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25th Annual Revenue Cycle Conference
Tailgates, Touchdowns, & Revenue Cycle Championships!
It's time......to Reignite!

TIME IS MONEY: HOW CREDENTIALING IMPACTS THE BOTTOM LINE

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PRESENTERS

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ABOUT BERRYDUNN

An AccountingTODAY **Top 50 firm**

Largest accounting and consulting firm headquartered in New England

800+ professionals across 50 industries and 200 service areas

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TIME IS MONEY: HOW CREDENTIALING IMPACTS THE BOTTOM LINE

Accelerate provider onboarding to enhance experience and revenue, all while improving access to patient care. This presentation will discuss practical solutions to support effective provider privileging, credentialing, and enrollment processes:

- As an NCQA-certified CVO, advisory firm and credentialing and enrollment service provider, we will share examples from our production environment and engagements, including how payer contracting impacts the overall timeline.

- At the end of this session, participants will have new strategies to identify areas in their organization that create barriers and have conversations to solve communication challenges and develop more efficient workflows.

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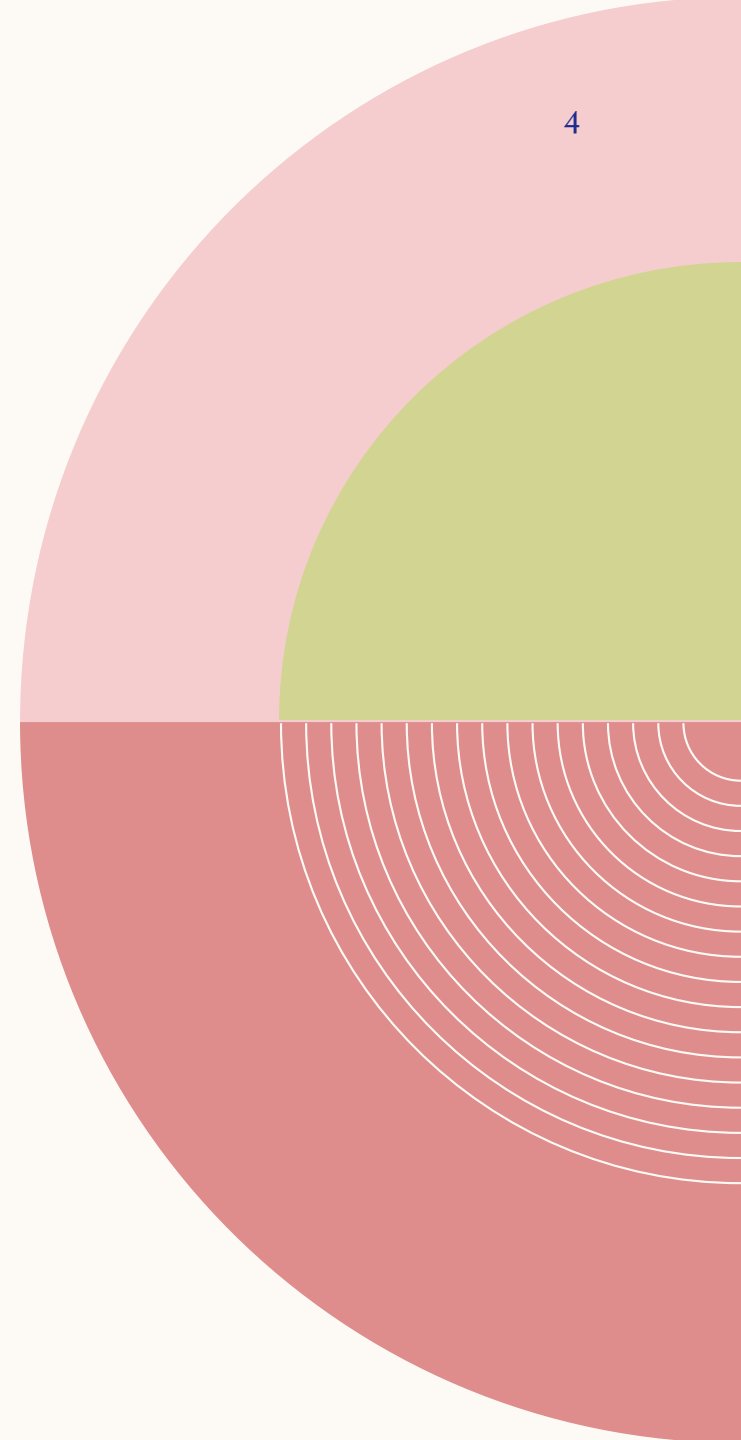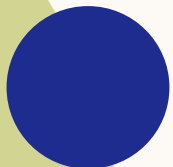
LEARNING OBJECTIVES

- Identify areas of bottlenecks and breakdowns in your organization that may be causing credentialing and billing delays

- Reduce provider liable denials due to enrollment issues

- Eliminate redundancies and improve workflows to enhance the provider experience during onboarding and reduce costly turnover

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ASSUMPTIONS ARE MADE AND MOST ASSUMPTIONS ARE WRONG

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Albert Einstein

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BUILDING YOUR PLAYBOOK

1

Do you have a clearly defined end-to-end credentialing process?

