



ANMED HEALTH'S RAPID REVENUE CYCLE TRANSFORMATION DRIVES TOP QUARTILE EPIC GO-LIVE RESULTS

CHALLENGE

AnMed Health is one of South Carolina's largest not-for-profit health systems, managing more than 26,000 admissions and almost 100,000 emergency department visits per year. Comprising three Joint Commission-certified hospitals, AnMed Health has been affiliated with Atrium Health, previously Carolinas HealthCare System, since 2009.

In November 2015, AnMed Health engaged Navigant to transform and optimize their system in preparation for their upcoming Epic electronic health records go-live. Based on a comprehensive pre-live readiness assessment, AnMed Health decided to prioritize focus on developing a newly centralized professional billing office (PBO) and hospital/professional revenue integrity program — actions that would drive the most effective results in conjunction with the Epic platform.

AnMed Health had to navigate these changes through the following risks and challenges:

Risks:

- Lack of consolidated ownership through previous chief financial officer in both professional billing and patient access, creating a difficult environment to implement change
- Resistance to change among staff, management, and leadership
- Lack of knowledge around current- and future-state revenue generation associated with the impending Epic conversion

Challenges:

- Decentralized physician practices with separate business offices that lacked standard workflows and accountability
- Aged legacy systems requiring heavily manual processes and multiple touches per claim

SOLUTION

In addition to other targeted initiatives across the revenue cycle, Navigant supported AnMed Health through transformational campaigns in the following key projects:

PBO Centralization

AnMed Health historically used a decentralized, “cradle to grave” professional billing structure across its practices. As AnMed Health prepared for its Epic conversion, the strategic decision was made to implement a centralized PBO where staff would specialize work by function and adapt to fully leverage the Epic platform. Due to both space and timeline constraints, the Navigant team developed and oversaw the strategy to consolidate roughly half of the organization's physician billing practices prior to the Epic go-live. This model allowed relevant practices and departments sufficient time to stabilize new processes and functions prior to the Epic go-live. It also allowed AnMed Health to prioritize low-risk, high-value practices for centralization, in addition to a successful “proof of concept” approach that could tout the better PBO results as a selling point to remaining practices.

“Partnering with Navigant not only ensured steady cash flow throughout our Epic conversion, we've actually seen increased net revenue and operational efficiency in our revenue cycle post-live.”

CHRISTINE PEARSON, CHIEF FINANCIAL OFFICER, ANMED HEALTH

AnMed Health and Navigant partnered to create the infrastructure, workflows, policies, and procedures for the organization's new PBO. Thorough planning and design led to stabilized pre-Epic PBO performance within eight business days of the centralization go-live, enabling the new PBO to effectively lead professional billing functions through the Epic conversion.

Revenue Integrity Implementation

As is the case with many organizations, AnMed Health had lacked strong clinical operational focus on revenue capture, reconciliation processes, and accountability. The organization had varying reconciliation practices across departments, lacked formal policies and accountability amongst staff, and limited educational knowledge of workflows to generate gross revenue.

In addition to thorough end-to-end testing, Navigant partnered with AnMed Health to create a gap analysis between current- and future-state charging workflows, ensuring department owners were aware of current-state charging workflows and how those would change with Epic. Standard policies were created ahead of the Epic implementation so that the organization was prepared for the new rigor and focus. AnMed Health also hired a permanent revenue integrity manager to provide oversight and accountability and help guide the department growth for the future.

About Navigant

Navigant Consulting, Inc. (NYSE: NCI) is a specialized, global professional services firm that helps clients take control of their future. Navigant's professionals apply deep industry knowledge, substantive technical expertise, and an enterprising approach to help clients build, manage, and/or protect their business interests. With a focus on markets and clients facing transformational change and significant regulatory or legal pressures, the firm primarily serves clients in the healthcare, energy, and financial services industries. Across a range of advisory, consulting, outsourcing, and technology/analytics services, Navigant's practitioners bring sharp insight that pinpoints opportunities and delivers powerful results. More information about Navigant can be found at navigant.com.

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IMPACT

ANMED HEALTH REVENUE CYCLE TRANSFORMATION



Implementation of net-new professional billing office (PBO) and revenue integrity department with Epic installation



Positive staff adoption of system/process changes drove effective use of new platform

PBO go-live successes:

 102% OF CUMULATIVE TARGET GROSS REVENUE%	30 days post go-live (goal was > 98%)
 0.25 DAYS IN UNBILLED ACCOUNTS RECEIVABLE (AR)	60 days post go-live (goal was > 2 AR days)
 12% REDUCTION IN TOTAL AR DAYS	within 6 months vs. baseline
 AVERAGE WEEKLY PAYMENTS UP 10%	cumulative cash returned to baseline <4 months post-live

Hospital billing go-live successes:

 105% OF CUMULATIVE TARGET GROSS REVENUE%	30 days post go-live (goal was > 100%)
 4.9 DAYS UNBILLED CANDIDATE FOR BILL DAYS	60 days post go-live (goal was > 6 days)