

Provider Success Stories

- Ken Lanning, Executive Director, Revenue Cycle
Golden Valley Memorial Healthcare
- Preston Hodapp, Director of Patient Access
Phelps Health
- Paula Littleton, Chief Financial Officer
Saint Luke's Health System, Critical Access Region

Objectives

- Learn what financial challenges providers are facing
- Three providers will present how they implemented margin improvement initiatives within their organizations
- Learn what is next on their horizon
- Discussion around key lessons learned



Provider Success


Robotic Processes

Golden Valley Memorial Healthcare


- 56 bed hospital in Clinton, Missouri.
- 5 rural health and specialty clinics in Henry, Benton, and St. Clair counties.
- ~\$411 million total annual gross revenue.



Robotic Processes - Goals

- To reassign FTEs to less redundant and more impactful work.
 - Staff able to focus on more meaningful and complicated tasks.
 - Our goal is for the bot to perform the work of 2 FTEs by year end.
 - To provide stability, especially when short staffed.
 - Robot will work 7 days a week, no illness, no vacations.
 - To provide support for current staff.
 - We are currently working to fill gaps in staffing with robotic processes.
 - To provide consistency.
 - Robot less prone to errors.
 - To prepare for the future.
 - We believe robots and AI will play an ever-increasing role in the years to come.
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Robotic Processes - Uses


- Converting paper correspondence to digital.
 - Converting paper EOBs to 835s.
 - Scripting/retrieving correspondence and 835s.
 - Worklist maintenance.
 - Canceled Orders: We created a canceled order worklist. The bot logs in and verifies the order is canceled, and then updates the authorization so staff do not have to spend time researching.
 - MSP Worklist: The MSP answers do not always script over to the charge forward account. Working on a bot that will fill in the blanks for the “incomplete” MSP.
 - Labor/Delivery codes on claims, release of information, bad debt validation...
 - Somewhat limited by your imagination.
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Robotic Processes – Unexpected Opportunities

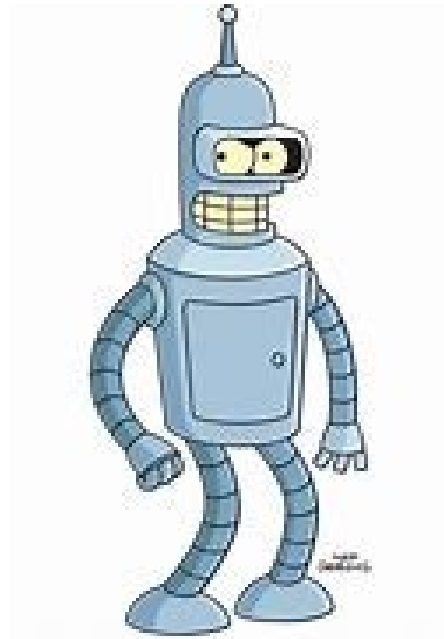
- The process forces you to complete standard operating procedures/desk references.
- The process forces you to question why you perform certain tasks.
- You may find solutions within your hospital information system of which you were not aware.



Robotic Processes - Challenges

- Staff reluctance/hesitation.
 - Will this replace me?
 - Staff buy in.
 - You may need to demonstrate to staff the functionality of the bot.
 - Many processes staff perform are so routine and automatic for them that they may not see the value of a bot performing the job, even though it is a time consuming function.
 - Implementation.
 - You will need to carefully work through each process down to the click and keystroke level.
 - Expect some bumps (bot cannot connect, scenario you failed to account for, misunderstanding/miscommunication). Keep the end in site.
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Questions?



