

Revenue Cycle Automation

A view for Healthcare
Revenue Cycle Leaders



May 19,



Caroline Znaniec

Managing Director

Healthcare Provider Operations & Revenue Integrity Leader

📞 +1 410.463.9867

✉️ Caroline.Znaniec@protiviti.com

📍 Washington, DC

Caroline is a Managing Director and Protiviti's Provider Operations and Revenue Integrity Leader, and lead for healthcare transaction services. She has 27+ years of combined professional consulting and industry experience in the healthcare industry. Caroline works with various healthcare provider organizations, investors and private equity firms. Caroline has experience serving in industry roles such as Corporate Compliance Officer and Director of Revenue Integrity for integrated health systems. She is a recognized industry speaker and author in the areas of revenue integrity, revenue cycle transformation, regulatory compliance, electronic health record design, implementation and optimization, and data analytics.

Caroline is an advisory board member of the National Association of Healthcare Revenue Integrity (NAHRI), a Maryland Healthcare Financial Management Association (HFMA) chapter leader, and member of the American Association of Healthcare Administrative Management (AAHAM) national certification committee – advancing the revenue integrity profession and professional credential. In her tenure, Caroline has advised in the development and design of software applications to enhance revenue integrity processes and workstreams; including charge description master maintenance, data mining for coding and billing opportunities, and documentation to coding logic for ICD-10.

The Case for Automation

Revenue cycle automation can increase revenue, decrease denials, speed up prior authorization and claims, and remove repetitive clicks that hinder daily operations. With robotic process automation, health systems can have more seamless execution of administrative actions, appointment management, billing and enrollment, and data management.

Machine learning, robotic process automation, and natural language processing can create a layered intelligent automation approach. Such a strategy allows healthcare leaders to layer different technologies, increasing the number of processes that can be automated.

CHIEF HEALTHCARE
EXECUTIVE®

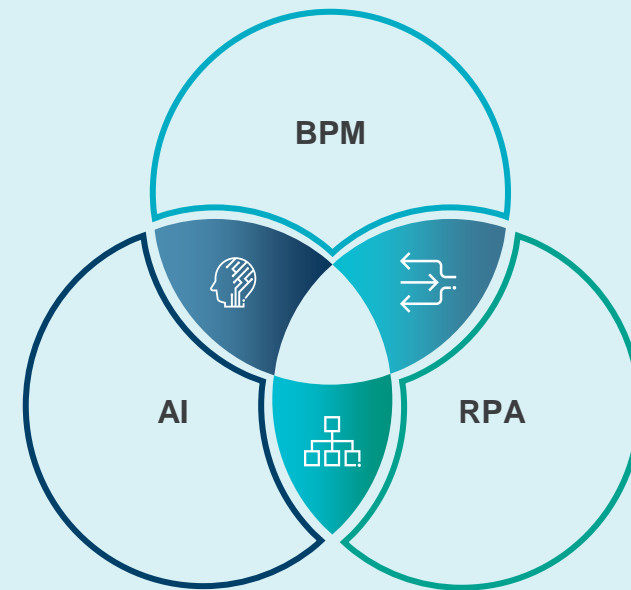
What is Intelligent Automation?

Intelligent Automation (IA) is the combination of Business purpose-fit technology selection across these three pillars, leveraging each technology for its core purpose as noted below, and integrating for complementary capabilities.

BPM End-to-end orchestration of a workflow process

RPA Performs a step in a workflow process according to provided rules

AI Ability to interpret information without explicit instructions and generate recommendations



Why are organizations automating?



Complete, enterprise-wide automation introduces

40%

greater productivity and efficiency improvements over piecemeal automation alone.

78%

executives plan to invest in automation to fill staffing gaps.

RPA tools cost as little as

1/5th

of an onshore FTE, or

1/3rd

that of an offshore FTE.



Returns organizations can expect from automation

The average ROI achieved by businesses is up to **250%**, typically paid back within **six to nine months after deployment.**



Top performers received an average of **380%** ROI on their RPA investments.

Other benefits include:

- Time and cost savings.
- Capacity creation.
- Higher efficiency and accuracy.
- Process improvement.
- Higher scalability.
- Improved employee experience.
- Improved customer experience.
- Higher governance.
- Reduced operational risk.



