Hospital Comprehensive Revenue Cycle Management

With a focus on controlling costs and increasing efficiencies, healthcare organizations are looking at the critical drivers of revenue cycle performance. With margins at around 3 percent, nationwide, hospital revenue cycle management services can help lower the cost to collect. A hospital revenue cycle management solution can allow you to focus on caring for your patients. Guidehouse solutions1 utilize a customized approach that integrates revenue cycle expertise and best-practice processes with our proprietary technology platform to streamline operations and works across all health information system platforms (Epic, Cerner, Meditech, etc.).

Guidehouse offers comprehensive revenue cycle outsourcing for all phases of the revenue cycle, including: patient access, health information management, revenue integrity, and patient financial services. By utilizing our full capabilities, we leverage our consulting expertise to provide change management and process improvement for our clients. This holistic approach, coupled with innovative technology use, helps you achieve the full potential of your entire revenue cycle.

Today's Revenue Cycle Management Challenges

- Continuous changes in regulatory and reimbursement needs;
- Shortage of skilled workers;
- Quality control;
- Inefficient and ineffective processes; and
- Lack of optimized technology use.

Our full revenue cycle outsourcing capabilities leverage our consulting expertise and span the entire revenue cycle:

Patient Access

Front-end patient services set the stage for accurate and prompt payments after care is provided. Patient access serves a critical role as it includes the interactions with every patient through registration, insurance verification, and the cash collection process. The patient experience is central to these services and encourages patient engagement throughout the encounter. The ease of patient engagement is dependent on the experienced staff and the use of appropriate technologies, such as patient portals. Patient access functions, when done correctly, can facilitate a clean claim and prompt payment from payers by increasing efficient throughput and helping to reduce denials at the backend.

Health Information Management (HIM)

Mid-revenue cycle is designed to verify that the data collected and used for payments is robust, correct, and up-to-date. HIM serves a critical role in provider organizations in the collection and retention of clinical and financial data. Coding, as the cornerstone of HIM, is key to securing accurate reimbursements from payers.

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1. 1. Business process management services described herein are provided by Guidehouse Consulting, Inc.'s wholly owned subsidiary, Guidehouse Cymetrix Corporation.

Blended Coding Model Benefits:

- Lowered costs
- 24/7 processing
- Ability to scale during peak demand periods
- Inpatient and outpatient capabilities
- One-point of contact in U.S. fpr both onshore and offshore
- Can assist with small and large coding needs

HIM functions, when done correctly, can enable accurate and complete payment from payers and help with denials prevention.

Revenue Integrity

In conjunction with HIM, revenue integrity occupies the mid-revenue cycle and is used to update the robust data used for payments. Revenue integrity serves a critical role for the accurate documentation of clinical compliance-related concerns for an organization. Revenue integrity functions, when done correctly, can help prevent denials and missed charges.

Technology Benefits

Guidehouse deploys exceptional technology that:

- Is scalable (web-enabled) and growth oriented
- Enables efficiency
- Facilitates accurate and comprehensive charge-master content
- Is cloud-based (enables automation) and allows for pre-bill analysis/standard post-bill review
- Allows for a centralized financial clearance center
- Employs real-time management reporting tools
- integrates with any major patient accounting platform

Patient Fianncial Services (PFS)

Back-end patient account resolution services are designed to realize accurate and prompt payment after care is provided. PFS serves a critical role in provider organizations, striving to achieve full and timely collection of payments. Billing and collections are the cornerstone of account technology support.

PFS functions, when done correctly, can expedite the collection of payments from those that are under obligation to reimburse for clinical care.