

Tapping into the Full Power of a Rules Engine

A medical practice realizes the tremendous benefits of automation

Prior to the partnership with NextGen Healthcare’s Revenue Cycle Management (RCM) team, Stuart Cardiology Group had been doing all their billing in-house. A billing staff of 10 or so people reviewed every single encounter and, if necessary, corrected mistakes, made clarifications, and added modifiers. A very inefficient process according to Alex Suarez, informatics specialist at Stuart Cardiology Group.

“We had about 10 providers at the time. Each of our providers had packed patient schedules, with about 30+ encounters a day. So, as you can imagine, billers were reviewing hundreds and hundreds of encounters manually, whether or not anything was wrong with the encounter data,” says Suarez.

The billing staff was using NextGen® Enterprise PM but wasn’t aware of the solution’s full potential to support their practice. Suarez was determined to improve usage of available tools to run a better back office.

“I knew NextGen Enterprise PM had features that our billing staff wasn’t yet able to use. Usually, it wasn’t a medical billing issue. It had more to do with understanding of the software,” says Suarez.

The opportunity to improve efficiency manifested in the high volume of claim edits that were configured by the RCM team. Each claim edit became a task for the billing staff to correct. These claim edits turned out to be a light switch which, when turned on, immediately changed how the department functioned.

THE SOLUTION

Investment in learning pays dividends down the road

Stuart Cardiology Group partnered with NextGen Healthcare’s RCM team for professional services support, which included both consultation and sharing a portion of the workload.

Initially, RCM support included uncovering efficiencies and workflows that existed within the software, implementing them, and providing ongoing advice to the practice. Thanks to the shared workload with the RCM team, Stuart Cardiology Group was able to reduce the amount of staff needed on-site, from the original 10 to 6 team members.

During this time, Suarez consulted with his client manager from the RCM team. “I informed him of my desire to find better solutions for what I felt was a bulky and tedious work volume. My client manager advised me to look into a new product called the NextGen Charge Review Rules Engine,” says Suarez.

Then Suarez attended the NextGen™ User Group Meeting, “I attended a session lead by Marc Phillips, director of client optimization, about this newly released product. I was taken aback by the potential impact and opportunity presented by the NextGen Charge Review Rules Engine and what Marc’s team could help us accomplish,” recalls Suarez.

CLIENT PROFILE

Stuart Cardiology Group

Location: Stuart, Florida

Mission: Meet the needs of patients in a compassionate and professional environment; achieve superior customer service through quality care

Office-based services: EKG, echocardiogram, echo stress test, exercise stress test, nuclear stress test, pacemaker clinic, multiple gated acquisition (MUGA) scan, carotid ultrasound, arterial imaging

Hospital services: Cardiac catheterization; transcatheter aortic valve replacement; pacemaker placement, generator replacement, implantable loop recorders

NEXTGEN HEALTHCARE SOLUTION

- NextGen® Charge Review Rules Engine

HIGHLIGHTS



Introduction of **automated** processes into the administration of a medical practice



Drastic **reduction** in volume of billing work



Elimination of more than 2,800 billing-related tasks per month



Redistribution of work for 1.9 FTEs from a staff of 4 FTEs, enabling staff to focus on other areas



Ability to **expand** practice without increasing medical billing staff



Improved access to billing metrics



Improved training and education for billing status



Greater **control** over cost of administering the practice

“I began to grasp how this product could truly affect our company. In this day and age, there’s still a lot of menial work performed by a medical practice’s billing staff. Automation has been a huge factor for many other industries. I was adamant we could find a way to apply this new form of automation to the workflows in our financial department.

“I came to realize that the time that I invested in learning about NextGen Charge Review Rules Engine would pay dividends down the road. To realize the full potential of this product and how it could affect our business, I needed to dive further into its capabilities,” says Suarez.

Identify the problem

Problem identification was the first step for Alex, who worked closely with the NextGen Healthcare team to implement the rules engine. What specific issues were contributing to the high volume of claim edits?

“Once we found our biggest contributors to claim edits, we asked, ‘how can the NextGen Charge Review Rules Engine help with these specific issues?’” explains Suarez.

Program practice knowledge into the rules engine

While the NextGen rules engine is robust, it can only fix problems if programmed to perform the same steps that the billing staff takes to address claim edits.

To help create the rules, the practice’s billing staff provided knowledge and data points to be programmed into the rules engine. Knowledge was based on professional experience. An example of a knowledge point—experience taught billing staff that claims for a particular insurance company need a specific modifier because claims without this modifier had been repeatedly denied.