2

Are enrollments submitted in a timely manner?

3

What's in your payer contracts?

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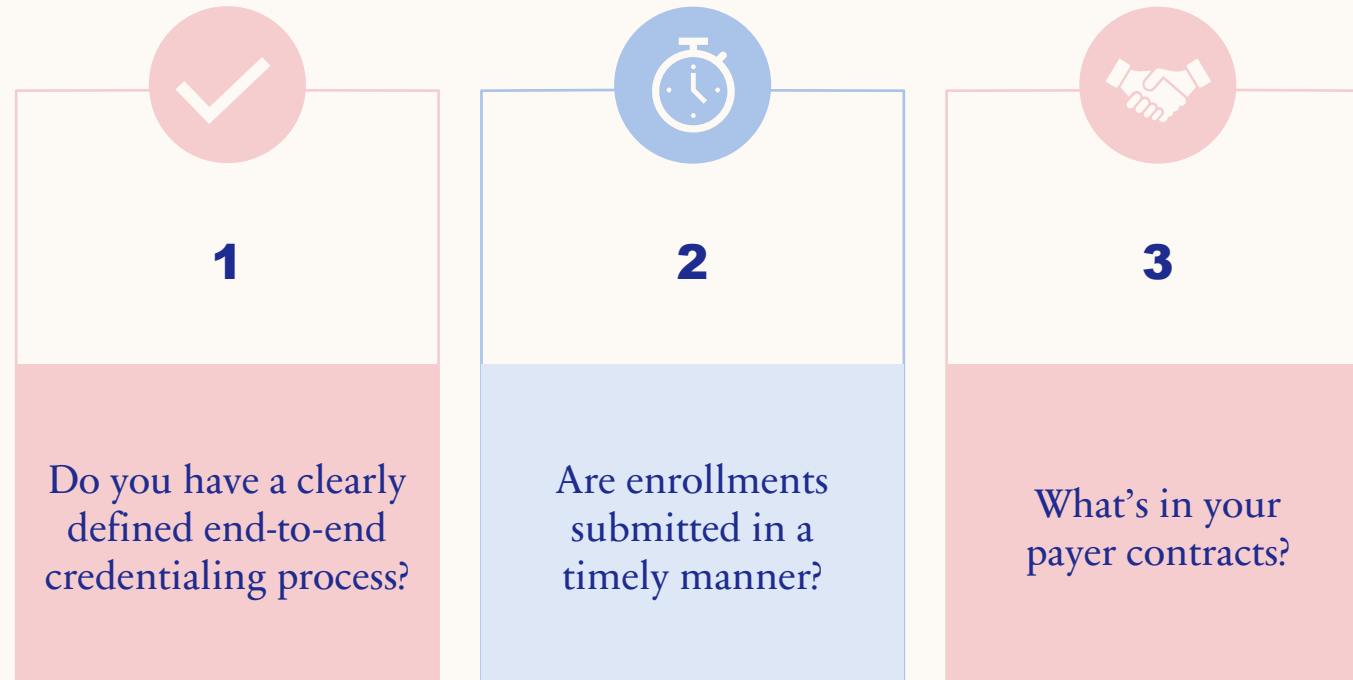
RULES OF THE GAME

CREDENTIALING

- Credentialing is the process of verifying the qualifications and credentials of a healthcare provider.

- The purpose of credentialing is to ensure that the provider can deliver safe and quality patient care.

PAYER ENROLLMENT

- Enrollment is a separate process that requires many of the same details and documents as credentialing, but the goal of the enrollment process is to ensure that providers are added to identified payer networks and affiliated with your organization.

- Timely and complete payer enrollment helps to ensure that providers are associated with your organizations' governmental and commercial contracts which is critical to avoiding denials.

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GETTING YOUR PROVIDER INTO THE ENDZONE

Reduce frustration with clear guidance

Education

Support

Identify clear deadlines

What is the consequence if the provider doesn't complete their requirements timely?

