medevolve

RCM Advantage Suite

MedEvolve's differentiator is our commitment to transparency, automation and accountability across the revenue cycle.

Our Secret Weapons: Artificial Intelligence and Machine Learning

MedEvolve's RCM Advantage Suite is designed to uncover cash opportunities, identify problem areas and resolve issues quickly to improve financial and operational performance and reduce cost to collect.

The suite combines AI-driven workflow automation solutions and robust data analytics to streamline time consuming manual processes while providing total transparency into the revenue cycle.

- MedEvolve Power Analytics
- MedEvolve RCM Workflow Automation solutions:
  - Accounts Receivables (AR)
  - Patient AR
  - Financial Clearance

> "The system is like a GPS: representatives sit down, login to MedEvolve RCM Workflow, and hit go, and the system leads them."
>
> *Jonathan Parisi*
> *Director of Business Operations and Strategy*
> *Neurosurgeons of New Jersey*

> "We've already seen an 15% reduction in A/R and we anticipate additional long-term improvements as the machine learning algorithms continue to identify new opportunities."

MedEvolve Power Analytics

With robust real-time reporting, you will have answers to important questions such as:

- What is the value of my AR?
- When will I get paid?
- What is the cash opportunity?
- What is the Status of my AR?

MedEvolve's clients have access to real-time reports and dashboards that provide a comprehensive view of their revenue cycles. MedEvolve's analytics solutions make it easy to identify areas for process improvement, cash opportunity, negative patterns or trends and prevent them from recurring to reduce cost to collect. Monitor Key Performance Indicators (KPIs) and benchmarks to compare against similar practice anytime.

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MedEvolve RCM Workflow Automation

Accounts Receivables (AR) Workflow

MedEvolve AR Workflow Automation leverages AI to standardize the way your staff works AR and prioritizes the claims that will generate the most revenue. Additionally, it enables you to evaluate employee productivity and effectiveness individually or compared to their peers.

Workflow automation gives you unmatched insight and total transparency into your staff and AR performance. Get answers to questions such as:

- How many claims have not been worked?
- How many continue to be worked with no outcome?
- Are all claims on a worklist and assigned?
- Do my billers have enough to work?
- When are my collectors working?

Financial Clearance Workflow

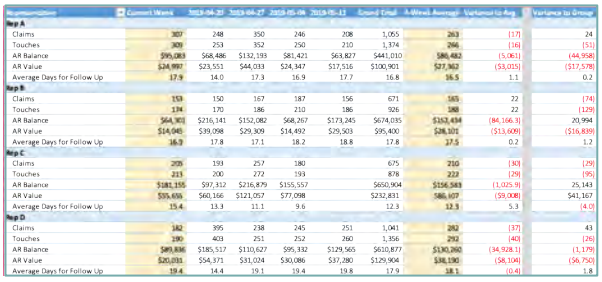
Financial clearance workflow automation helps facilitate the pre-registration process in advance of a patient appointment. The process prevents denials, rejections and write-offs on the back-end and ensures they get paid what they are owed.

Financial Clearance Workflow Automation provides visual cues to staff members to ensure the following key factors are verified prior to the appointment:

- Insurance verification/COB
- Insurance benefit coverage
- Estimate patient liability
- Collect estimated and existing balances
- Demographic verification
- Check authorization requirements and secure

Monitor staff productivity and effectiveness

By Representative & Status Codes		Claims	Touches	AR BALANCE	AR Cash Value
Rep A	Coder Review	31	34	$778,676	$192,941
	Claim not on File with Payor	20	21	$548,492	$141,807
	Claim in Process with Payor	12	12	$307,682	$82,278
	CRF - Claim refiled due to claim not on file with carrier	5	5	$11,020	$2,345
	CPD - Claim paid to practice or patient. Claim previously paid.	4	4	$68,261	$18,589
	CTF - Claim denied as timely	2	3	$217,245	$59,628
Rep A Total		**71**	**79**	**$1,931,376**	**$497,587**
Rep B	Claim in Process with Payor	102	148	$6,998,714	$1,970,739
	Coder Review	27	28	$164,649	$43,584
	Claim not on File with Payor	14	14	$65,440	$16,226
	CPD - Claim paid to practice or patient. Claim previously paid.	8	8	$148,334	$41,999
	DFA - Claim denied for Authorization/Precert	5	6	$225,475	$65,564
Rep B Total		**145**	**204**	**$7,602,611**	**$2,138,111**
Rep C	Claim in Process with Payor	79	121	$7,732,148	$2,171,478
	CPD - Claim paid to practice or patient. Claim previously paid.	33	39	$1,686,331	$469,527
	Coder Review	19	19	$754,261	$185,678
	DFA - Claim denied for Authorization/Precert	16	20	$1,437,414	$398,531
	CRF - Claim refiled due to claim not on file with carrier	11	11	$849,665	$230,263
	CTF - Claim denied as timely	3	3	$96,135	$14,327
	Claim not on File with Payor	2	2	$59,065	$16,677
Rep C Total		**139**	**215**	**$12,615,018**	**$3,486,482**
Grand Total		**407**	**582**	**$27,148,793**	**$7,463,173**



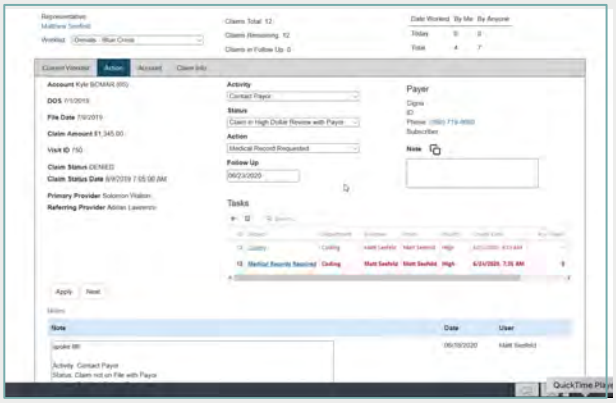
> Now, if I see a COB Denial: in workflow, I can see who isn't checking in advance so I can train that person.
>
> *Maryanne Thompson,*
> *Controller, Academic Urology*

> Our staff feels empowered. They want to know if they missed something. It is boosting staff morale and we're constantly improving based on the data.

Collaborate with the entire billing team virtually

Most billing departments communicate through interpersonal communication methods with no tracking or accountability (i.e. in person, over the phone, email or handwritten note).

With Workflow Automation, now, users can create and assign tasks, leave notes and comments, and even send instant messages – all of which are stored directly on the patient record. Tasks can be assigned to other department or representatives when assistance or additional information is required and users see tasks assigned when they login.



Contact us to find out how MedEvolve RCM Advantage Suite can increase productivity, efficiency and transparency for your billing department:

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