

Delivering an Efficient Revenue Cycle Management to the Client

OVERVIEW & BUSINESS NEED

The Client is a federally qualified healthcare center with 13 locations in CA, USA. All sites operate round the year and provide an array of primary, preventive care and supportive services.

These services are provided to an underserved population, including migrant and seasonal farm workers. The Client's core requirement was to improve the functioning of its internal billing operation.

The objectives identified were as under:

- Address reasons for delays in claim submissions
- Minimize mounting outstanding medical bills
- Improve declining collections
- Curtail rising billing cost
- Decrease the denials

RELATIONSHIP SUMMARY

The mutual journey of the RSI and the client began in 2005. During that time, the client was facing discrepancies and delays in their in-house billing operations. After a thorough understanding of the challenge, RSI took over the client's entire Revenue Cycle Management (RCM) functions for its medical, dental and hospital facilities.

SOLUTION

RSI implemented an efficient Revenue Cycle Management (RCM) for overcoming the limitations of the client's existing billing operation. RSIsupported RCM provided the following solution:

- Streamlined the client's existing revenue cycle management
- Regularized claim submissions
- Reviewed electronically posted charges on a daily basis
- Compiled missing encounter reports
- Performed a monthly analysis of denials
- Provided a manual review of electronically posted checks

- High-intensity insurance follow-ups done to reduce denials and improve collections
- Adequate staffing to reduce turn-around-time from 15 days to 48 hours
- Provided an efficient RCM to reduce over-all costs by 25%
- Helped in improving the client's collection percentage by 12%

KEY HIGHLIGHTS

- Reduced turn-around-time from 15 days to 48 hours
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