Data points were fields found within the EHR. Common data points include referring provider, rendering provider, diagnosis, location, and so on—information that can be mined from the EHR.

If a staff member could be taught how to find these knowledge and data points in order to resolve their work volume, then there should be a way to configure the rules engine to find this information as well.

“If your biller is referencing the rendering or referring provider and making corrections when necessary, the NextGen Charge Review Rules Engine would be taught to do the same.”

Alex Suarez, Informatics Specialist
Stuart Cardiology Group



“We don’t create the rules, but rather help form them with a developer from NextGen Healthcare. We provide guidelines,” explains Suarez. “It’s really a matter of making sure that both your billing team and the NextGen Healthcare team understand your processes.”

“You’re articulating what your billing team would do to resolve specific issues. For example, if your biller is referencing the rendering or referring provider and making corrections when necessary, the NextGen Charge Review Rules Engine would be configured to do likewise.”

Finding issues and fixing them

Programmed with information from the real-world of medical billing, NextGen Charge Review Rules Engine can find an issue in an encounter and fix it. Once configured, it alleviates the need for medical billing staff to review encounters or find and rectify issues for a significant percentage of claims generated by the practice.

The NextGen Charge Review Rules Engine is not only based on practice-specific rules; global and industry standards are also programmed into the software.

THE BENEFITS

To understand the value of NextGen Charge Review Rules Engine, consider two closely-related, claims-editing solutions—Claim Edits, a feature of NextGen Enterprise PM, and NextGen® In-Line Edits. These solutions also perform functions similar to work performed by medical billers, but in a more limited fashion; they review encounters for errors. If an issue is uncovered, the system creates a task for the billing team to review.

Numbers tell the story best

Suppose, as a hypothetical example, **300** encounters occurred in one day; 150 of these encounters have issues and the rest are clean. Consider three scenarios:

1. With no software support, medical billing staff at Stuart Cardiology Group would have to review all 300 encounters.
2. With Claim Edits and NextGen In-Line Edits, billing staff would have to review the **150** encounters in which issues were uncovered, since tasks would be made and sent to them for review.
3. The NextGen Charge Rules Engine would resolve a majority, let’s say 100, of these 150 issues. It would find the issues, rectify them, and completely alleviate medical billers from the need to review, resolve, fix, or perform any tasks. This would leave just **50** of the original 300 encounters to be addressed by staff.

Note that there will always be small caveats that the rules engine cannot correct. Some knowledge or data point may be missing or may not be referenceable within the NextGen® Enterprise system.

Cost savings

Stuart Cardiology was achieving better-than-industry-standard KPIs even prior to implementation of NextGen Charge Review Rules Engine. For example, their days in AR stood at 28. Outstanding insurance payments over 90 days were at only 6.8%.

Even with a well-run revenue cycle, the tool provided great cost savings, including reducing the number of tasks staff had to perform each month by more than 2,800. As a 13-doc practice with a staff of 4 FTEs, they were able to redistribute work for 1.9 FTEs.

The drastic reduction in the volume of billing work allowed staff to focus on other areas. Relief from addressing claim edits enabled staff to focus on prior authorizations, explanation of benefits, payment acquisition, and other responsibilities.

“Professionals who work in the delivery of healthcare need to be aware of how much the NextGen Charge Review Rules Engine can impact their business. I truly think that this solution could be an industry standard for any medical billing company or any practice that has billing done inside their office.”

Alex Suarez, Informatics Specialist
Stuart Cardiology Group

“If our practice wasn’t growing, then I guess we might have implemented a further reduction in staff post implementation of the rules engine. Because we’re constantly expanding, the benefit to us was that we didn’t need to increase our billing staff, even when we have added more providers. This is truly a notable benefit,” says Suarez. It allows the practice to scale up without the increased administrative costs associated with billing.

“RCM claim editing tools allowed us to focus on problems, instead of reviewing all charges, and the NextGen Charge Review Rules Engine alleviated us from having to work on all problems. Instead, we can focus on the problems that the rules engine can’t resolve,” says Suarez.

Access to metrics

Another benefit from the overall experience is greater access to important billing metrics. Before working with the RCM team, billing managers didn’t know what factors contributed the most to claim problems. They had to rely on hearsay and gut feelings.

When the NextGen Healthcare RCM team set up the claim edits, it provided actual measurable metrics and data on their billing issues. For example, billing managers might learn that errors in location were responsible for a large percentage of claim edits. This information could be used to guide staff education and training, creating even greater efficiencies and further enhancing the benefits derived from automated claims editing and charge review solutions.



HOW CAN WE HELP?

Partner with us at **855-510-6398** or **results@nextgen.com**.