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BOTTLENECKS AND BREAKDOWNS

Too many touches

Too many departments asking for the same information

Lack of defined processes

Inconsistent use of technology

No single voice to the provider

Ensure your provider is credentialed and enrolled

Mitigate the financial impact of credentialing-related claim denials and barriers to patient care created by inefficient or siloed credentialing and enrollment processes.

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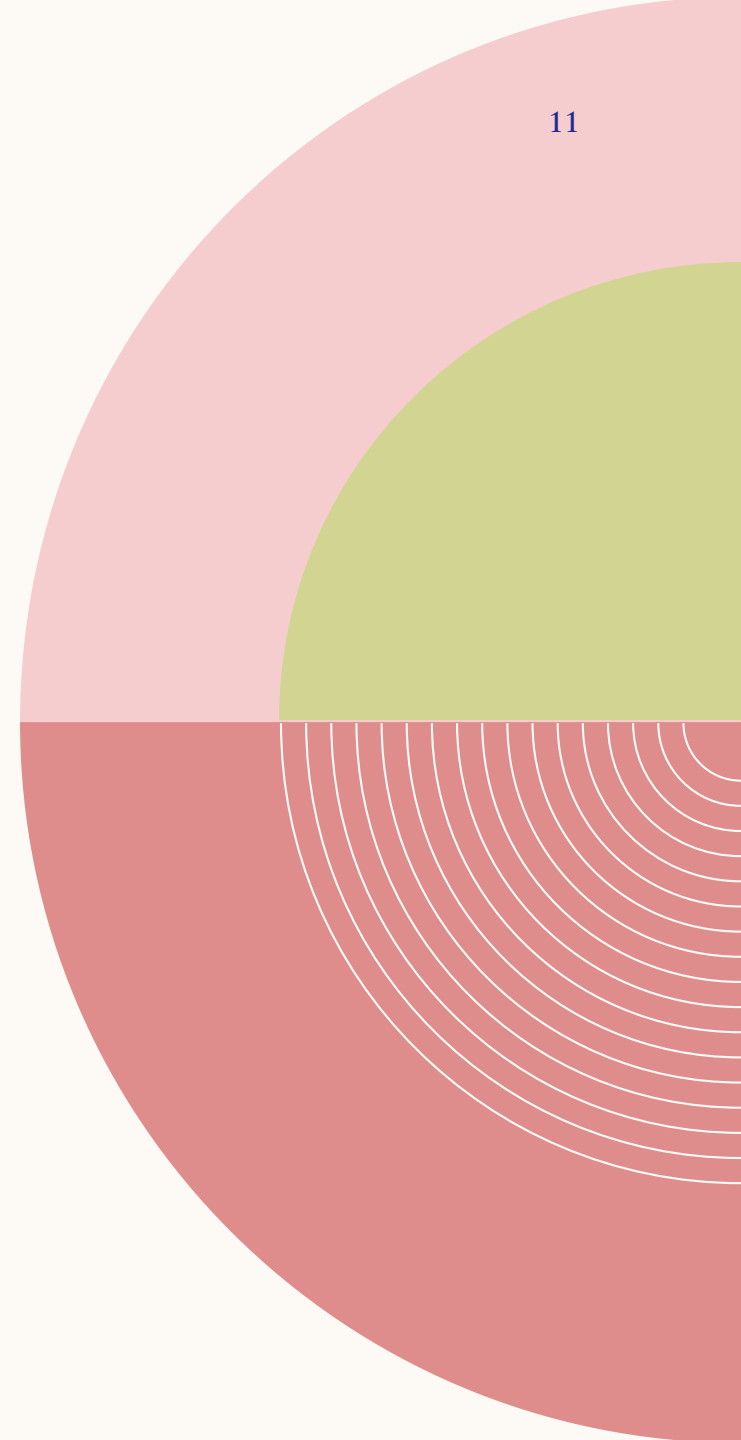
STREAMLINE COMMUNICATION

Eliminate redundancy of requests for same information and documentation

- Missing documents or incomplete documentation can create major delays in the credentialing and enrollment process

Educate and connect all interested parties

- Human Resources (HR)
- Medical Staff Office (MSO)
- Practice managers/Operations

Develop onboarding partnership with new providers

- Inform newly hired practitioners that their employment requires PROMPT responsiveness

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MAKE NO ASSUMPTIONS!