FRONT END COLLECTIONS IMPROVEMENT STRATEGY

Presented by Preston Hodapp



Phelps Health



WELCOME



Preston Hodapp

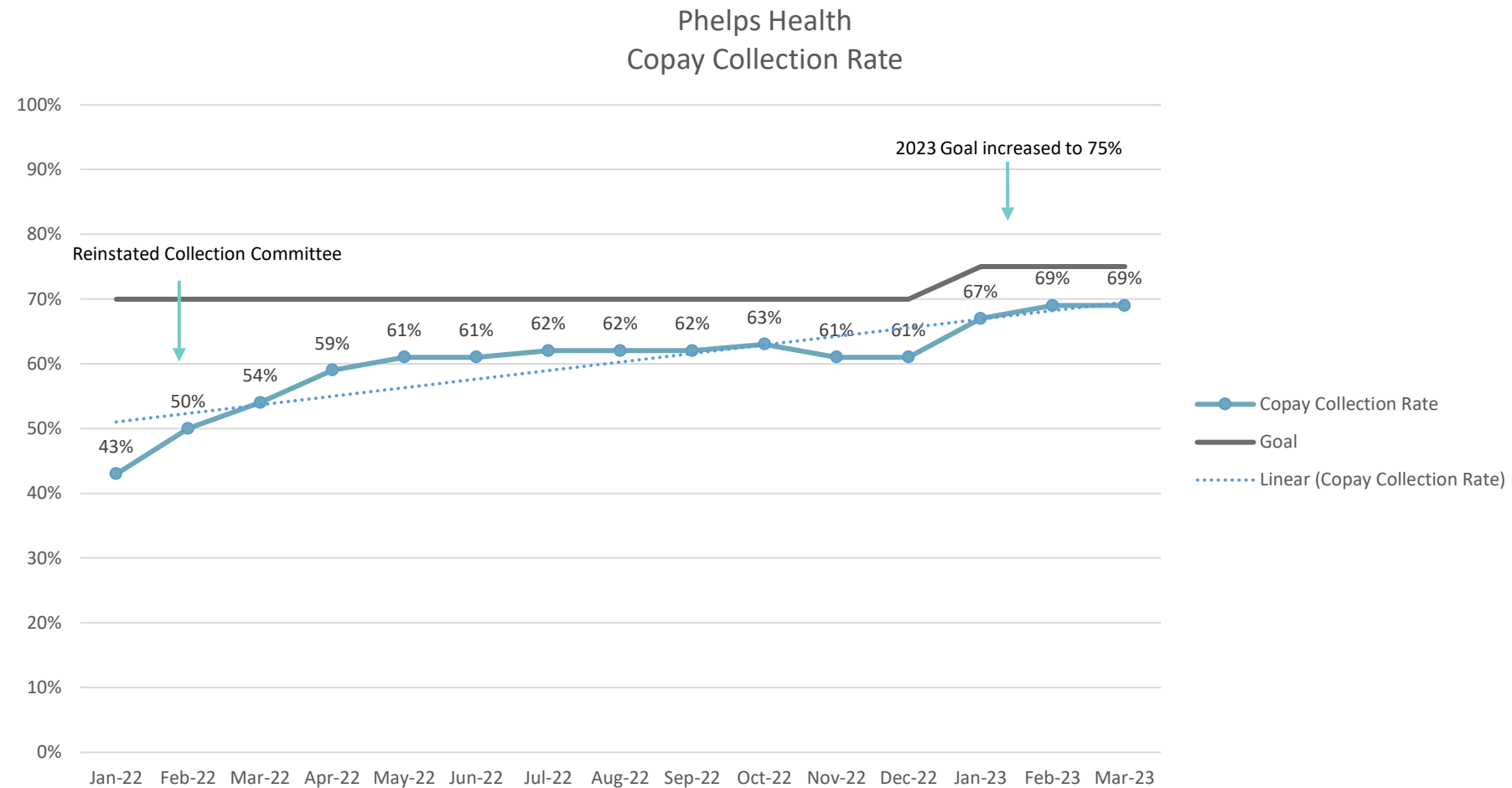
Director of Patient Access

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Copay Collections

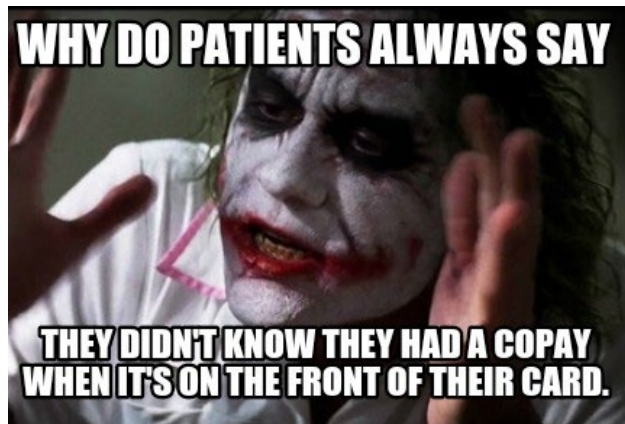
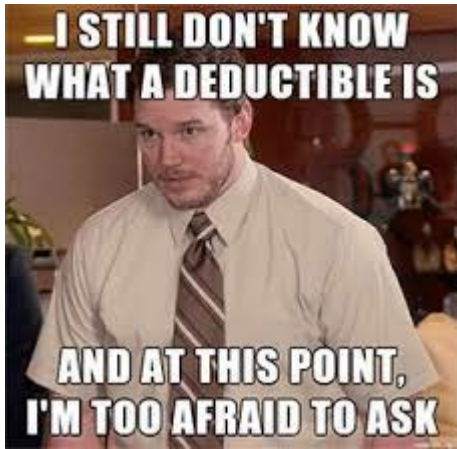


COLLECTIONS COMMITTEE

Made up of:

- Clinic Leaders
- Hospital Leaders
- Front End Staff
- Financial Navigators
- Patient Experience
- Bi Weekly Meetings
 - Discuss challenges regarding Front End Collections

- <https://>



TRAINING

- Informing about copay/prepayment at time of pre-registration
- Difference between copay/deductible/co-insurance/out of pocket max
- Scripting- “How to ask patients for Money?”
 - “I see that you have a \$25 copay due for today’s visit, how would you like to take care of that?”

