



Emergency Department Revenue Cycle Management



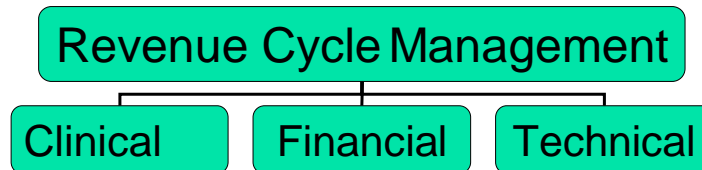
Objectives

- Define ED Revenue Cycle Management and the impact on a facility's success
- Identify stakeholders
- Understand challenges
- Outline strategies to optimize ED revenue cycle management





Revenue Cycle Management Multidisciplinary Approach



Challenges

- Complicated Billing Requirements
 - E/M Level
 - Modifiers
 - Procedures and Supplies
- Billing Driven by Documentation
 - Must reflect Medical Necessity
- Denials
 - Medical Necessity, Incomplete, Inaccurate



The Team

- Clinical Staff
- Registration
- Case Management
- Charge Capture
- HIM/ Medical Records
- Denials Management
- Business Office
- Corporate Compliance



Clinical

- Nursing
 - DOCUMENTATION
 - Start and Stop Times – IV
 - Observation hours
 - Time Spent – Critical Care, etc.
 - Supplies used
 - POA - present on Admission



Clinical (cont'd)

- Physicians
 - Physician Order Entry
 - Order Sets
 - Mandatory Justifications – medical necessity
 - Computerized Order Entry
 - Captures procedures that may not require order
 - Splinting
 - Crutches and crutch walking instructions
 - Routine nursing activities



Clinical (cont'd)

- Physician
 - Valid order to “place” patient in observation
 - Reassessments
 - Templates



Registration

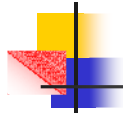
- Collect accurate patient demographic info
 - Patient ID
 - Guarantor Data
- Consents and Notices
- Collection of co-pays
 - Increase in cash flow
- Complications
 - Unavailable information



Case Management

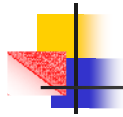
Admission
Vs.
Observation

- Screening
- Pre certification



Charge Capture

- Charge Master or CDM
 - Supplies
 - Procedures
 - E & M level
 - Critical Care
 - Trauma Activation



Charge Capture

- Impact on Revenue
- Appropriate Revenue
- Correct Patient Charges
- DOS
- Type of Service
 - IP
 - OP
 - OBS



HIM Medical Records

- Reconciliation
- Timely Documentation
- Coding
 - CPT
 - Diagnosis codes
- Requests for information from carriers/payers for claims
 - ADR requests



HIM Medical Records

- Certified Coders
- Updates
- Competency Evaluation
- Continuing Education
- Tools
 - Craneware
 - 3M



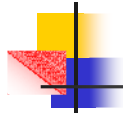
Denial Management

- Minimization of Denials
 - Prevention
 - Review
 - Recovery



Denial Management

- Track and Trend
- Best Practices for Recovery
- Timely Reimbursement
- Prevention Strategies
 - POE Justifications
 - Education



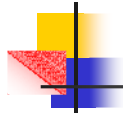
Business Office

- Oversight of all revenue cycle processes
 - Medicare Changes
 - CCI Edits
 - Modifiers
 - Clinical knowledge
 - Continuous monitoring



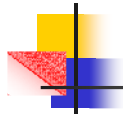
Information Technology

- Manage the systems that collect and store data
- Update table to ensure data is accurate and up to date



Information Technology

- Reports for trend tracking and analysis
 - Finance-payer mix analysis
 - OP Exception Reports
 - DNFB reports
 - ED tracking
 - TAT
 - Lab
 - Radiology



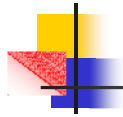
Information Technology

- Electronic Medical Record
 - Compliance
 - Real time charge capture
 - Supporting documentation
 - Decrease Denials
 - Justifications in POE
 - Accurately reflects procedures/
interventions completed



Factors Impacting Revenue

- Clinicians not understanding vital role in revenue cycle
 - Education
 - Accountability
 - Feedback Loop
 - Justifications
 - Templates
 - Continuous QA



Factors Impacting Revenue

- Documentation
 - Education of Clinical Staff
 - Clinical Documentation Improvement Specialists
 - Certification for specialty



Factors Impacting Revenue

- Billing
 - Facility Billing
 - No set rules
 - Facilities must have policies to ensure they follow CMS regulatory guidelines
 - Physician Billing
 - Medicare Rules



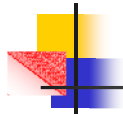
Factors Impacting Revenue

- Government initiatives that impact a facilities revenue
- ZPIC: Zone Program Integrity Contractors (2003)
 - Role to identify billing practices that pose financial risk to Medicare



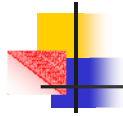
Factors Impacting Revenue

- MAC – Medicare Administration Contractors
 - To identify discrepancies between Medicare Part A (inpatient) and Part B (outpatient) claims with the authority to revise reimbursement payments



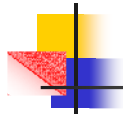
Factors Impacting Revenue

- MIC: Medicaid Integrity Plan
- Role is to review Medicaid claims for fraud and overpayment



Factors Impacting Revenue

- RAC – Recovery Audit Contractors
Contract with Medicare and receive a %
of what is recovered
- 4 Geographic areas in US
- Recovery of overpayments and
underpayments



