



Wallace Thomson Hospital Automates to Maximize Limited Resources

RelayAssurance and RelayClearance Combine to Help Small Hospital Deliver Big Results



Located in the Heart of Union County in the Piedmont Region of South Carolina, Union Hospital District serves the 29,000 residents of Union County. Established as a Hospital District in 1946, with only Wallace Thomson Hospital in operation, the District now encompasses the hospital, Ellen Sagar Nursing Home, Union County EMS and Carolinas Health Associates. Along with a multi-specialty medical staff, the hospital provides a vast array of services and also partners with many agencies to offer community benefit services.



Quick Facts

- Hospital System: Union Hospital District – Wallace Thomson Hospital
- Solutions: RelayAssurance, RelayClearance
- Employees: 330
- Medical Staff: 16 Physicians

Critical Issues

- Needed to stay abreast of code changes
- Sought streamlined workflow for claims management
- Wanted a solution to determine charity eligibility

Results

- Identified procedures that were not being reimbursed
- Streamlined claims management processes
- Leveraged Propensity to Pay for charity eligibility

Small Hospital, Big Challenges

As a small, not-for-profit community hospital, Wallace Thomson treats a high volume of self-pay patients. Much of the patient access operation was based on manual processes. On the back end, a lack of visibility into CPT code changes and claims status – as well as the ability to efficiently identify the source of claim issues – impacted both revenue and staff productivity.

The inherent challenges of managing the revenue cycle for a small hospital require the wearing of many hats – from Registration in the business office, to Medical Records, Case Management, and Physician Billing. It's a juggling act that Union Hospital District Director of Revenue Cycle Roger Miller has mastered through experience.

Still, there's a limit to what a small team can accomplish.

Keeping abreast of changes originating from the payer side typically requires a dedicated team of full-time employees for large hospital systems. Even then, there are code changes and errors that result in rejections that impact reimbursement and, ultimately, the hospital's bottom line. Factoring in the need to optimize staff efficiency and eliminate redundant steps and manual tasks, Miller knew that the hospital (and the entire health system) would benefit from new revenue cycle automation solutions.

Before joining Union Hospital District, Miller managed a network of 13 specialty hospitals through a central business office, where he had been exposed to RelayHealth Financial solutions, including RelayAssurance and RelayClearance. He cites the user-friendliness, the ability to readily maneuver through claims to identify errors, the extensive Medicare claim edits, and at-a-glance dashboard

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Roger Miller
 Director of Revenue Cycle
 Union Hospital District

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capabilities of the RelayHealth Financial solutions as reasons why he selected RelayHealth Financial product solutions.

Optimizing Efficiency & Generating Clean Claims

With limited staff and budget, Miller needed solutions to allow his staff to better manage claims, reduce the number of manual touch points, and facilitate patient access and verify charity eligibility. The hospital also didn't have time for a lengthy implementation process, and could not add infrastructure to accommodate an on-site solution.

RelayAssurance was chosen to help ensure the quality of claims submitted and to monitor their progress.

"With RelayAssurance, the errors in claims are very obvious, and they're easy to correct online," says Miller.
"From an operations standpoint, you want to see your employees be efficient. At the same level, looking at the edits the system has – especially for Medicare through MDE – that really had me hook, line and sinker."

Denial reports and Managed Claim Assignments in RelayAssurance allow Wallace Thomson billing personnel to evaluate claims and determine whether a problem stems from an issue on the biller's side or one that requires follow up. Error claims are routed automatically to representatives for follow-up action.

Meanwhile, Wallace Thomson Patient Access staff would benefit from RelayClearance's eligibility verification – particularly as it related to charity care.

"What attracted us to RelayClearance was the dashboard, as well as the report mechanism, which helps with our charity programs and Medicare and Medicaid billing. It's a very powerful tool for a community hospital."

Clarity and Confidence

Within weeks of going live with RelayAssurance, the staff at Wallace Thomson identified a previously unknown code issue that resulted in non-reimbursement for Magnetic Resonance Angiography (MRA) procedures.

"What we found, using RelayAssurance, was that Medicare was processing the claims with the wrong CPT codes, and instead of returning the claim they simply didn't pay for that MRA," says Miller.

"It's been huge to find invalid CPT codes that, with our old system, would have gone out the door and resulted in a missed reimbursement."

Miller notes that, even as a director, he uses RelayAssurance every day – monitoring the claims that his billers have on hold, and those assigned for follow-up.

"We're really enjoying the system," he notes. "Operationally, it's just a great tool."

With RelayClearance, Patient Access personnel log on at the beginning of a shift, and the dashboard displays a summary of patients for whom eligibility searches were performed.

"We've automated self-pay, scrubbing for both Medicare and Medicaid on any self-pay patient. So that was a big enhancement," says Miller.

Perhaps the biggest benefit RelayClearance provided Wallace Thomson is the ability to gauge Propensity to Pay. This feature is now employed by the hospital on all of its charity applications, and its impact has been positive.

"Using RelayClearance, we've generated a lot of good information – things that help us feel confident about assisting patients."