<td>348</td>
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<tr>
<td>7 - Copay Not Collected on Date of Service</td>
<td>16</td>
<td>47</td>
<td>13</td>
<td>4</td>
<td>2</td>
<td>5</td>
<td>14.50</td>
<td>2</td>
<td>47</td>
<td></td>
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<tr>
<td>8 - Coordination of Benefits Issue</td>
<td>360</td>
<td>300</td>
<td>290</td>
<td>244</td>
<td>178</td>
<td>133</td>
<td>250.83</td>
<td>133</td>
<td>360</td>
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</tr>
</tbody>
</table>
Strategic Collaborations: Centralized Recruitment & Point of Service

ENSURING A SINGLE VOICE
Patient Access Regional Directors

Standardizing Point of Service Across Culturally and Geographically Disparate Sites
Patient Access Regional Directors

Helping Patients and Collaborative Partners Navigate Patient Access

- Next Appointment
- In/Out of Network
- Wait Times
- Copays/Deductibles
- Information Collection
- Rules & Regulations
- Patient Liability
- Add On Services
- Follow-up
- Billing
- Coding
- Charge Entry

Payor Contracts

naham
The Role of the Patient Access Regional Director

- Participate in the PFCC workgroups by service line

- Cross-train all veteran staff to be utilized in all Access settings within Region on EPIC/Medipac

- Develop models of throughput
  - New/Scheduled
  - Return/Scheduled
  - New Unscheduled
  - Return Unscheduled

- Implement self service tools
  - Self Check in (Tablets)
  - Express Kiosks
  - My UPMC

- Consumer Centric Revenue Cycle Workflow Standardization & Simplification

- Performance KPIs by Institution, Geographic Location, Specialty/Person

- PSD KPIs:
  - Copay Collections & UPAY
  - My UPMC Activations
  - Accurate Cell Phone & Email Check-in & Scheduling Volume
  - Referrals
  - CRMS
  - Press Ganey Scores
  - Privacy and TPO Compliance
  - Template Productivity
  - Edits, Denials & Charge Posting
  - 72 Hour Scheduling
  - Front Desk Q/A

- Hospital KPIs:
  - Copay Collections
  - My UPMC Activations
  - Accurate Cell Phone #
  - Accurate Email
  - Primary Care Physician Press Ganey Scores
  - Customer Service CRM Codes

- Root Cause Analysis

- Consistent Staff Hiring/Training/Placement

- Workforce Management and Volume Based Staffing

- Trending Analysis

“Learns” from analysis

Improvement and Progress of these trends

All Access positions recruited, screened, trained and placed from Centralized Recruitment by Region

All new hires cross trained in Epic and Medipac

Implement self service tools

Participate in the PFCC workgroups by service line
Confidence in the UPMC Patient Experience
Excellent Customer Service
Reliable Outcomes

Materials & Resources for Patient Financial Education
Most insurance plans have out of pocket costs that may result in a copay, deductible or a maximum out of pocket.

If you like, we can assist you in contacting your insurance company to better understand your health benefits.

We have a financial counselor in the facility that can explain your out of pocket expenses or I can request an appointment through our patient concierge service to go over your expenses at a convenient time.

We know you were coming and are completely prepared for your visit.

I see you were in the ED last night. I have all of your information.

Welcome back!

Thank you for choosing UPMC!

You are in our thoughts.

Thank you for being a UPMC Health Plan member. I have everything ready for you.

Are you satisfied with your service today?

Have I answered all of your questions?

Hello Ms. Jones, nice to see you again!

When would you like to be seen?

You don't think you can afford to pay? We have financial counselors who can assist you with reviewing options. What time works best for you so that I may have them contact you?

Are you satisfied with your service today?

When would you like to be seen?

You don't think you can afford to pay? We have financial counselors who can assist you with reviewing options. What time works best for you so that I may have them contact you?

Yes you can. I see you were in the ED last night. I have all of your information.

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Welcome back!
Centralized Recruitment: Meeting Site-Specific Needs with Standardized Training

- Daily communication between Point of Service managers, Regional Directors & Centralized Recruitment
- Staff cross-training on Hospital & Physician systems: Epic & Medipac
- On-site training at both Hospital & Physician front desks
- Standardized skills, training & processes across all UPMC locations: “Language of Access”
Goals: Redesigning Training to Advance the Regional Access Model

Before

5 days of classroom-based training

Limited geographical and temporal flexibility

After

3 days of Computer-Based and one-on-one training paired with On-Site exposure

✓ Computer-Based Training paired with a remote-based trainer

✓ Toolkits: Stand-Alone Modules paired with specialty add-ons to tailor training to specific job functions

✓ On-Site Exposure & Mentoring integrated into training schedule to solidify skills with real world exposure

