

## SUCCESS STORIES - SUMMARY

Project Name	Client	Brief Description	Key Analyses
Clinical Denials Reporting	Long-Term Acute Care (LTAC) Healthcare Provider	<ul style="list-style-type: none"><li>▪ <b>Built robust and comprehensive reporting</b> for client's RCM team to track key denial metrics, collectors' performance, priority denials, denial root causes etc. by integrating data from different sources (billing, denials, collections etc.)</li></ul>	<ul style="list-style-type: none"><li>▪ Weekly Denials Report</li><li>▪ Weekly RCA Report</li><li>▪ Weekly Collector Productivity Report</li><li>▪ Monthly Clinical Denials Executive Deck</li></ul>

# CLINICAL DENIALS REPORTING FOR LTAC HEALTHCARE PROVIDER

## ABOUT THE CLIENT

Client is **Long Term Acute Care(LTAC) healthcare provider** and has facilities in over 80 cities across the U.S.

### SITUATION



- Client had difficulties in taking actions on their clinical denials due to **lack of structured reporting of clinical denials** and non-availability of integrated Denials-Billing-Collection data. There was a **significant revenue leakage due to these clinical denials** with very low recovery rate.
- Merilytics partnered with the client in **creating a robust denials reporting suite** for their RCM (Revenue Cycle Management) team to track all clinical denial metrics, analyze denial root causes, prioritize high amount denials and streamline appeals process..

### VALUE ADDITION



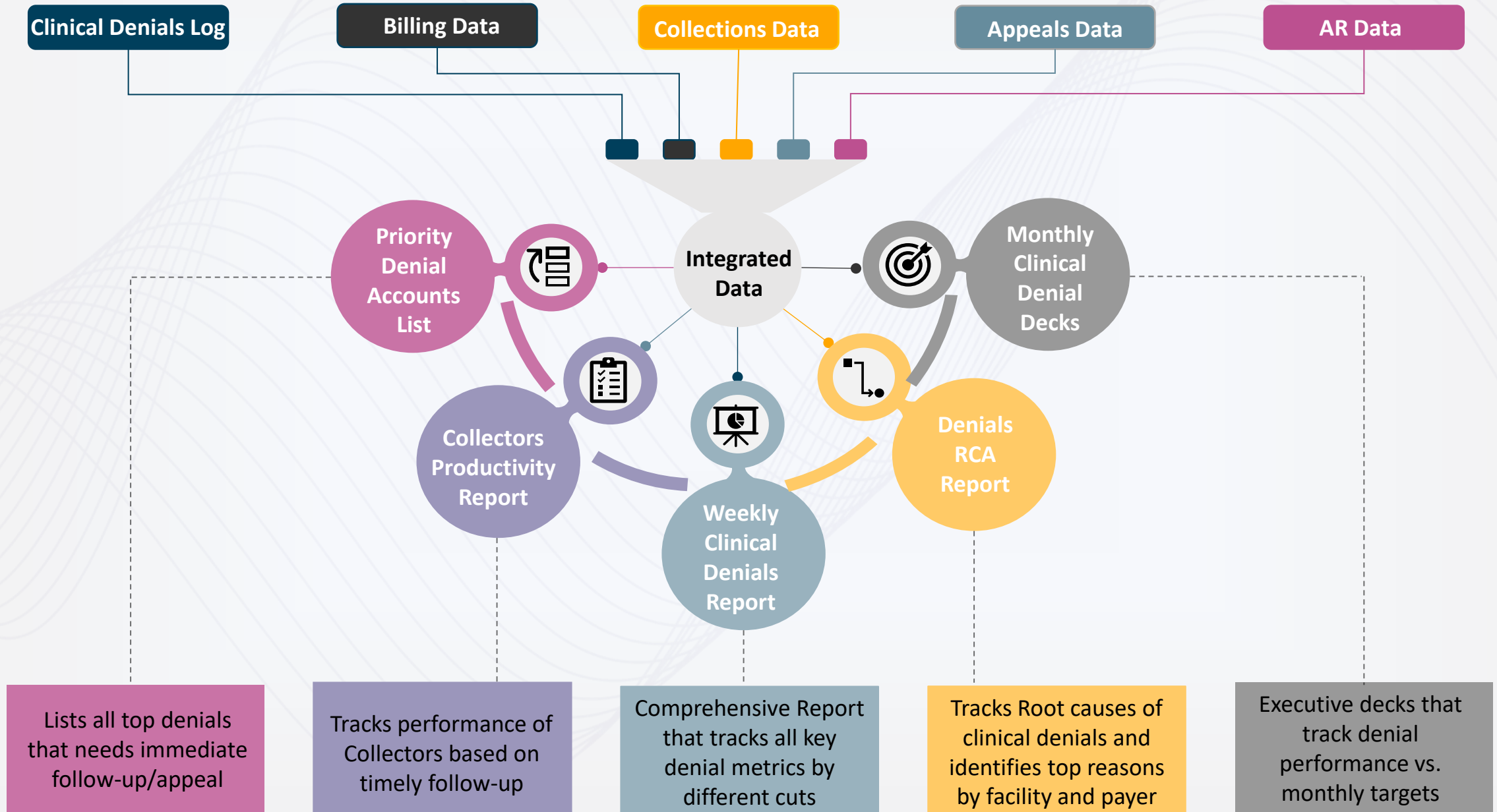
- Integrated data from different sources** (Clinical Denials logged data, Billing data, Cash Collections data, Claim Appeals data, AR (Accounts Receivable) data) in to single consolidated dataset
- Built a comprehensive weekly report** that tracks various denial metrics such as denied days, % denied days, denied amount, appeal cycle time, appeal outcome, collections on denials etc. by region, facility, insurance type, insurance plan etc.
- Developed a weekly RCA report**, by mapping denials to their root causes, to identify top denial reasons by facility and insurance payer
- Assessed performance of RCM collectors** specialized in clinical denials on how effectively they are following-up with insurance payers and submitting appeals on clinical denials on-time
- Built executive monthly decks** for each region to help RCM team heads to **review the performance on clinical denials, compare with set target monthly goals** for each region and identify areas of opportunities to reduce their clinical denial rate.

