A New Blueprint for a Front-End Revenue Cycle Model

Learning Lab
Wednesday, April 26
10:30 - 11:45 am
About Our Speakers

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AccuReg Founder & CEO

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AccuReg Chief Revenue Officer
Key Performance Indicators for "Best" Patient Registration Processes Recommended by NAHAM AccessKeys™

- **Scheduled Patient Rate**
- **Completed Order Rate**
- **Pre-Registration Rate**
- **Completed Pre-Reg Rate**
- **Estimate to Registration Rate**
- **Collection Opportunity Rate**
- **Pre-Denial Resolution Rate**
- **RCM OUTCOMES**

**Outcomes**
- 80% of expected registrations are scheduled >48hrs prior to arrival
- 50% of scheduled patients with electronic orders have complete data; demographic, insurance and CPT/ICD
- 95% of Scheduled Patients Pre-Registered at Min Tier 1
- 50% of Pre-Registered Patients Completed at Tier 4
- 60% of Estimated Dollars Collected Pre-Service
- 2% Collections to NPR
- <2% FEFP Denials*

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Mission: Deliver Three Primary Objectives

- Increase Cash
- Prevent Denials
- Patient Exp.
Why Change the Current RCM Model?

- Rarely delivers three primary objectives (cash, denials, PX)
- Market forces: reform and liability shift
- Consumerism: patients demand information up-front
- RCM Cost and Risk is higher to collect than FE RCM model
- Because we CAN… Patient Access Managers and Teams
- It’s more fun to bring change and succeed
- Everyone makes more money

Before ACA

- 90% Payer
- 10% Patient

After ACA

- 30% Payer
- 70% Patient
How Much Change is Required? Where Are You Now?

- Use NAHAM’s AccessKeys and Benchmarks to assess:
  1. Current state of your FERC performance (baselines)
  2. Productivity of your people
  3. Effectiveness of your processes
  4. Efficiency of your systems
- Set target performance goals
  - Identify the metrics to reach your RCM objectives
Be Clear About What You Want to do and Make a Decision

• **Refresh** – focus on People OR Process OR Technology, but not all three

• **Overhaul** – focus on all three aspects, do thorough gap assessment, start making changes

• **Decide and prepare** yourself and everyone around you
Technology brings:

*Efficiency to Process*

*Productivity to People*

5 Opportunity Points in the Patient Access Experience®
Case Study: One Example of a Facility Going Through Front-End Revenue Cycle Transformation

Magnolia Regional Health Center is a 200 bed acute care community hospital that is jointly owned by the City of Corinth and Alcorn County, Mississippi and is fully accredited by The Joint Commission.

MRHC has been in existence since 1965, and provides care to patients in Alcorn County, the three surrounding counties in northeast Mississippi and three counties in southern Tennessee.
Current State RCM vs Desired State: FE RCM Model

Magnolia’s Goal: $1M in POS Collections

- No Pre-Registration
- Small group doing OP Surgery registrations
- No Standard POSC policy or processes
- Major change in Patient Access Experience®

Deonne Henry, VP of Revenue Cycle and
Brian Craven, CFO and Senior Vice President of Finance
Assessment to Make Changes

Improve the Speed and Accuracy of Every Registration

• Leverage highly experienced patient access staff
• Utilize the AccuReg best-in-KLAS technology tools
• Provide state-of-the art phone system with recording and reporting capabilities
• Standardize the pre-registration process
• Implement NAHAM best practices & AccessKeys
• Provide transparent reporting
Scheduled Patient Concierge™ Registration Process

- Receive order via the scheduling feed
- For all scheduled outpatient and same-day surgery patients
- Call all patients – regardless of estimate or balance

- Demographics
- Verify Insurance
- COB
- MSP Questionnaire
- Correct account issues

- Contact the patient via phone call
- Gather and GIVE information to the patient
- Record phone calls for quality
- Answer questions

- Provide patient estimate
- Offer discount / Payment plans
- Collect and process payment
- Update hospital ADT system

- Fast Track Registration
- Empty the waiting room
- Flag accounts for registrar due to account issues
Results: Pre-Service Collections

Total Collected: $352,679

- November: $58,012
- December: $87,070
- January: $103,967
- February: $103,629
Results: Eligibility Denials

50% Decrease
Results: Patient Experience Scores

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Options for Pre-Registration Process

Inside Pre-Registration Team
- Hiring – labor pool
- Turnover – time and cost
- Compensation with benefits
- Training – systems and processes
- Customer service skills
- Financial counseling

Outside Pre-registration Team
- Highly experienced patient access staff
- Best-in-KLAS technology tools
- State-of-the-art phone system with recording capabilities
- NAHAM Tier 4 pre-reg processes
- Executive dashboards
- Reporting visibility at facility/department/registrar levels

Cost / Risk Analysis

If complexity is high...
How to Transform RCM into a Front-End Driven RCM Model

• Comprehensive approach; people, process and systems
• The Front-End Revenue Cycle Blueprint Strategy
  • Identify the largest opportunities (Layers)
  • Set baselines and targets for each layer
    (use AccessKeys and Benchmarks)
  • Work in Sequence – that builds on each success for greatest impact over time
• Apply best practices to people, process and systems
• Partner for people, process and technologies that are;
  • High in complexity, cost or risk to do internally
  • Outside the core competency of a healthcare provider
  • Within the core competency of what you need done
  • Aligned with your vision and mission
Questions and Answers

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