

# Building A Revenue Cycle Team and Finding the Win!

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## Defining Revenue Cycle

Knowing Your Processes and Players



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**Revenue Cycle:** All of the administrative and clinical processes which represent the “life” of a patient account from its creation until payment resolution for an encounter or a series of encounters.

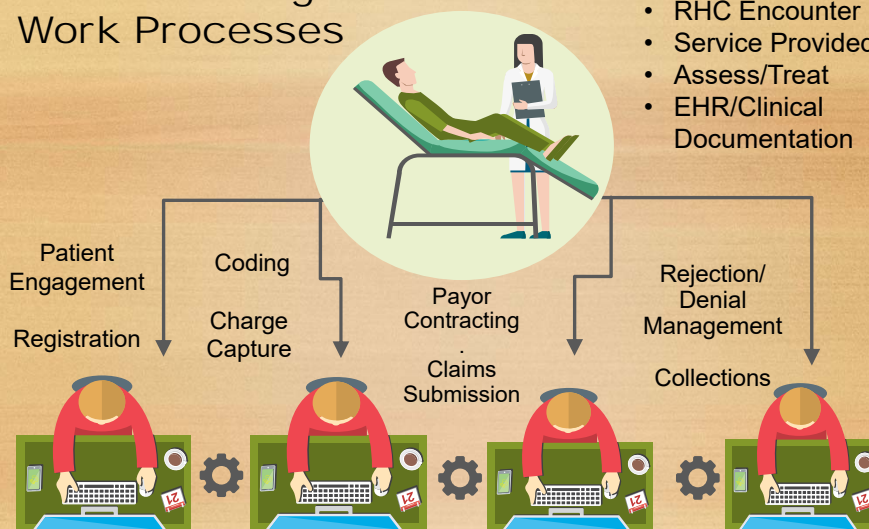
The inter-related functions, when executed efficiently, result in the maximum reimbursement in the shortest amount of time (A/R days). A weakness in any of the individual processes can directly effect the overall revenue cycle performance.

**We tend to think of RCM as an after –the –fact, back end function when in fact most of our opportunities for optimizing revenue cycle performance and maximizing reimbursement are found early in the revenue cycle.**

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## Understanding Your Work Processes

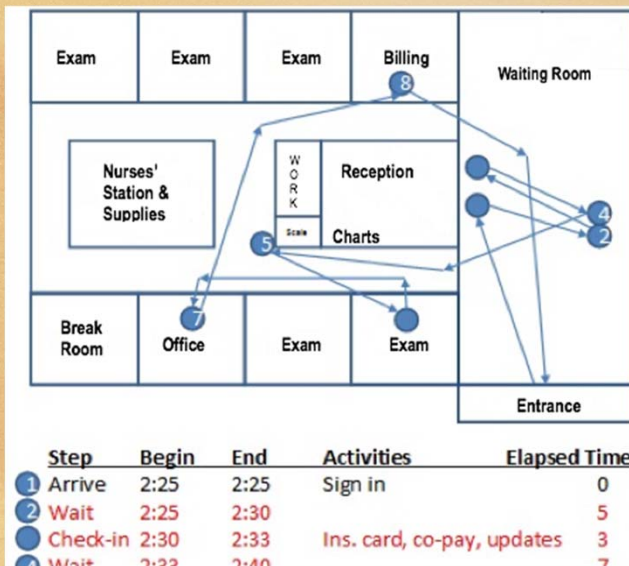
- RHC Encounter
- Service Provided
- Assess/Treat
- EHR/Clinical Documentation



Quality and Performance Improvement

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### Use Tools to Gain Understanding



Follow the:

1) Motion

and

2) Money

Spaghetti Mapping

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### Identifying Your Team

Give them a seat at the table.



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- Recognize Individual Strengths, Knowledge and Skills
- Leave Personal Agendas Outside the Door
- Strive for a Common Goal or Outcome. Be missional.
- Seek Performance and Process Improvement
- Incentivize In a Way that Strengthens Your Team

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- Prevent Silo-ing!
- Encourage Collaboration
- Reward Problem-solving and creativity
- No one gets thrown under the bus!
- Zero tolerance for blame-shifting
- Accountability and Responsibility

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Look for real fixes instead of Band-aids!


