

Solving revenue leakage

Meeting tomorrow's challenges with modern HIM and coding solutions



Revenue Integrity Services

Revenue integrity remains a major concern for hospitals and health systems nationwide. Revenue cycle teams are struggling with reimbursement challenges, unprepared to overcome — or even identify — the root causes of revenue leakage.



Many leaks occur because of common coding and billing issues: lack of attention to payer-specific coverage, coding, billing, or other administrative requirements; or failures to obtain prior approvals or

authorizations. Underpayments are a challenge too, due to mis-mapped charges or charge description masters (CDMs) missing current CPT-4 or HCPCS Level II codes or inaccurately reflecting the charge capture requirements of today's complex payer contracts.

Due to ICD-10's specificity — and continued issues with inaccurate claim coding — underpayments and denials are likely to continue. These issues take significant time and money to reprocess or appeal. Fortunately, Xtend Healthcare can help.

It starts with a call or meeting, where we'll discuss your unique challenges and goals. From there, we'll provide a **free diagnosis of your revenue cycle** and recommend solutions that can stop your leakage and help you identify and address future issues before they happen.

Did you know?

More than **26%** of U.S. hospitals are losing money. Annually, denial-related issues cost U.S. health systems nearly **\$9 billion** in administrative costs. A typical health system stands to lose an average of **3%** of their net patient revenue — or nearly **\$4.9 million** per hospital.

Sources:

- American Hospital Association (<https://www.aha.org/system/files/2018-05/fact-sheet-billing-explained-2018.pdf>)
- Becker's Hospital CFO Report, June 2017 (<https://www.beckershospitalreview.com/finance/denial-rework-costs-providers-roughly-118-per-claim-4-takeaways.html>)

"The consistency, dedication, and knowledge that your coding team has demonstrated have been exemplary."

— Dayle Harlow, Revenue Cycle Manager, Fillmore County Hospital, NE

| Issues | Xtend Healthcare's customized solutions |
|---|---|
| <ul style="list-style-type: none">• Less net revenue collected• Impacts on patient health management and outcomes• More payer denials and underpayments• Decrease in case mix index (CMI)• Low coder productivity and accuracy• More manual claim cleanups and edits | <ul style="list-style-type: none">• Coder training and education• Coding quality, documentation, and policy assessment• Payer coding audits• Interim HIM and/or coding management• Evaluation and management (E/M) coding audits• Charge capture audits• Denial and appeal management, leveraging machine learning algorithms• Inpatient/outpatient coding guideline development• CDI interim and/or assessment (hospital and physician)• CDM review and maintenance |

Contact us today. Revenue stability is closer than you think.

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