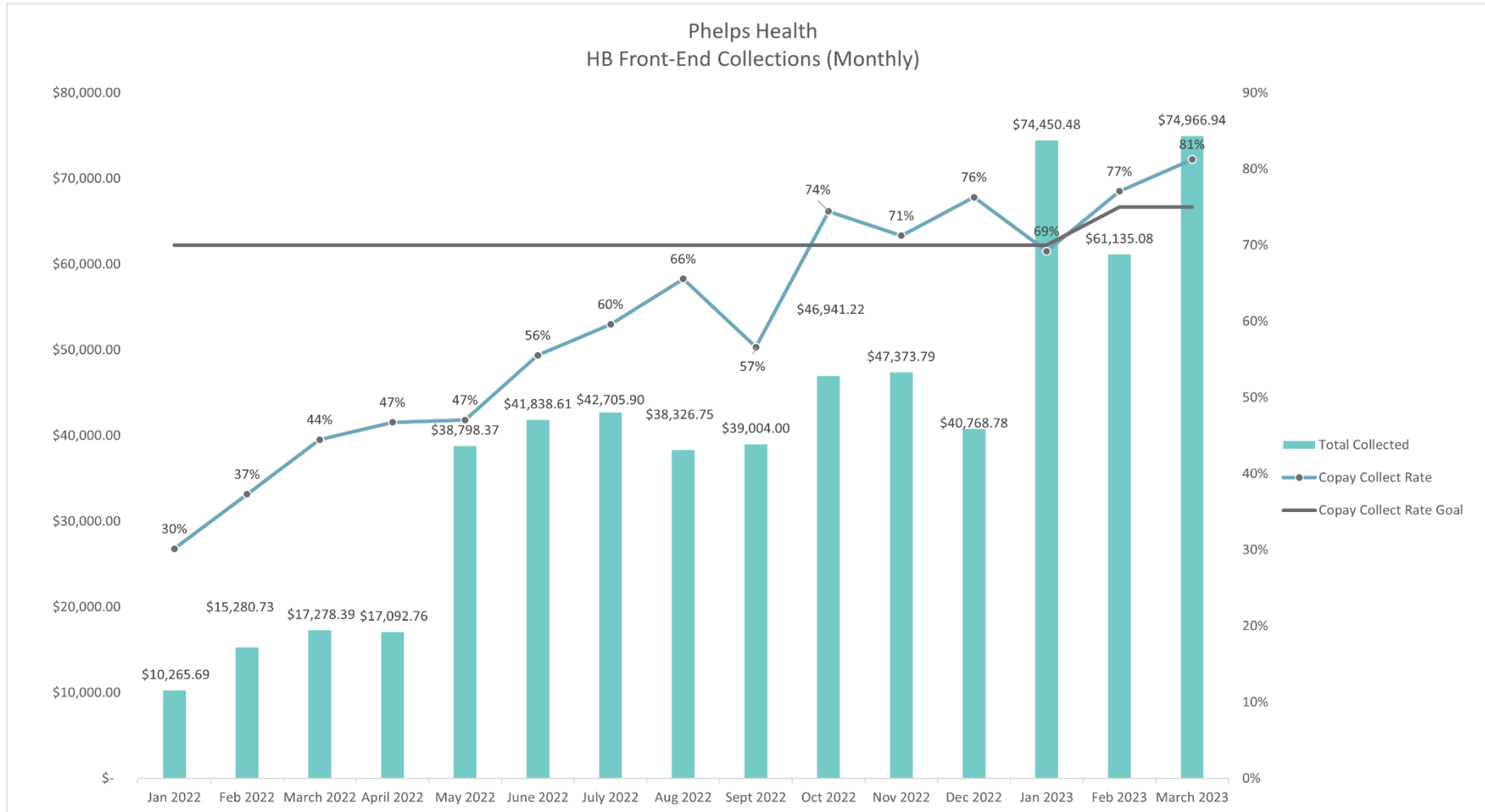
Vs

- “I see that you have a \$25 copay due for today’s visit, would you like me to bill that?”

STAFF ENGAGEMENT

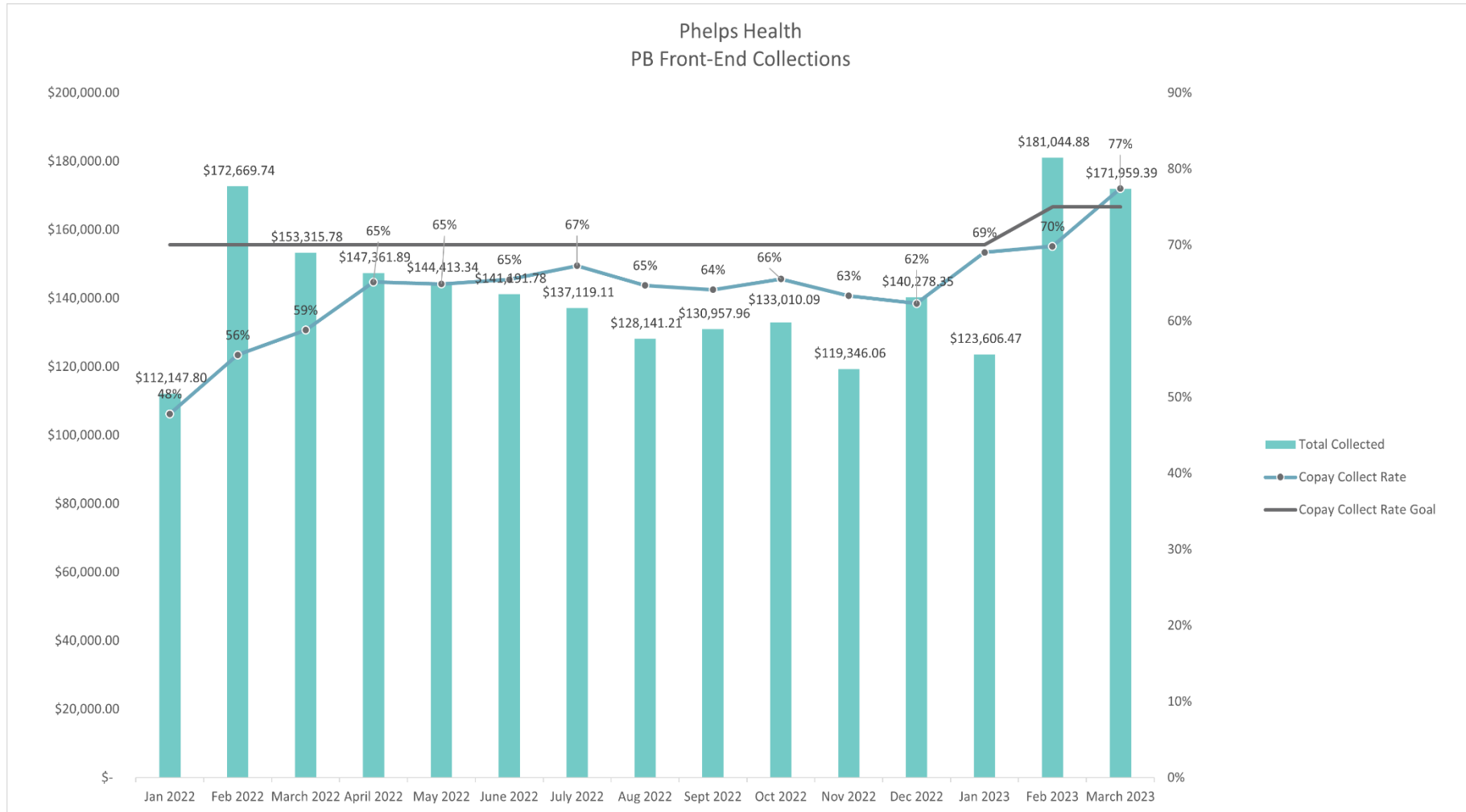
- Monthly Bonus Opportunities
 - Clinic
 - Copay Collections
 - Previous Due Balances
 - Hospital
 - Pre-Payment
 - Previous Due Balances
- Monthly Thank You Cards
- Photos of Winners

