

# BESLER provides thorough Transfer DRG revenue recovery services

## How do you help healthcare organizations navigate the biggest challenges in healthcare?

Changing regulations often are the cause of unintended challenges for the healthcare industry. BESLER creates clear and simple paths through these challenges, so that hospitals have more time and dollars to focus on enhancing patient care. Medicare and Medicaid represent the largest sources of healthcare spending and are major revenue drivers for most hospitals. Over the last 35 years, BESLER has developed deep expertise around these federal programs, allowing us to offer a range of payment and revenue recovery solutions that help our customers recover revenue they have rightfully earned — and stay compliant. The proof is in the \$4 billion of additional revenue

**11 years** on the Short List

**100%** of peer reviewers agree or strongly agree that they would recommend BESLER's revenue integrity solutions to a colleague

we've delivered to hundreds of hospitals across the United States. To our team, this is more than money. It means greater resources for our clients to hire key team members, add life-saving equipment and services, and serve their patients and communities better.

## What advice would you offer to healthcare leaders when choosing among vendors?

It may sound cliché to say that not all vendors or services are alike, but it's true. Take Transfer DRG revenue recovery. This type of service has been available for many years and continues to be offered by many vendors. When services reach that level of maturity, it may seem attractive to select the one that comes with the least expensive price tag. However, there is much more to it than just the price. For instance, a provider could ask a vendor if it reviews 100% of accounts impacted by the Transfer DRG rule. Some vendors only focus their efforts on a selection of claims that are essentially low-hanging fruit, without doing a thorough review across all impacted claims.

Compliance must be at the forefront of the review process. Multiple validation steps are important to minimize the risk of overpaid claims. Reliance solely on CMS's eligibility and utilization information to

determine if Transfer DRG claims have a recovery opportunity can lead to issues. A compliant validation process includes direct contact with post-acute providers and clinical staff reviews to ensure clinical compliance before an underpayment determination is made. Ask vendors probing questions to determine their ability to deliver optimal results, which will keep your hospital compliant with Medicare regulations. Also, ask if the service is contingency-based so the vendor doesn't get paid unless they find your organization more underpayments.

## What is some advice you can give providers for a successful implementation of a new product or service?

Your vendor partner should be able to communicate what is needed to successfully fulfill an engagement. Familiarize yourself with their requirements and place the appropriate staff members in positions to facilitate the work. Lack of communication or inability by the provider to deliver necessary information or decisions can hamper implementation. Be open with your vendors about your capabilities, timelines and resources so they can work with you to overcome potential roadblocks. ■



BESLER combines best-in-class healthcare finance expertise with proprietary technology to help hospitals improve revenue and reimbursement integrity. Over the last thirty-five years, our revenue recovery and reimbursement solutions have delivered more than \$4 billion of additional revenue to hundreds of hospitals across the U.S. For more information, visit [www.besler.com](http://www.besler.com).

To learn more about HFMA's Peer Review program, visit [hfma.org/peerreview](http://hfma.org/peerreview)