- Gain Feedback from Players
- Prevent Individual Work-arounds
- Go back to where the “fail” happened
- Re-engineer the process until it works better

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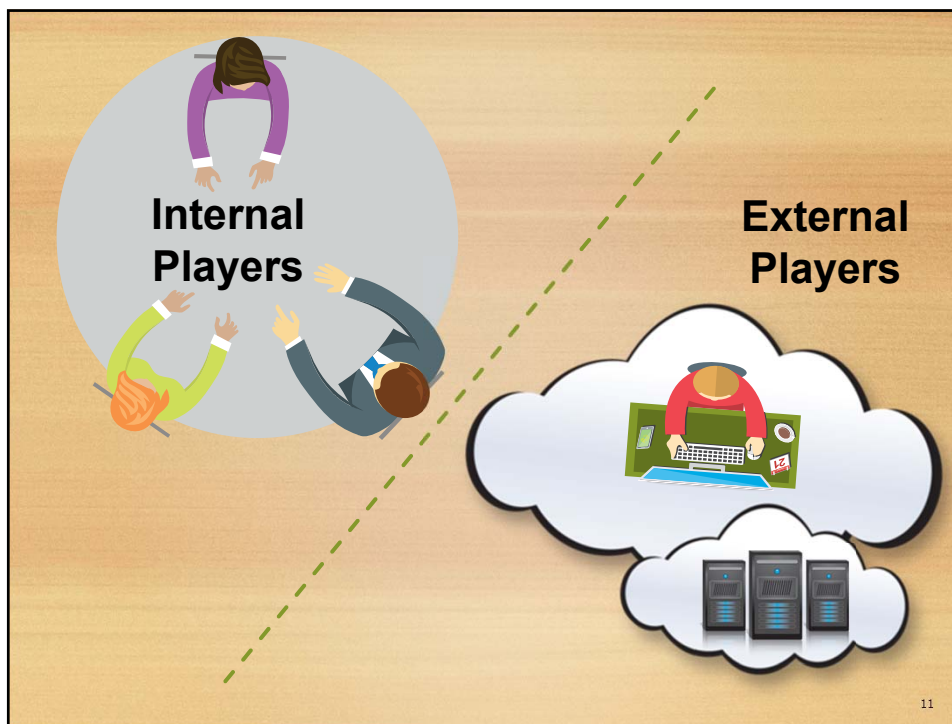
## Outsourcing RCM Functions

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Does it work for RHCs?

  
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## Pros & Cons of Outsourcing RCM in Rural Healthcare

### Pros

- Skill and Workforce Gaps
- Health Information Technology
- Standardized Processes
- Economy of Scale
- Objective

### Cons

- Loss of Local Workforce
- Moving Processes farther from the Knowledge Base
- Loss of Staff Engagement/Buy-in
- Loss of Control
- "Rural" is different

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# The Patient Experience as Part of RCM

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## Bringing Healthcare Consumers to the Table and In the Door



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### What your patients are really thinking?



Didn't I fill out this same paperwork last month?

I have been waiting over an hour. Isn't my time valuable, too?

What will I owe for today's visit? They don't always know.

I could have been in and out already at the CVS in Baton Rouge by now.!

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- Ease of Scheduling; Same day appointments
- **Well-trained, welcoming, dedicated, unburdened front desk staff**
- Customer service and excellence
- Minimize Paperwork and Redundant Processes
- Give them something they can't get at the "doc-in-box". Give them something they do get there.
- Clear, non-retaliatory, communication about financial practices and patient responsibility.

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- Maintain community engagement.
- Timely and Clear Statements
- Create Buy-In
- Positive patient-staff-community relationships
- Help patients overcome doubts about technology
- Remember that the patient is our customer. Know your community demographics.

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Coming Full Circle

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For the WIN!

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Feel free to email with follow-up questions or comments.

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