Healthcare Market Insights & Perspectives



Forces that directly affect the healthcare revenue cycle and its overall success

- **Reduced workforce**
- **Payer shifts**
- **Lack of specialized skills**
- **Unoptimized technology**
- Acquisition/consolidation
- Regulatory changes
- Ineffective staff training
- Manual workarounds
- Reactive culture
- Increased costs



Negative results from the internal and external forces effecting the revenue cycle

- **Increased denials**
- **Decreased reimbursements (inc. payment accuracy)**
- **Lack of data insight and transparency**
- **Customer dissatisfaction (internal and external)**
- Increased cost to collect
- Governmental and payer scrutiny
- Staff retention
- Slow to strategize and sustain

Healthcare Revenue Cycle Trends Towards Automation



Growth YOY



Hospitals Usage



Remaining
Hospitals Looking
Towards
Automation



Financial Leaders
Want Purpose Built
Automation in
RCM

- STREAMLINE**
- MORE WITH LESS**
- REDUCE COST TO COLLECT**

Areas of Focus for Purpose-Built Automation



Payment Posting, Reconciliation



Claims Management



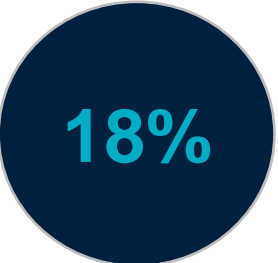
Revenue Capture, Integrity



Prior Authorization



Patient Registration QA



Patient Estimates



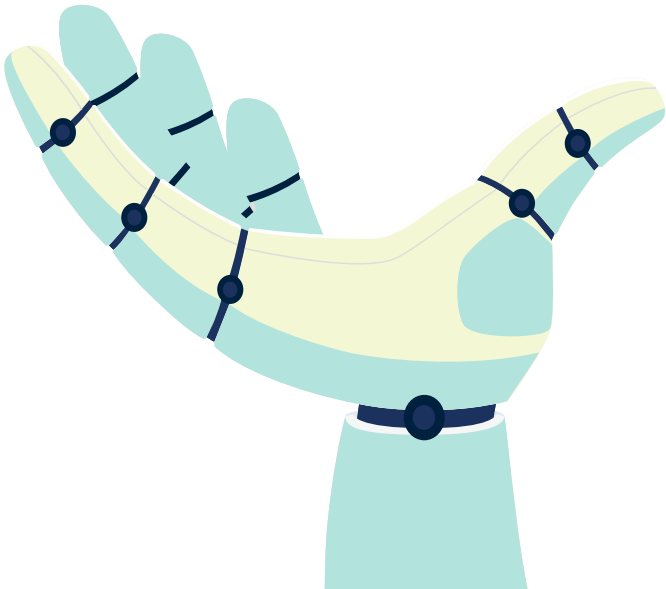
Denial Management



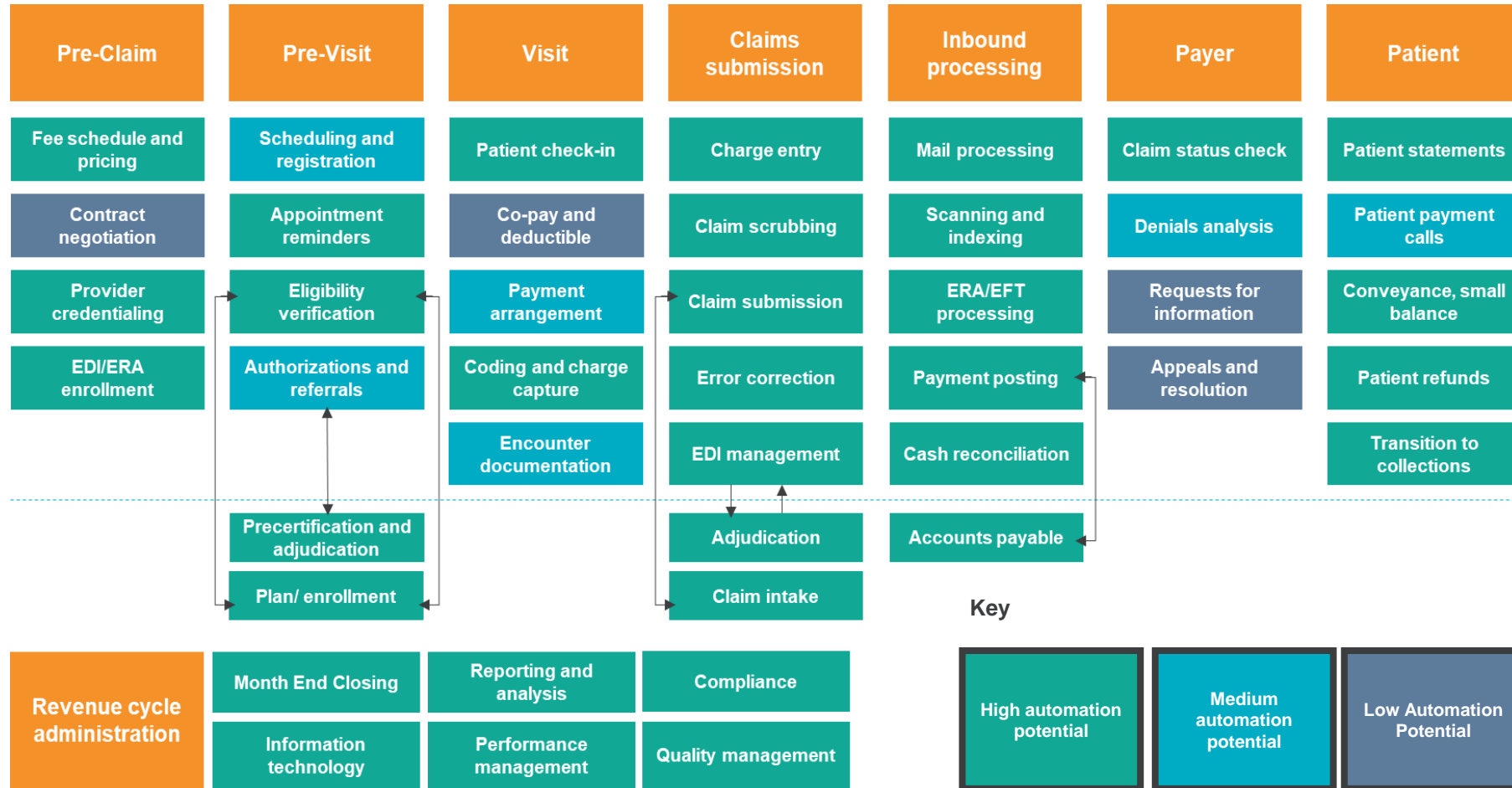
Eligibility Verification



Coding



Where are biggest opportunities for healthcare revenue cycle?



what is the opportunity that lies ahead...



Practical Applications of Revenue Cycle Automation

Payment Posting

CLIENT CHALLENGE

- Client had concerns of inefficiencies and related costs for 30 customers, specific to challenges around payment posting.
- The payment posting process required manual intervention and increased resource time, and did not lend itself to scalability with growth of the organization.

VALUE REALIZED

- 3 Attended bots deployed
- Provides for daily processing
- ROI of 292%
- Full-time equivalent savings of ~37%
- Increased productivity and provided for upskilling of staff to focus on value-added initiatives