RAC Impact

2003 RAC project started as a
“demonstration project” in New York,
Florida and California



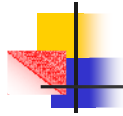
RAC Impact

- The 3 year demonstration project identified more than
\$1 BILLION
in overpayments
and recovered nearly
\$850 MILLION
from inpatient hospitals



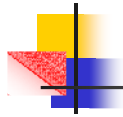
Factors Impacting Revenue

- HAC – Hospital Acquired Conditions
10 Categories Include:
 - Pressure Ulcers
 - Falls and Trauma: important to identify patients at risk for falls
 - UTI
 - Catheter associated infections



Factors Impacting Revenue

- Hospital Ranking
- HCAPS
- Press Ganey
- Report Cards



Strategies to Optimize Revenue

- Review current process from up front to end
- Identify roles
- Feed back loop
- Accountability



Strategies to Optimize Revenue

- Registration:
 - Review complaints/ errors
 - Financial
 - Operational
 - Compliance
 - Individual Feedback
 - Collect and Review Data
 - Staff Incentives
 - Lowest error rate
 - Productivity



Strategies to Optimize Revenue

- Annual Review of Charge Master
 - Continuous additions/deletions as needed
- Audits
 - Chart Review (compare physician vs. facility levels)
 - Billing Audits
 - Target High Risk Charts (RAC, POA)



Strategies

- Internal Audits
 - Supply charges vs. stock
 - Reconciliation process
 - Billing Process and tool for E&M level
 - Medication Charges versus Administration Charges Reconciliation
- External Audits



Strategies

- Denials
 - Review Denials and Rejected Claims
 - Investigate/ Action
 - Timely Appeals
 - High Volume and Frequent Denials



Strategies

- Leverage the EMR
 - Compliance
 - Prompts that require complete documentation
 - Without adding to clinical workflow
 - “Speed Bumps” – flag at discharge to indicate incomplete registration
 - Reports
 - QA/ CQI
 - Charge Capture



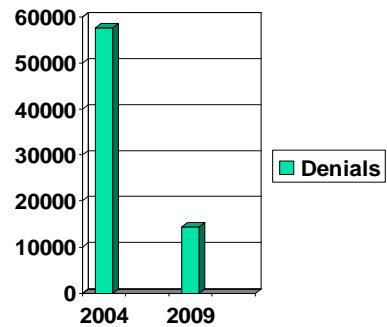
EMR and Charge Capture

- Billing Module through EMR
 - EDIMS billing Module used to improve charge capture in a 75,000 visit community hospital
 - Initial billing done by paper “charges sheet” and subjective review of chart by biller to determine E&M level
 - EMR and Billing Module lead to increased revenue



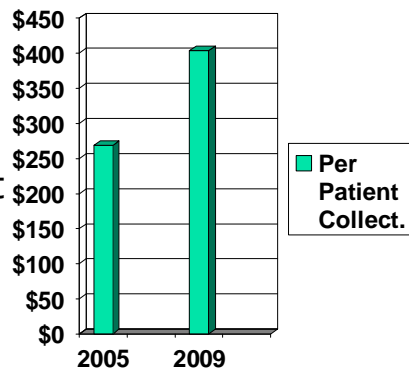
EMR Improvements

- ED Denials decreased from \$57,700 (charges) per month in 2004 to \$14,400 (charges) in 2009.



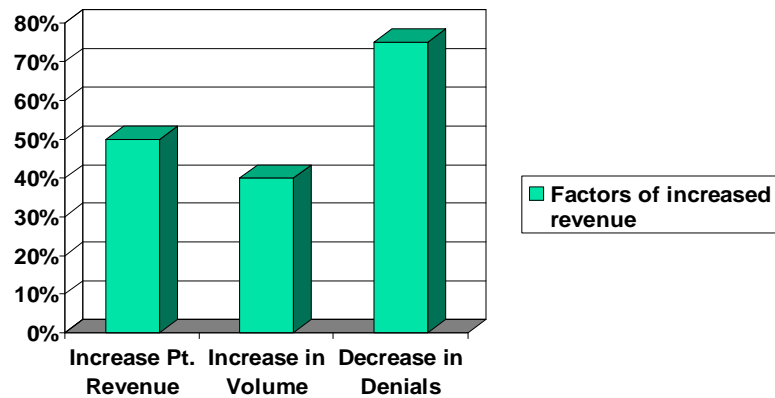
EMR Improvements

- Average per patient revenues increased 50%



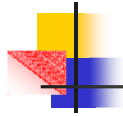


Factors of Increased Revenue

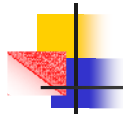
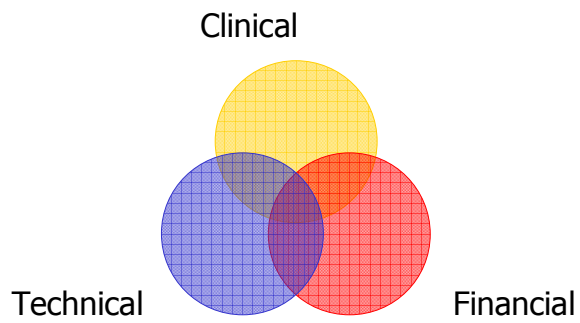


Strategies

- Discharge Area
 - Verify all information
 - Collect Co-Pay
 - Complete Medical Record



Revenue Cycle Management



Questions?

+EDIMS
KNOW. NOW.