- Consider what type of payer contracts are in place for your organization

- Build this element into your hiring and onboarding process allowing ample time for success

- Different types of agreements require different timelines for processing

- Utilize technology—credentialing and enrollment software, payer portals, explore other system interfaces

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ENHANCE PROVIDER EXPERIENCE

PHYSICIAN TURNOVER COSTS

- Estimated to be $400,000 – $1,000,000 per physician
- Inclusive of recruiting costs and lost patient billing revenue

PROVIDER ONBOARDING

- Retention strategy
- Window into your organization's culture
- Difference between onboarding and orientation
- Communication is key
- Reduce touches and asks for same information

TIMING IS EVERYTHING

- Payer enrollment process = minimum of 90 to 120 business days
- Impact of managed Medicare and Medicaid
- Gathering info and beginning early can decrease write-offs for "provider not credentialed" denial code

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KEEP YOUR PROVIDERS ON THE FIELD

- Third-party payer process directly impacts a provider's ability to deliver timely and quality patient care

- An unenrolled provider lacks the ability to order, prescribe, and refer
  - Requires additional touches
  - Can lead to breakdowns in workflow, unnecessary expense and provider dissatisfaction

- Offer providers robust revenue cycle-related clinical systems training
  - Develop a mechanism to identify potential errors that may lead to write-offs and compliance risks
  - Provider entry errors can result in a claim ending up in a work queue, never to be identified, submitted, or paid
  - Reduce rework and wasteful workforce expenditures by creating gate checks to prevent revenue cycle teams chasing information

- Minimize barriers to care and collection challenges

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SAMPLE ONBOARDING TIMELINE (SOME STEPS MAY HAPPEN CONCURRENTLY)

MONTH 1	MONTH 2	MONTH 3	MONTH 4	MONTH 5
Provider is hired Notify HR, MSO, credentialing and enrollment contacts Include anticipated start date	Onboarding and facility orientation Collecting provider information, application, supporting documentation	Credentialing process Complete verification	Board and/or committee approval	90-120 business day enrollment process Begins w/direct contracts (Variation if organization has delegated agreements)

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SUCCESS IS IN THE DETAILS

Zig Ziglar

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STOP ENROLLMENT DENIALS BEFORE THEY START

Credentialing requirements are variable by state, payer, accrediting bodies, and organizational standards

→

Does your organization have a defined enrollment process?

•Do you know your enrollment timelines?

→

Revalidation and disenrollment denials ARE avoidable

→

Claim resubmittals may be an option once payer enrollment is approved and participation effective dates are established

Never stop learning!

•Educate revenue cycle and billing staff on credentialing and enrollment process, timelines, and payer follow up guidelines

→

Never stop communicating!

•Ensure your revenue cycle and billing teams have access to information and a clear line to the enrollment and credentialing staff

→

What's in your payer contracts?

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PAYER CONTRACTING

Know what's in your agreements

Your organization has likely grown, have your contracts caught up?

What's your network participation strategy?

- Is it scalable for regional or national growth?

Contract types

- Direct
- Delegated
- Facility
- Single-case agreements

So many options:

- Value-based
- Shared savings
- Chargemaster
- Fee schedule alignment/realignment

Protections and Accountability

- Language for effective dates and processing times
- Hold payers accountable

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CHANGING THE GAME WITH COMMERCIAL PAYER DELEGATED AGREEMENTS

Benefits	Determine which contracted carriers support delegated agreements	Align delegated and direct payer contract language	Infrastructure
• Can speed up the process to get your providers empaneled to see patients much quicker • Minimize number of asks to providers for information • Takes the burden off the commercial insurance carriers	• Identify requirements (i.e., NCQA certification, exclusion elements, etc.) • Understand timelines and payer volume (i.e., provider thresholds) • Variation across payers and their processes	• Allows for consistency for staff • Provides your organization with a tool to hold payers accountable	• Enrollment, whether direct application or roster-based (delegated) should be completed by the same team • Allows for better definition of staff responsibility and staff expectations • Develop and monitor a standard set of meaningful metrics

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STAY INBOUNDS

MAP IT OUT – OVERLAY PROCESS AND TECHNOLOGY TO LEVERAGE CAPABILITIES

- Reduce duplication and gaps in process
- AI—it's here to stay
- Reports (timely access to data)

LOCUM TENENS

- What are they?
- How can you use them?

KNOW WHO'S PROVIDING CARE

- OIG/SAM other sanctions
- Risks of employing providers with sanctions on ability to receive federal funds

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DON'T DELAY THE GAME

Provider not enrolled	Provider not credentialed	Place of service not enrolled	Provider not enrolled at service location
Billing NPI is not authorized for Tax ID	NPI and taxonomy present but not valid	Billing provider ID/NPI/TaxID not recognized for this submitter and payor	Provider not eligible to perform or order/refer for service
Provider not eligible for payment on date of service	Billing provider not enrolled	Provider not enrolled with state Medicaid or Medicare	Provider not eligible for date of service

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THANK YOU!
QUESTIONS? CONTACT US AND PLEASE DO KEEP IN TOUCH

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