HOSPITAL TEAM



Phelps Health

CLINIC TEAM



Health

ESTIMATES

- Implemented Epic Estimates May 2022
- Estimates ran on all scheduled patients
- Estimates available via- MyChart which allows patients to pre-pay during e-check in

Primary Service/Item Requested	MRI scan of right leg joint without contrast
Date of Service	8/3/2022
Service Location	PHS MOB MR IMAGING
Service Address	1050 West 10th Street
Primary Diagnosis	M25.561-Right knee pain, unspecified chronicity M25.361-Instability of right knee joint

	Charges	You Pay	Allowed	Self Pay Discount
Hospital charges at PHS Hospital Parent				
CPT® 73721 - HC MRI Jnt of Lwr Extre W/O Dye - MR Lower Ext Joint Rt WO IV Cont	\$6,096.40	\$182.89	\$1,828.92	\$0.00
Total	\$6,096.40	\$182.89	\$1,828.92	\$0.00

Your out-of-pocket cost was determined using your Trustmark benefits:

Service Type	Estimated Balance	Coinsurance	Patient Portion
Outpatient	\$1,828.92	\$182.89 (10.00 %)	\$182.89



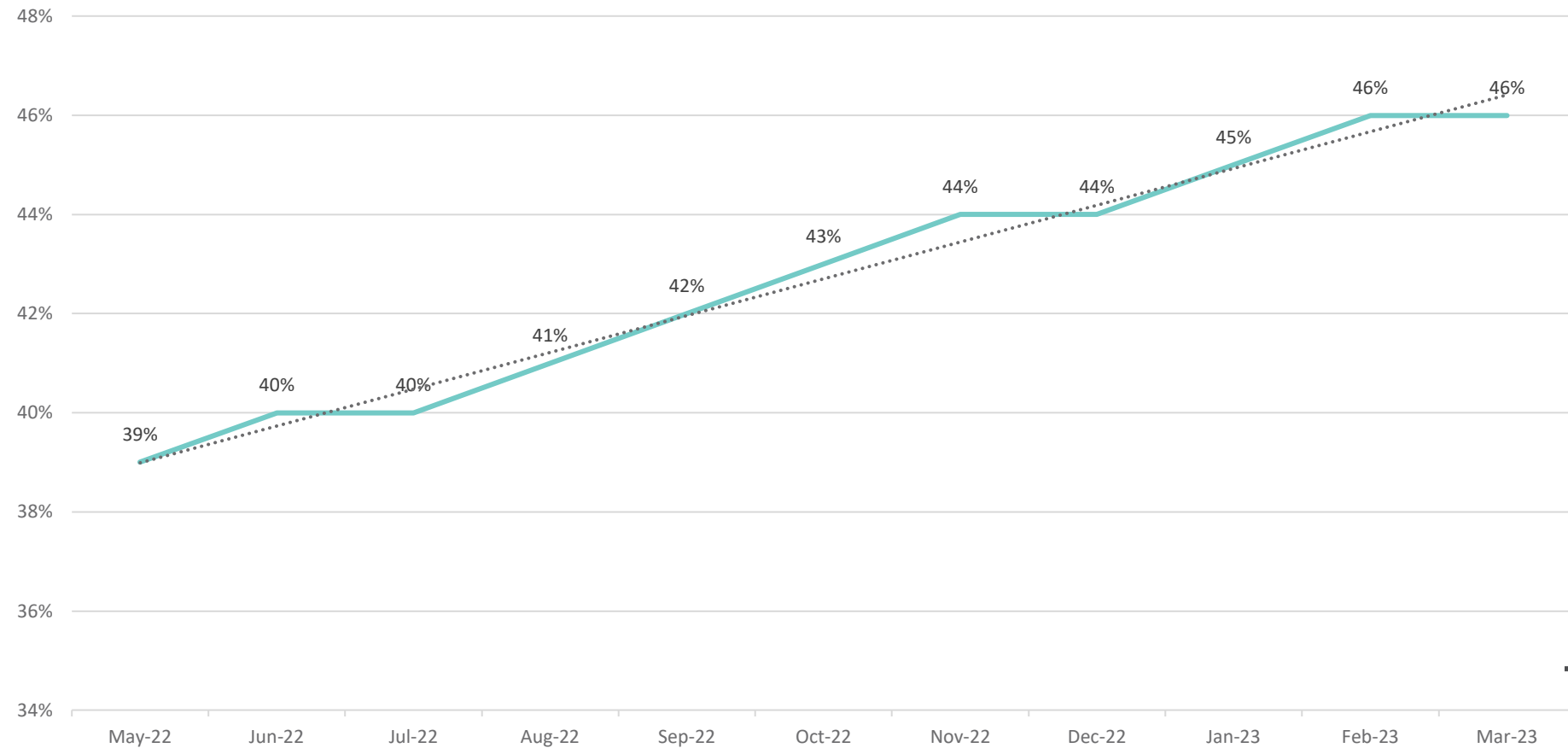
PAYMENT METHODS

- Cash
- Check
- Credit/ Debit Card
- In house Payment Plans
- Commerce Bank Payment Plans

