

Leadership in Revenue Cycle

9/21/16

Remarkable things happen here.™

UW Medicine

VALLEY
MEDICAL CENTER

Overview of career path

- Insurance Services ~11 years
- Professional Services ~ 7 years
- Hospital Services ~ 12 years
- Professional & Hospital Services ~4 years



Principal Financial Group:

- Agency Records Clerk
- Claims Examiner
- Senior Claims Examiner
- Assistant Claims Supervisor

Virginia Mason Clinic:

- Patient Accounts Billing Supervisor

Franciscan Family Care:

- Patient Accounts Manager

Medalia HealthCare:

- Patient Accounts Manager
- Business Office Manager

Providence Medical Group:

- Business Office Manager

HealthServicesNW:

- Assistant Director, Account Maintenance

MultiCare Health System:

- Director of Patient Accounts

HealthServicesNW:

- Director of Client Relations

Valley Medical Center:

- Director, Patient Financial Services

Valley Medical Center:

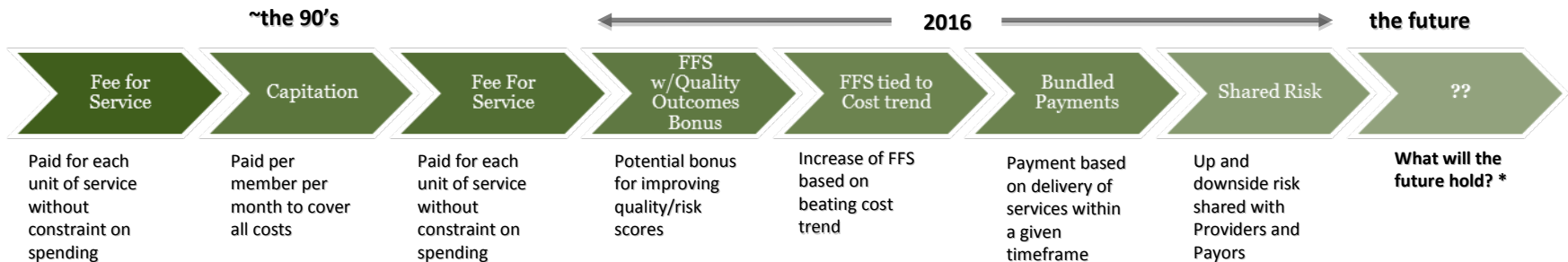
- Vice President, Patient Financial Services

- Vice President, Revenue Cycle

How have you seen the Revenue Cycle change during your career?

- Integration and blending of shared knowledge about the relationship between clinical care and revenue/charge capture
- More focus on the patient and patient outcomes
- Need to be more strategic, reduce rework, and continuously looking for ways to reduce costs
- Technology and tools that can support the investment and ongoing change
- Continuous changes in reimbursement strategies
 - Added complexity
 - Payer strategies changing rapidly and becoming more complex
 - FFS → Managed Care → FFS PPO → Bundled payments with risk contracts → Shift from Volume to Value

History of Healthcare Reimbursement Models



* Likely a combination of meeting quality, access and cost standards – methodology will include capitation(full risk) , bundled care, quality/access reporting


What changes are happening in your organization with Revenue Cycle Management and how are you adapting your revenue cycle practices?

- Revenue integrity leading the collaboration and education with clinical departments about changing revenue and reimbursement impacts
- Focus on the patient by streamlining processes
- Helping patients stay financially healthy
 - Focus on the patient
 - Patient Survey Billing Scores
 - **Doctor Communication** – respect, listening skills and communication ability of doctors
 - **Nurse Communication** – respect, listening skills and communication ability of nurses
 - **Staff Responsiveness** – answering call bells and responding to toilet needs
 - **Hospital Environment** – cleanliness and quietness of the hospital
 - **Pain Management**
 - **Medication Communication** – explaining medications to patients
 - **Registration Services** – professional, polite, respectful, timely
 - **Billing** – explaining our billing and payment procedures professionally prior to services
 - Creation of the **Billing & Payment Brochure**
 - **Discharge Information** – preparing patients for the next steps in their care
 - **Food Services** – quality of food and the courtesy of those who serve it
 - **Overall Rating** – rating the department or hospital on a scale of 1 – 10



Every Patient, Every Time

What are innovative strategies you have put into place in the last year or two?

- Focus on the Patient’s Financial Experience
 - New Online Tools
 - Expanded patient estimates - new online tools to aid patients with getting accurate estimates
 - Patient Television Tool - added online tool for patients to request Financial Advocacy visit and coordination to patient rooms)
 - MyChart - Expansion of capability to include billing, statements and online bill pay
 - Expanded point of service collection areas
 - ED & Radiology
 - Patient Liaison
 - ED to IP: coverage verification and expected out of pocket
 - Combining Business Office Areas
 - Customer Service
 - Single patient statement
 - Hospital and Professional Billing
 - Cash posting/Credit management
 - Insurance Follow Up and Denials
 - All payers except Worker’s Comp and Occupational Health have transitioned to new model
 - Collaboration Across Revenue Cycle
 - Driving the communication about the Interdependencies across Revenue Cycle areas of responsibility
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What challenges are you seeing from your payors?

- Determining ‘whose sandbox are we playing in?’
 - What regulations are applicable to your site?
- Regulatory reimbursement requirements
 - ACOs; Bundled payments; CJR; MACRA; MIPS vs APMs; Risk Contracts; Quality/Outcomes, Costs Contracts
- Regulatory billing requirements
 - 340B/HBB/PBB
- Things outside our control and no tools to manage effectively
- Pricing structure changes required as reimbursement changes



What does not change?

- People
 - Managing staff and varying skillsets in this changing environment
- Managing change
 - Helping people adapt when change is difficult
 - Helping them understand why it's important and getting their buy in