



Multi-Location Cardiology Practice in NJ*
Through a billing company in MI*

* Practice & Billing Company name withheld on request

Client Profile

Providers

19 including both full-time & part-time

Practice Specialty

Cardiology

Technology Profile

Partly on AdvancedMD, partly on proprietary software; half-way through in migrating to AdvancedMD

Practice Highlights

Multi-location with doctors visiting multiple locations; migrating software; last billing manager left suddenly; excessive AR and no track of billing or payment posting

Billing Company Highlights

Billing company bagged this large deal not knowing what they were heading into; found more mess as they peeled the onion; not enough staff to get the house in order

Abstract:

The practice tried to do billing in-house in the US, then tried running its own center off-shore and failed miserably on both occasions. The practice was losing the race against time when the billing company signed up the client.

However, the billing company also didn't have resources or expertise in-house to clean-up the mess comprising of over \$15 million in AR, over 5,000 unbilled visits, thousands of dollars in unapplied payments, and virtually no cash inflow.

TruworthRCM was called in to manage the Interim Revenue Cycle Management. Truworth cleared the mess, setup the SOPs and within 8 months, the practice was turned on its head.

TruworthRCM saves sinking ship; Interim Revenue Cycle Management Turnaround

On a normal business day, when the phone rang in TruworthRCM's offices, no one knew that it was a notification that the next eight months were going to be extremely challenging, frantic yet so satisfying.

A billing company client in MI wanted to use TruworthRCM's turnaround expertise to recover the dried cash-flows in a multi-location cardiology practice in NJ. They said that they had signed up a very large deal and didn't have enough people on board to manage the turnaround. Truworth's core team was gathered for another detailed call and then the practice assessment started.

Truworth did an extensive research and found the following:

1. Claims were not getting billed timely. Amount of unbilled claims topped \$4 million, 70% of which was over 90 days.
2. Payments were not being posted from ERAs. An amount of over \$115,000 was lying unposted.
3. Denials were not being worked at all for the last 6 months.
4. Claims Center was not being reviewed to correct incorrect/incomplete claims and send to carriers.
5. EDI data was not being worked at all for the last 12 months. No one knew which claims even went through.
6. The AR was completely out of control. Over \$11 million was lying in AdvancedMD and \$4 million was in the old desktop based proprietary software.
7. Just two carriers were choking up over 40% of the outstanding AR.
8. Unapplied amounts to the tune of over \$150,000 were messing up all the patient accounts.
9. No one was working on the AR for either insurance or patients. Patients hadn't been billed in the last 12 months.
10. The daily reconciliation, batch close and day close procedures were not being followed causing accounting issues.

TruworthRCM Solution

TruworthRCM took the challenge to turnaround the practice. It mandated a cut-off date and all RCM work prior to that date was handled exclusively by Truworth to avoid ambiguity & duplication of efforts.

Truworth proposed a 5-point game plan to control the situation:

1. Clear all pending postings including unposted payments and unapplied transactions to get actual sense of situation.
2. Work on all claims stuck in the Claims Center for Charge Review, Claims Inspector, Unbilled Claims, Exclusions and Run Alerts. Check all EDI reports to ensure claims go through.
3. Work on all Unbilled claims ASAP to avoid any timely filing issues. Thankfully most of it was Medicare and we were able to get all of them through for payment.
4. Insurance AR Follow-up was initiated to get status of claims with carriers and eliminate generic show-stopping issues immediately.
5. Patient statements will be sent out for the first time for all pending ones and then on a pre-decided time interval so as to ensure steady cash-flow from the patient receivables.

AdvancedMD's friendly and easy to use software really helped Truworth team to get to issues and resolve them much faster.

The numbers below summarize the strategy and effort put in by TruworthRCM to bring things back in control:

Milestone	Charges	Payments	AR
Starting	19,278,011.68	2,661,574.26	15,045,953.87
End (8 months)	23,759,727.64	9,029,652.50	711,472.58

Note: Numbers indicate change in financials for dates of service under Truworth's contract only.

Truworth also helped the billing company client setup the Standard Operating Procedures (SOPs) including accuracy benchmarks and TAT for charge entry, payment posting, patient billing and AR follow-up.

If you have a similar situation, or know of someone who does, TruworthRCM can help, just like we have helped this client and many more.