### IMPACT



- The comprehensive reporting suite helped client's RCM team to take actions on clinical denials and prevent potential denials upfront. This had a direct impact on their clinical denials and the **denial rate came down from ~6%** (in the quarter before the reporting) **to ~4%** (in the quarter after the reporting), which translates to a **prevention of ~\$7M/quarter in potential denial amount**
- Time taken to log** clinical denials into the system **went down from ~13 days to ~6.5 days**; and **time taken to appeal** the denials also **went down from ~70 days to ~50 days** (before vs. after reporting)
- Due to the timely actions taken by client's RCM team based on the reporting, the **collections on denials increased by ~25%**

## APPROACH & METHODOLOGY



# CLINICAL DENIALS REPORT - DENIAL RATE

ILLUSTRATIVE

**Facility**

Facility-01  
Facility-02  
Facility-03  
Facility-04  
Facility-05

**Region**

Region-1  
Region-2  
Region-3  
Region-4  
Region-5

**Insurance Plan**

Ins. Plan-01  
Ins. Plan-02  
Ins. Plan-03  
Ins. Plan-04  
Ins. Plan-05

**Insurance Group**

Ins. Group-1  
Ins. Group-2  
Ins. Group-3  
Ins. Group-4

**Medicare?**

Medicare  
Non-medicare

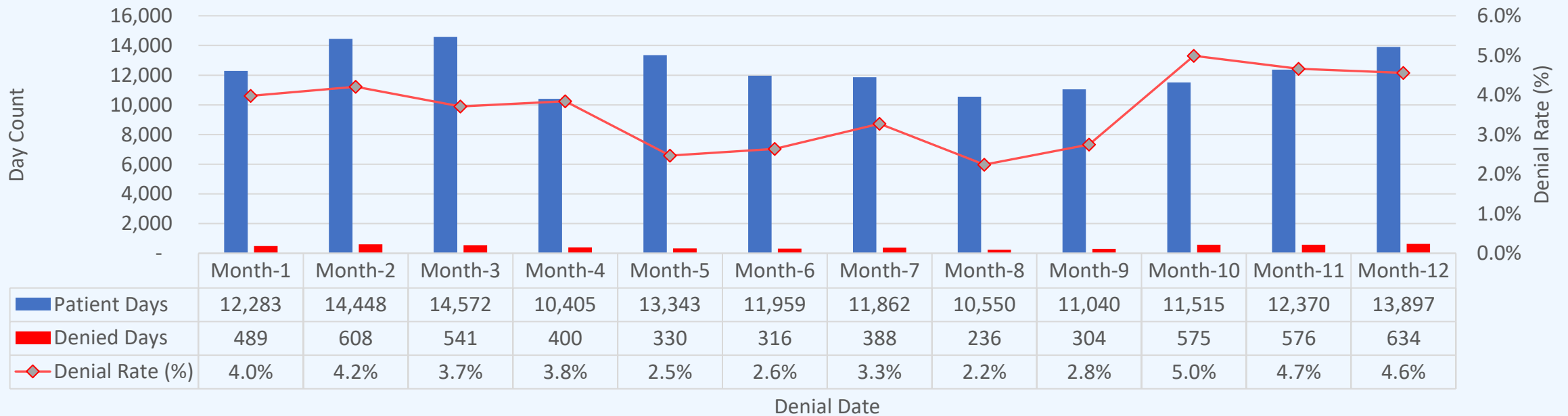
All Periods

MONTHS

JN JUL AUG SEP OCT NOV E

Tracks Denial Rate (Denied Days vs. Patient Days) over time by different cuts of facility, insurance etc.