APPROACH

- Implemented the use of “attended bots” to run scripts that automated repetitive tasks, across multiple platforms.
 - Login to various clearinghouses
 - Login to third-party payors
 - Extract electronic remittance advice (ERA), download into the billing platform and parse information
 - Validate payment posting and check for errors



Charge Capture and Billing

CLIENT CHALLENGE

- Client was utilizing a manual paper process to identify, capture and code for services rendered.
- Manual processes presented issues of lost charges, poor coding quality and delays in reimbursement.

VALUE REALIZED

- 1 Deployed Bot
- Streamlined the collection of medical and financial record information
- Reduced error rates in data entry
- Improved efficiency and the integrity of the data
- Provides a workflow for ease of audit
- Reduced FTE by 40%

APPROACH

- Implemented the use a bot to translate data between workflows and systems, and support validation efforts:
 - Bot downloads electronic superbill
 - Coder validates and reconciles superbill
 - Coder abstracts procedure and diagnosis codes
 - Information is inserted into the practice management system
 - Charges are submitted



Claims Statusing – Query for Pending Accounts

CLIENT CHALLENGE

- Client was not able to maintain pace with the growth of volume and acquisitions.
- Overall days in A/R continued to grow.

VALUE REALIZED

- Increased followed up claims without additional hiring
- Accelerated cash flow by >\$20 million
- Achieved a >\$1 million net impact to timely filing
- Redeployed 6 staff members to other revenue cycle functions
- Decreased A/R by >15% in the first couple of months

APPROACH

- Implemented an automated claims status inquiry tool that integrated into the existing electronic health record.
- The bots eliminated manual claim checks on payer websites and return the status of the claim back to the electronic health record.
- Based on the status of the claim , the bot would trigger additional steps to alert attention to staff.



