



2019 Crowe Healthcare Virtual Symposium

The Autonomous Business Office

February 28, 2019

Eric Rincones – Texas Health Resources

Bradley Tinnermon – Banner Health

Scott Williams – Duke University Health System

Smart decisions. Lasting value.™



Housekeeping

- All audio for today's session will be streamed directly to your computer.
- Please submit questions through the Q&A function on your screen.
- To download the presentation, click the resources icon at the lower part of your event console.
- CPE credit
 - Login individually to the session for at least 50 minutes
 - Successfully complete polling questions
- NO CPE credit
 - Fail to successfully complete 3 of 4 polling questions
 - View a recording of this session (CPE is only awarded for live sessions)
- CPE certificate of completion will be e-mailed within two weeks of successfully passing this program





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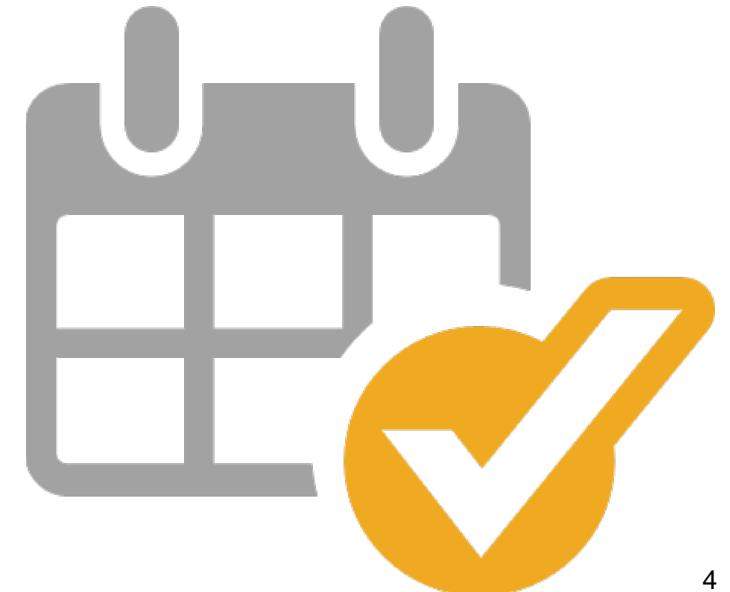
Scott Williams – Duke University Health System

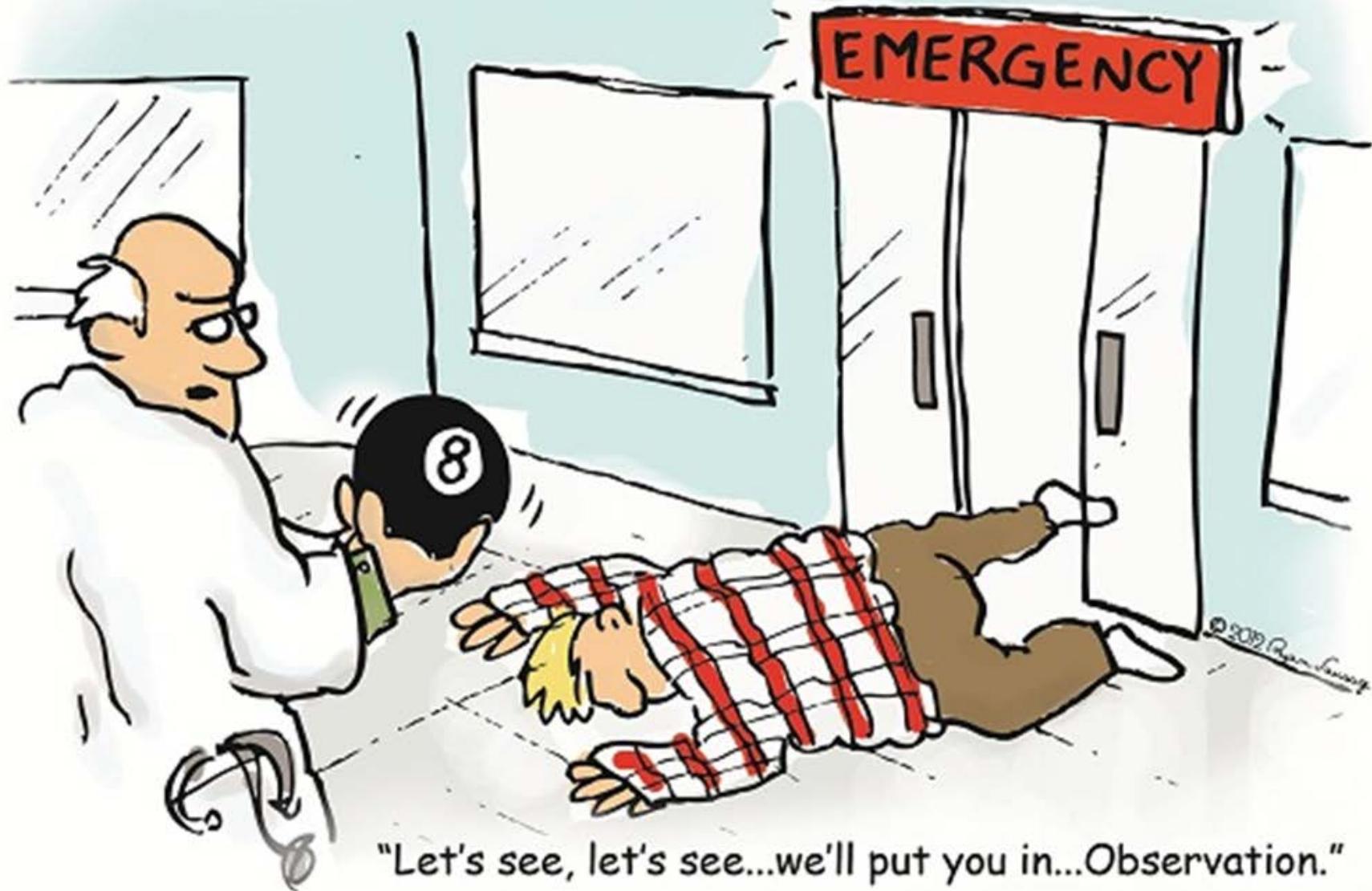
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Agenda