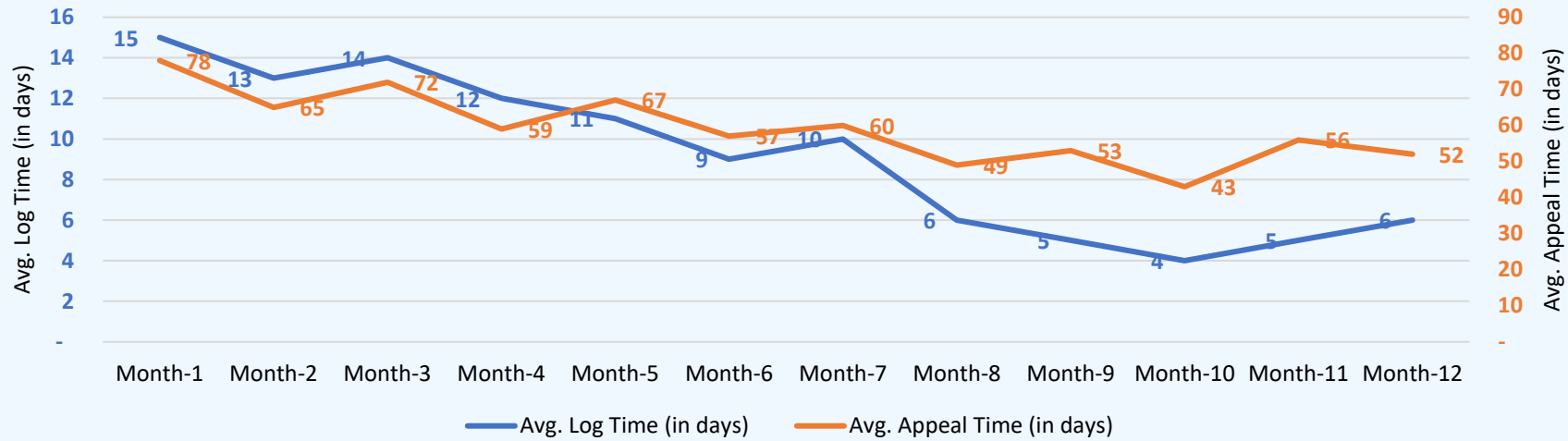
## Patient Days vs. Denied Days Comparison (Last 12 months)