Revenue Cycle RPA COE

CLIENT CHALLENGE

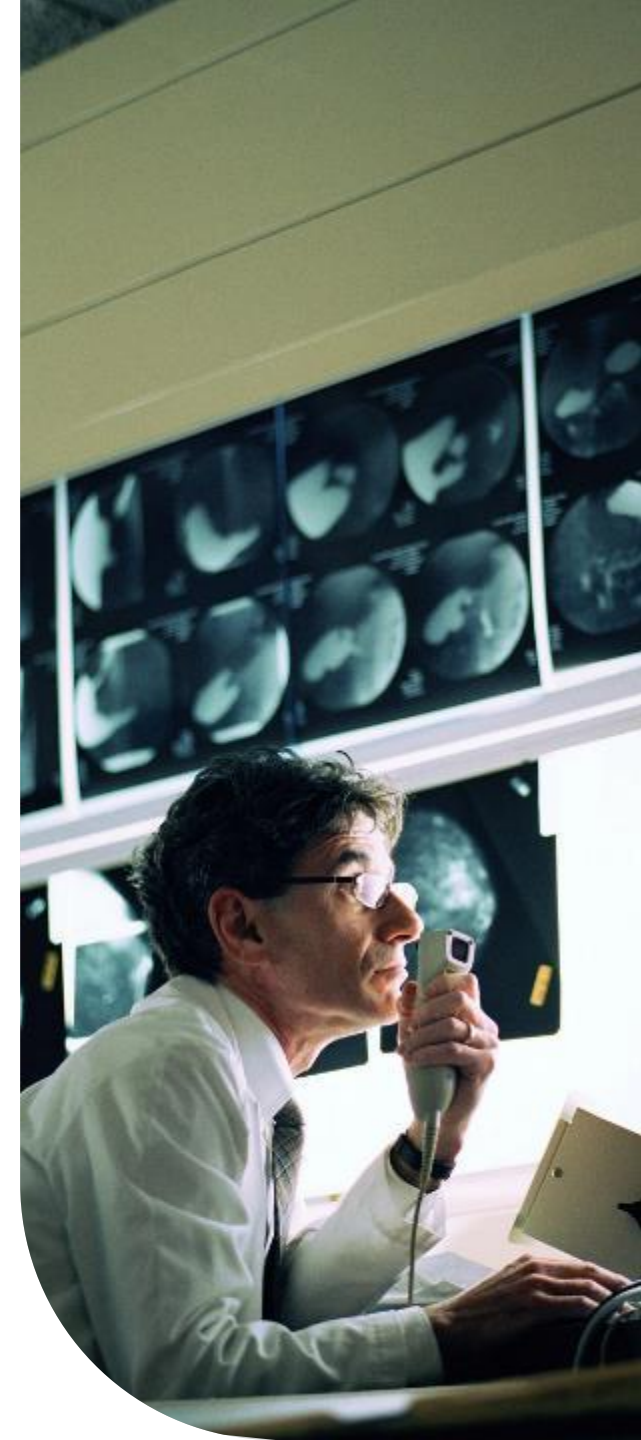
- Standing up the Automation Anywhere Robotic Process Automation (RPA) platform and initiating the first implementation of RPA for the client's Healthcare Shared Service Organization.
- Building internal RPA skillsets to empower business units with the ability to design, build, operate, maintain and govern automated processes bots.
- Reducing the quantity of manual, repetitive, time-consuming processes which could be refocused on other valuable activities to improve worker morale.

VALUE REALIZED

- Worked with Information Technology Operations team to stabilize the newly installed Automation Anywhere platform.
- Established Azure DevOps Board to enable ongoing implementations and change control/management.
- Delivered the first nine automated processes bots built with across the healthcare organization.
- Reduced manual processing time and processing errors
- Created seven operational reports via Bot Insights to provide data driven optimization visualizations.

APPROACH

- Accelerated implementation and Center of Excellence Maturity by sharing and implementing lessons learned throughout the implementation.
- Collaborated with IT Operations to prove and stabilize Least Access Security model for unattended automation.
- Performed detailed assessment of 14 processes to define their future automated state and corresponding automation requirements.
- Developed RPA skillsets across five shared service business areas, providing RPA design and development training in more than 80 shoulder-to-shoulder sessions.