- Automation as a thing
- How, where, whether we integrate automation into revenue cycle operations
- The prospect of “bots”
- Creating the “Autonomous Business Office”
- ... and polling questions!







Observation Status Inpatient Status

Chest Pain	\$2,600	\$4,200
COPD	\$2,600	\$4,673
Respiratory Failure	\$2,600	\$5,531



**Clinical Denial Appeal Success
Rate is less than 45%
Hospital loses
\$3.5 million annually to clinical
denials**



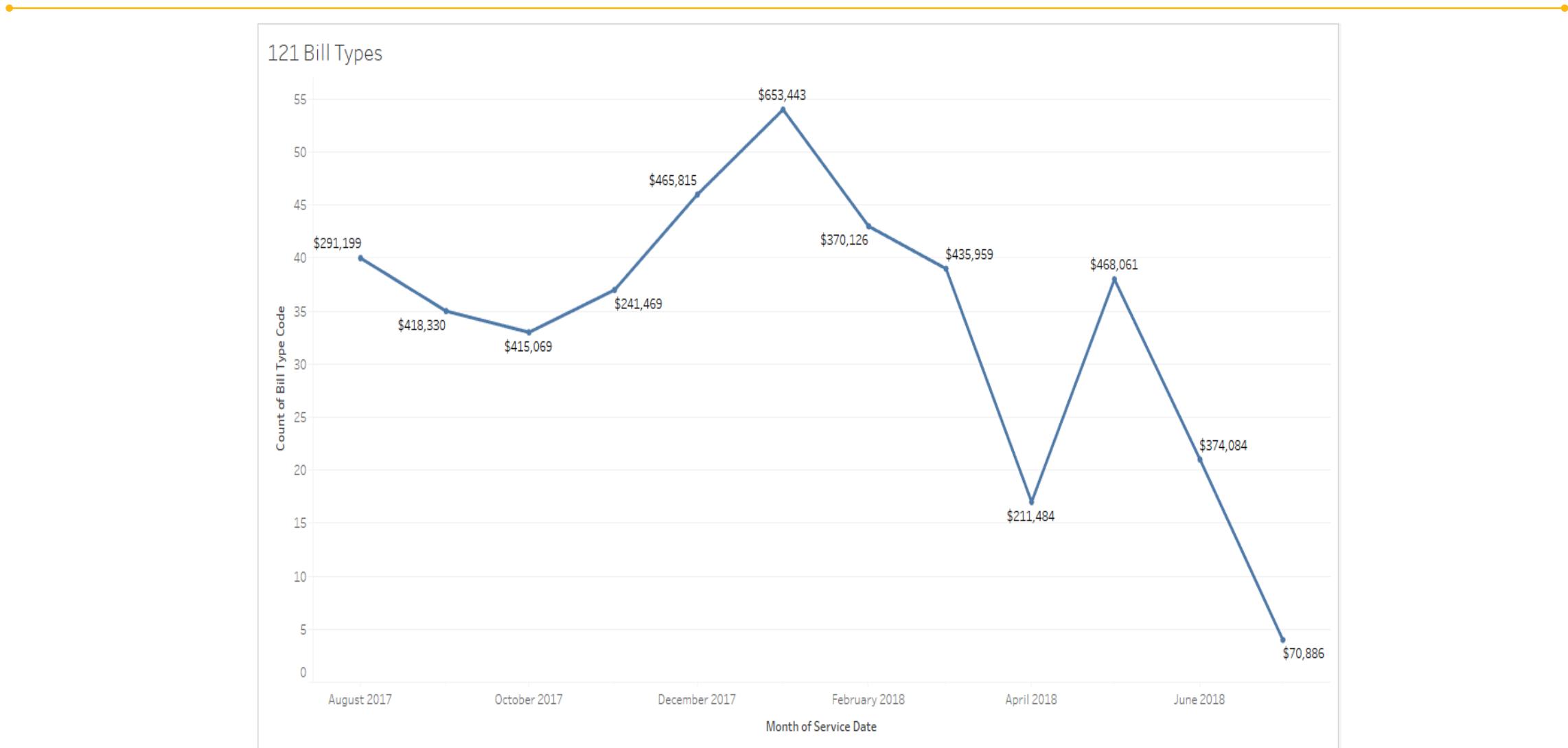
Condition Code 44

Part B Resubmissions

3-day qualifying stay

Inpatient short stays

BILL TYPE 121 – MEDICARE AND MEDICARE HMO BILLED AS 'PROVIDER LIABLE' WHEN INPATIENT STATUS NOT JUSTIFIED POST- DISCHARGE



TWO MIDNIGHT RULE COMPARISON

EDI Account Number	CPT	Price	APC Payment
0201XXXXXX	93306	\$ 1,359.00	\$ 486.69
0201XXXXXX	71046	\$ 155.25	\$ 62.12
0201XXXXXX	96374	\$ 91.00	\$ 191.09
0201XXXXXX	96372	\$ 52.00	\$ 58.20
0201XXXXXX	99283	\$ 276.00	\$ 219.10
\$ 1,017.20			

- + Length of stay = 6 days
- + Admit Date: 1/9/18
- + Discharge Date: 1/14/18
- + Total Charges on 131/121 Bill: \$6,370.07
- + Estimated Payment Received: \$1,017.20

MSDRG Grouping Results

Age	71
Sex	Male
Discharge Status	01-Home, Self Care
Admit Date	2018-10-09
Discharge Date	2018-10-12
ICD-10 CM	E11.649 D64.9 D69.6 E03.9 E11.22 E6 6.9 E87.70 F32.9 I10 I13.0 I25.2 I50.9