Provides Centrally Recruited Staff the Flexibility & Customization Needed to Promote Regional Access While Maintaining Standardization
A Day in the Life of a Regional Director

Future State: Volume Based Staffing

8:00 am

High Volumes in Same Day Surgery

No appointments are scheduled in two physician offices on Mercy Campus before 12pm today

Move physician front desk staff to same day surgery from 8:00 - 9:00am

12:00 pm

ED volumes are low on Thursdays

High volumes scheduled in physician offices from 12pm – 2pm

Move ED front desk staff to high volume physician’s offices from 12:00 – 2:00pm

✓ Regional Directors know how many staff are at every front desk
   Access to all front desk staff schedules
✓ Staff have appropriate skills
   Cross trained in Epic and Medipac
Front Desk KPIs

KPIs measured, reported and trended centrally. Business Units held accountable.

- Registration Updates
- Check In Volume
- Same Day Appointment Volume
- Appointments by Phone Volume
- Total Appointments Scheduled
- Daily Average Check In
- Daily Average Same Day Appts
- Patient Wait Time
- Patient Liability Copay, Coinsurance, Deductible, Prepayment, other patient payments
- 72 Scheduling
- Charge Posting Reconciliation
- Validation and verification of Privacy/TPO/HIE on Account
- MyUPMC Adoption
- Concierge Form Usage
- QA Results
- Utilization of FYI Notes
- Offered concierge services
- Offered to schedule follow up appointment
- Advised of MyUPMC activation number
## Encounter Charge Posting Efficiency & POS Cash Collections

<table>
<thead>
<tr>
<th></th>
<th>Encounters</th>
<th>Chg in 0 - 5</th>
<th>Chg in &gt; 5</th>
<th>No Charge</th>
<th>% &lt; 5 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>UPP</td>
<td>145,336</td>
<td>125,574</td>
<td>14,490</td>
<td>5,038</td>
<td>86.40%</td>
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<tr>
<td>CMI</td>
<td>95,177</td>
<td>83,813</td>
<td>9,438</td>
<td>1,852</td>
<td>88.06%</td>
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<tr>
<td>RFP</td>
<td>8,348</td>
<td>7,736</td>
<td>538</td>
<td>74</td>
<td>92.67%</td>
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<tr>
<td>UPMC HAMOT RHMS</td>
<td>23,718</td>
<td>21,974</td>
<td>1,622</td>
<td>110</td>
<td>92.65%</td>
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<tr>
<td>Total</td>
<td>272,579</td>
<td>239,097</td>
<td>26,088</td>
<td>7,074</td>
<td>87.72%</td>
</tr>
</tbody>
</table>

### Jul 14

<table>
<thead>
<tr>
<th></th>
<th>Total Due</th>
<th>Total Pmt</th>
<th>Collection %</th>
</tr>
</thead>
<tbody>
<tr>
<td>UPP</td>
<td>$1,269,474</td>
<td>$944,973</td>
<td>74.44%</td>
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<tr>
<td>Other</td>
<td>$318,209</td>
<td>$90,732</td>
<td>28.51%</td>
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<tr>
<td>CMI</td>
<td>$713,966</td>
<td>$605,733</td>
<td>84.84%</td>
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<tr>
<td>Other</td>
<td>$153,462</td>
<td>$23,582</td>
<td>15.37%</td>
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<tr>
<td>RFP</td>
<td>$55,139</td>
<td>$49,430</td>
<td>89.65%</td>
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<tr>
<td>Other</td>
<td>$5,918</td>
<td>$2,377</td>
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<tr>
<td>UPMC HAMOT RHMS</td>
<td>$173,210</td>
<td>$135,738</td>
<td>78.37%</td>
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<tr>
<td>Other</td>
<td>$40,202</td>
<td>$8,143</td>
<td>20.26%</td>
</tr>
<tr>
<td>FAYETTE PHYSICIAN NETWORK</td>
<td>$21,551</td>
<td>$16,963</td>
<td>78.71%</td>
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<tr>
<td>Other</td>
<td>$3,328</td>
<td>$2,138</td>
<td>64.24%</td>
</tr>
<tr>
<td>ALTOONA</td>
<td>$174,746</td>
<td>$133,145</td>
<td>76.19%</td>
</tr>
<tr>
<td>Other</td>
<td>$6,763</td>
<td>$7,461</td>
<td>110.32%</td>
</tr>
<tr>
<td>EPN</td>
<td>$45,578</td>
<td>$28,359</td>
<td>62.22%</td>
</tr>
<tr>
<td>Other</td>
<td>$2,022</td>
<td>$1,811</td>
<td>89.56%</td>
</tr>
<tr>
<td>Total</td>
<td>Other</td>
<td>$529,904</td>
<td>$136,244</td>
</tr>
<tr>
<td></td>
<td>Copay</td>
<td>$2,453,664</td>
<td>$1,914,341</td>
</tr>
</tbody>
</table>