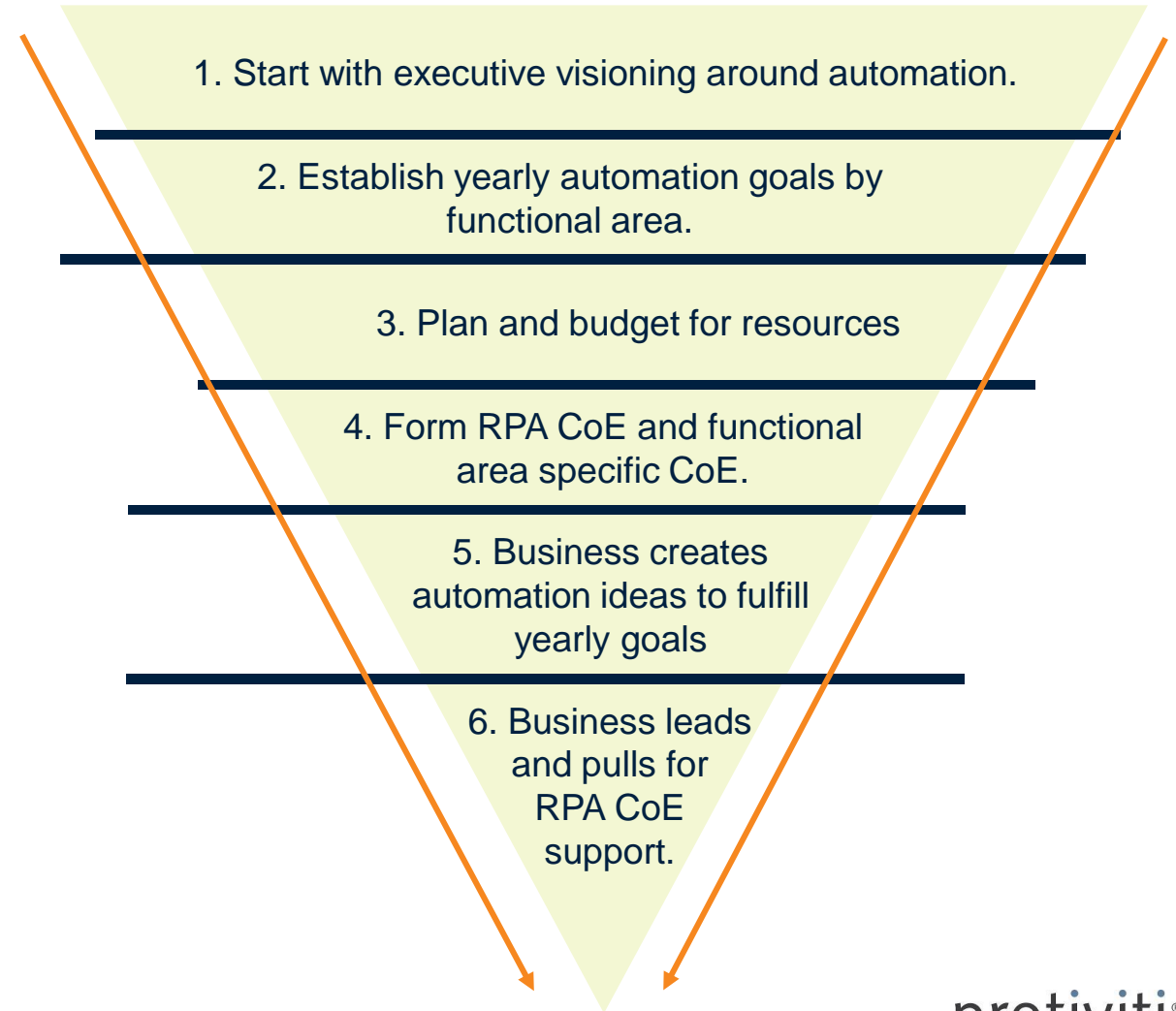


Bringing Automation to Life

Top-Down approach helps maximize Success & Adoption

Keys to Success and Prioritizing Efforts:

- Standardized processes
- Accessibility of data
- Data integrity
- Gain of efficiency and reduced labor costs
- Impact to patient care/experience
- Scalability
- Ability to report and monitor



Q&A



Caroline Znaniec

Managing Director

Healthcare Provider Operations & Revenue Integrity Leader

+1 410.463.9867

Caroline.Znaniec@protiviti.com

Washington, DC