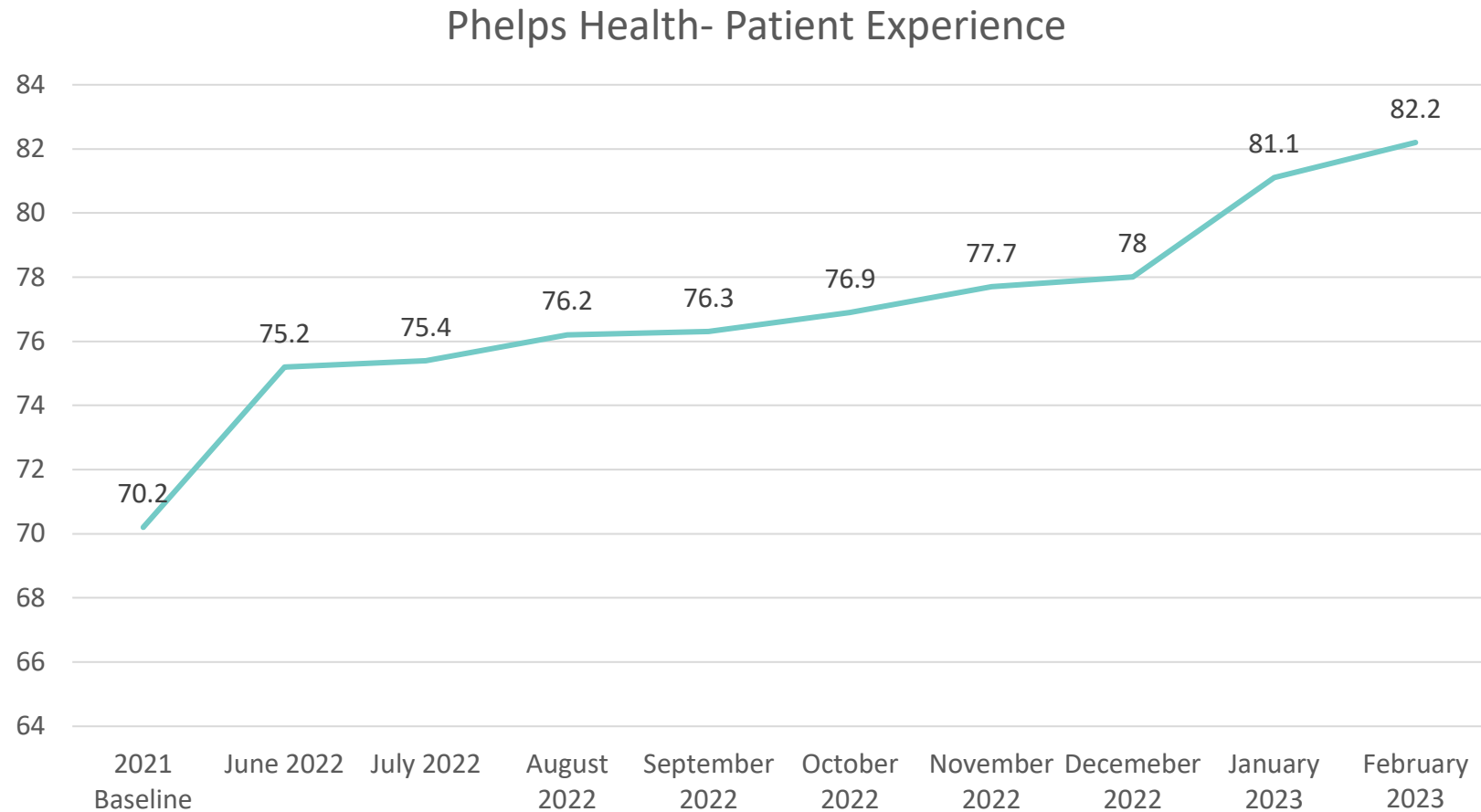


MYCHART

Phelps Health
MyChart Activations



PATIENT EXPERIENCE



WHAT IS NEXT

- Continue to work on achieving 75% copay collected
- Continue to sign patients up for MyChart
- Increase departments with automated estimates
- Expand Financial Navigator Team

QUESTIONS



Phelps Health

Critical Access Region

Provider Success



Critical Access Region Hospitals

- Allen County Regional Hospital
Iola, Kansas
- Anderson County Hospital
Garnett, Kansas
- Hedrick Medical Center
Chillicothe, Missouri
- Wright Memorial Hospital
Trenton, Missouri



HIM/Coding Review

- Workflow evaluation
 - Productive versus non-productive tasks
 - In-house versus outsourcing
 - Staffing
 - Cross training
- KPI Review



HIM/Coding Review Checklist

- Hands on review and interview of all coding staff
- EPIC work queue review
- Review of professional and facility charge process
 - Interview of Revenue Integrity staff
- Review of denial codes





HIM/Coding Review Outcomes

- Focus on Pain and Podiatry denials
 - Professional and Facility charges each completed by different staff members
- Decrease the number of touches
 - Each would code and see if the CPT matched
 - Decreased the WQ from 3 to 1
 - Decreased movement between WQ
 - Increased provider communication
 - Decrease in untimely charges
- No reduction in staff





HIM/Coding Review Outcomes

- Vendor evaluation
 - Coding over the weekend, left in-house staff with little work
 - Decreased productivity and filling with non-value added work
- New rules of engagement
- Reduced outsourcing costs



HIM/Coding Review Outcomes

- Productivity Dashboard
 - No more manual tracking
 - Report for CPT changes
- Staff engagement
- Continued cross training and retraining
 - Infusion charging – alignment across the CAR
 - Podiatry coding and medical necessity – revenue opportunity



Payer Enrollment - Physician

- One FTE working the equivalent of 2 FTEs
 - Medical Staff duties
 - Physician payer enrollment
- Routine turnover
- Outcomes
 - Significant reduction in denials
 - Reduction in missed physicians
 - Consistency across the CAR



In the works

- Charge Master review
 - Review of line item details
 - Revenue capture and claims review
 - Bundling/unbundling charges
 - Pricing structure
- Patient collections
 - Staff education, including employed patients
 - Performance metrics and benchmarking
 - Community culture
 - Paperless statements



Questions



THANK YOU