# LOG TIME, APPEAL TIME AND COLLECTIONS ON DENIALS

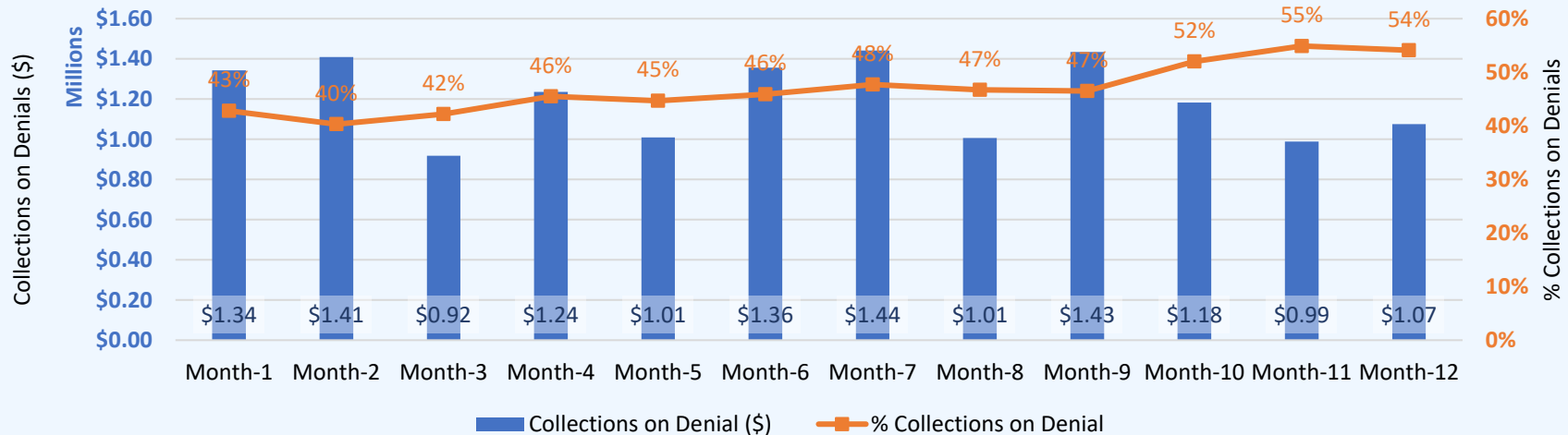
ILLUSTRATIVE

### Log Time and Appeal Time trend over last 12 months



**Log Time** (days taken to log the denial from insurer into the system) and **Appeal Time** (time taken to appeal a denial from insurer after it is logged) are key metrics to track performance of RCM response to denials. Faster logging and appeals increases the probability of denial overturn.

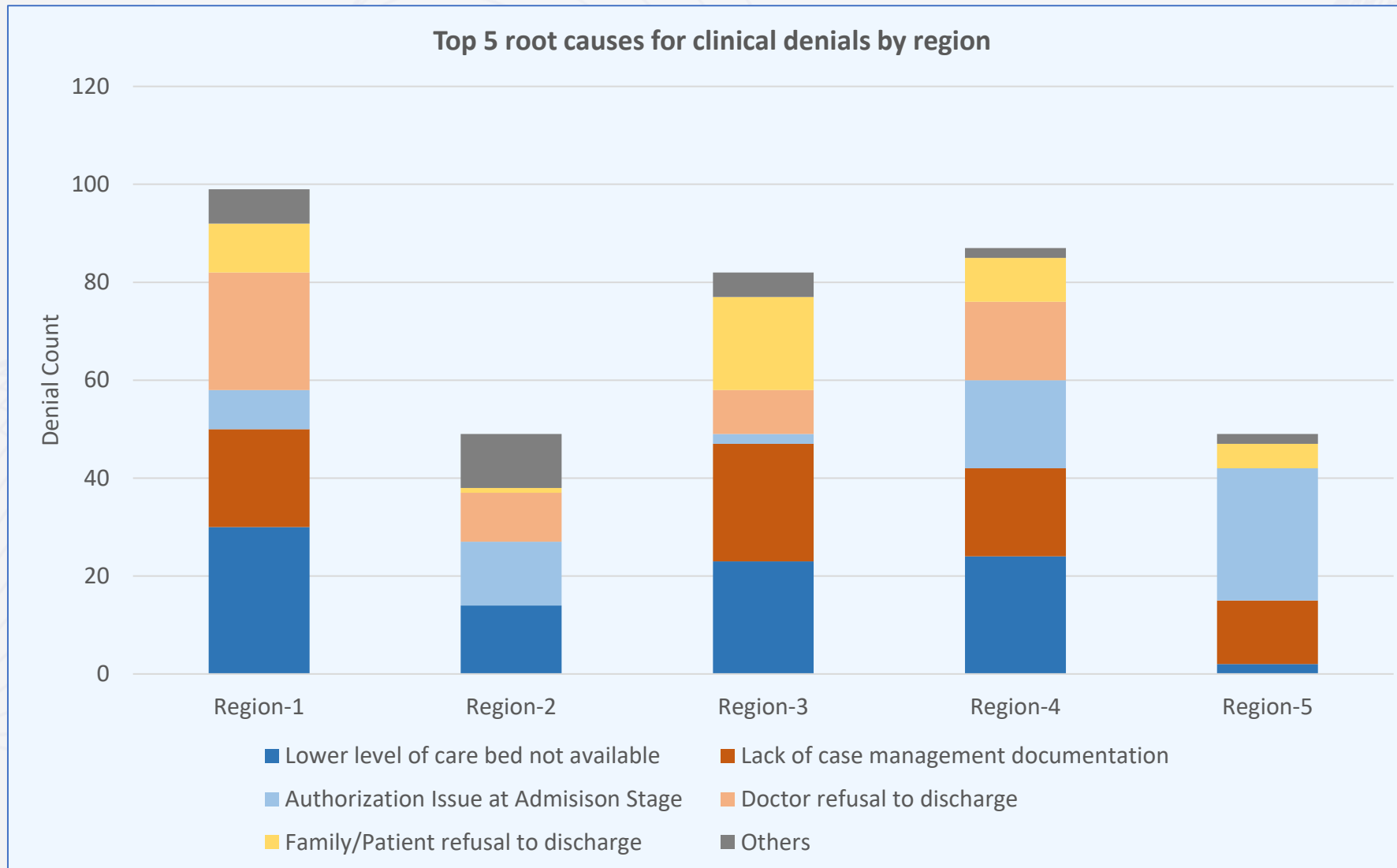
### Collections on Denial - Trend over last 12 months



Even after receiving a denial from insurer, effective response through follow-ups and appeals could overturn denials leading to collections after denials. **'Collections on Denials'** represents how much RCM team is able to collect even after a denial.