- naham
You can’t manage what you don’t measure

CENTRALIZED RECRUITMENT OUTCOMES
Creating a Streamlined Hiring Process

Metrics
July 2014 through January 2015

• 96 Direct Hires to various hospital and physician practices
• 62 Floater pool hires
• 62 Permanent placements from the floater pool to various hospital and physician practices
• 7 Internal PIC transfers
• 38 New insurance line contact center specialist placements
• 406 Face to Face interviews, Average 3.0 per day
Direct Hires: Accelerated Staffing

**Average Open Position Duration**

<table>
<thead>
<tr>
<th>Month</th>
<th>Sum of Average Days from Vacancy-Placement</th>
<th>Sum of Average Days from Created-Placement</th>
<th>Sum of Number of Open Positions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan-14</td>
<td>21</td>
<td>68.95</td>
<td>21</td>
</tr>
<tr>
<td>Feb-14</td>
<td>18</td>
<td>57.94</td>
<td>18</td>
</tr>
<tr>
<td>Mar-14</td>
<td>19</td>
<td>46.84</td>
<td>19</td>
</tr>
<tr>
<td>Apr-14</td>
<td>19</td>
<td>38.65</td>
<td>19</td>
</tr>
<tr>
<td>May-14</td>
<td>13</td>
<td>30.82</td>
<td>13</td>
</tr>
<tr>
<td>Jun-14</td>
<td>12</td>
<td>33.50</td>
<td>12</td>
</tr>
<tr>
<td>Jul-14</td>
<td>23</td>
<td>39.27</td>
<td>23</td>
</tr>
<tr>
<td>Aug-14</td>
<td>23</td>
<td>34.46</td>
<td>23</td>
</tr>
<tr>
<td>Sep-14</td>
<td>29</td>
<td>45.80</td>
<td>29</td>
</tr>
<tr>
<td>Oct-14</td>
<td>35</td>
<td>43.85</td>
<td>35</td>
</tr>
<tr>
<td>Nov-14</td>
<td>22</td>
<td>46.60</td>
<td>22</td>
</tr>
<tr>
<td>Dec-14</td>
<td>20</td>
<td>43.00</td>
<td>20</td>
</tr>
<tr>
<td>Jan-15</td>
<td>38</td>
<td>39.25</td>
<td>38</td>
</tr>
</tbody>
</table>
Direct Hires: Increased Demand in Services

Number of Open Position Requests per Month

Jan-14  Feb-14  Mar-14  Apr-14  May-14  Jun-14  Jul-14  Aug-14  Sep-14  Oct-14  Nov-14  Dec-14  Jan-15

Number of Open Position Requests

- Total
Increased Overall Placement

**Total Placements by Floater Pool**

<table>
<thead>
<tr>
<th>Month</th>
<th>Direct Hire</th>
<th>Floater Pool</th>
<th>Internal OCR</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>June</td>
<td>4</td>
<td>5</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>July</td>
<td>8</td>
<td>6</td>
<td>1</td>
<td>14</td>
</tr>
<tr>
<td>August</td>
<td>4</td>
<td>12</td>
<td>3</td>
<td>16</td>
</tr>
<tr>
<td>September</td>
<td>21</td>
<td>13</td>
<td>1</td>
<td>35</td>
</tr>
<tr>
<td>October</td>
<td>8</td>
<td>8</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>November</td>
<td>11</td>
<td>8</td>
<td>3</td>
<td>22</td>
</tr>
<tr>
<td>December</td>
<td>20</td>
<td>21</td>
<td>1</td>
<td>42</td>
</tr>
<tr>
<td>January</td>
<td>22</td>
<td>5</td>
<td>1</td>
<td>28</td>
</tr>
</tbody>
</table>
Enhanced Customer Satisfaction

Office Floater Feedback - Percent of Questions Answered with Meets or Exceeds Expectations

*Increased recruitment delayed December survey processing
Lessons Learned

• Department Buy-in
  • Ensure departments appreciate centralized work efforts

• Open Communication
  • Develop a positive rapport with managers
  • Avoid silos

• Designated staff
  • Talent Acquisition: Turn positions around quickly
  • Centralized Recruitment team: Know the ins and outs of each customer

• Patience
  • Remember change doesn’t happen overnight
Looking Ahead

• Shiftboard direct entry: Allow managers to view across their service line, identifying front desk needs and assisting with staff movement for coverage.

• Volume-based staffing: Use Central Recruitment as our Patient Information Coordinator Traffic Control.

• Select International process for Contact Center Specialist 1 positions. Go live targeted for July FY16.

• Expansion of Office Assistant recruiting to Community Medicine Inc (CMI).

• Potential expansion for recruitment of revenue cycle billing staff.
"There's a way to do it better—find it."

— Thomas Edison
Questions?