

Healthcare organization sees 100% turnaround regarding medicaid collections

Building trust and contributing to the community

Divide and Conquer: Delegating caseloads by health plan was first step to increasing cash payments

The circumstance:

Northwest Medical Center, located in Tucson, Arizona, lacked the staff to effectively collect on outstanding receivables. Verifying third-party eligibility and billing subsequent claims is difficult for many hospitals. Most providers simply don't have the resources to visit discharged patients at their homes, collect pending documentation, get patients to Department of Economic Security appointments, and provide information on social services.

The Solution:

Integrated Health Management Services (IHMS) partnered with Northwest Medical Center to work through the facility's eligibility and recovery backlog. IHMS took the caseload, divided it by health plan and assigned the newly categorized cases to its Collectors. The Collectors then worked aging reports each month and sorted spreadsheets according to claim issues they encountered. This allowed the Collectors to become experts on each health plan and provided detailed data to discuss with the health plans and Arizona Health Care Cost Containment System (AHCCCS) when contracting and resolving global issues.

This also allowed IHMS to see where the eligibility and recovery breakdown began at the facility level and to work with various hospital departments to make improvements. At the same time, they worked with the health plan and the State AHCCCS to ensure that all requests were within guidelines and in keeping with the facilities contracts. This two-level approach to collections enabled IHMS to initially correct all outstanding claims and ultimately meet the requirements of various health plans and get claims paid.

To facilitate the process, IHMS prepared all re-bills in the same way, used a specific standard for appeal letters and attachments, and elevated issues to the plans in a routine manner. Collectors worked to understand State AHCCCS policies, as well as the rights of the health care providers. Collectors exercised Northwest Medical Center's rights by appealing inaccurate denials. If appeals were not addressed promptly, IHMS then requested State Fair Hearings.

IHMS also worked very closely with the health plans on global issues and encouraged them to become true partners in the eligibility and recovery process.

The Outlook: Today, Northwest Medical Center has high conversion rates to AHCCCS coverage and their receivable status exceeds the corporate standard for percentage of aged claims. By continuing to pursue Northwest Medical Center's goals, IHMS strives to help the facility manage internal changes, as well as issues rising from ongoing budget and policy changes within the State Medicaid system.