# RCA REPORT - TOP ROOT CAUSES BY REGION

ILLUSTRATIVE



Helps understand what are **top root causes for denials by each region**. A further drill down into payer level will provide more insights at an insurance level.



# PRIORITY DENIAL FOLLOW-UPS BY COLLECTORS

**Facility**

- Facility-01
- Facility-02
- Facility-03
- Facility-04
- Facility-05

**Region**

- Region-1
- Region-2
- Region-3
- Region-4
- Region-5

**Insurance Plan**

- Ins. Plan-01
- Ins. Plan-02
- Ins. Plan-03
- Ins. Plan-04
- Ins. Plan-05

**Insurance Group**

- Ins. Group-1
- Ins. Group-2
- Ins. Group-3
- Ins. Group-4

**Medicare?**

- Medicare
- Non-medicare

**All Periods** MONTHS
 

JN JUL AUG SEP OCT NOV E

Next Follow-up Due Date	Last Follow-up date	Patient Account	Insurance Plan	Insurance Group	Facility	Region	Collector	Current Denied AR
7-Mar	21-Feb	PA - 01	Ins Plan - 01	Ins. Group-1	Facility-01	Region-1	Collector-1	\$174,443
8-Mar	22-Feb	PA - 02	Ins Plan - 02	Ins. Group-2	Facility-02	Region-2	Collector-2	\$126,544
9-Mar	23-Feb	PA - 03	Ins Plan - 03	Ins. Group-3	Facility-03	Region-3	Collector-3	\$160,341
10-Mar	24-Feb	PA - 04	Ins Plan - 04	Ins. Group-4	Facility-04	Region-4	Collector-4	\$192,320
10-Mar	24-Feb	PA - 04	Ins Plan - 04	Ins. Group-4	Facility-04	Region-4	Collector-4	\$175,026
11-Mar	25-Feb	PA - 05	Ins Plan - 05	Ins. Group-1	Facility-05	Region-5	Collector-5	\$190,058
11-Mar	25-Feb	PA - 05	Ins Plan - 05	Ins. Group-1	Facility-05	Region-5	Collector-5	\$101,978
12-Mar	26-Feb	PA - 06	Ins Plan - 06	Ins. Group-2	Facility-06	Region-6	Collector-6	\$187,424
12-Mar	26-Feb	PA - 06	Ins Plan - 06	Ins. Group-2	Facility-06	Region-6	Collector-6	\$132,328
13-Mar	27-Feb	PA - 07	Ins Plan - 07	Ins. Group-3	Facility-07	Region-7	Collector-7	\$179,931
13-Mar	27-Feb	PA - 07	Ins Plan - 07	Ins. Group-3	Facility-07	Region-7	Collector-7	\$138,472
14-Mar	28-Feb	PA - 08	Ins Plan - 08	Ins. Group-4	Facility-08	Region-8	Collector-8	\$116,810
14-Mar	28-Feb	PA - 08	Ins Plan - 08	Ins. Group-4	Facility-08	Region-8	Collector-8	\$109,453
15-Mar	1-Mar	PA - 09	Ins Plan - 09	Ins. Group-1	Facility-09	Region-1	Collector-9	\$191,701
15-Mar	1-Mar	PA - 09	Ins Plan - 09	Ins. Group-1	Facility-09	Region-1	Collector-9	\$144,509
16-Mar	2-Mar	PA - 10	Ins Plan - 10	Ins. Group-2	Facility-10	Region-2	Collector-10	\$113,759
16-Mar	2-Mar	PA - 10	Ins Plan - 10	Ins. Group-2	Facility-10	Region-2	Collector-10	\$169,627
17-Mar	3-Mar	PA - 11	Ins Plan - 11	Ins. Group-3	Facility-11	Region-3	Collector-11	\$138,616
17-Mar	3-Mar	PA - 11	Ins Plan - 11	Ins. Group-3	Facility-11	Region-3	Collector-11	\$137,724

Helps RCM Collectors **identify the accounts that need follow-up in next couple of weeks** based on their previous follow-up dates. This prioritization makes sure that all accounts are followed-up in a timely manner without missing any due dates.