ICD-10 Procedures	
Medicare MSDRG Assigned	638 DIABETES W CC
MDC	10 ENDOCRINE, NUTRITIONAL & METABOLIC DISEASES & DISORDERS
Provider Number	140239
Grouper Version used	HAF36-10/18
MSDRG Weight	0.8722
GLOS	2.9
ALOS	3.6
Approximate Facility Reimbursement	6,300.44
Outlier Cutoff Days	0
Actual LOS	3
Number Of Outlier Days	0

- + MSDRG of 638 estimated payment of \$6,300.44

Reimbursement Difference of **\$5,283.24**

CONCURRENT REVIEW – ONE DAY STAYS

Actual

EDI Account Number	CPT	Price	APC Payment
S2713XXXXXX	36415	\$ 34.00	
S2713XXXXXX	73590	\$ 220.00	\$ 59.86
S2713XXXXXX	80048	\$ 97.00	
S2713XXXXXX	80048	\$ 97.00	
S2713XXXXXX	83036	\$ 66.00	
S2713XXXXXX	83605	\$ 73.00	
S2713XXXXXX	83605	\$ 73.00	
S2713XXXXXX	83735	\$ 46.00	
S2713XXXXXX	84100	\$ 32.00	
S2713XXXXXX	85027	\$ 90.00	
S2713XXXXXX	85610	\$ 27.00	
S2713XXXXXX	85610	\$ 27.00	
S2713XXXXXX	85652	\$ 19.00	
S2713XXXXXX	85730	\$ 42.00	
S2713XXXXXX	85730	\$ 42.00	
S2713XXXXXX	86140	\$ 32.00	
S2713XXXXXX	86140	\$ 64.00	
S2713XXXXXX	93971	\$ 440.00	\$ 112.73
S2713XXXXXX	96372	\$ 52.00	\$ 53.17
S2713XXXXXX	99285	\$ 606.00	\$ 488.74
S2713XXXXXX	J0690	\$ 45.25	
S2713XXXXXX	J0690	\$ 45.25	
S2713XXXXXX	J1815	\$ 82.40	
S2713XXXXXX	J1815	\$ 190.95	
		\$ 2,542.85	\$ 714.50

Leading Practice

EDI Account Number	CPT	UNM Price	APC Payment
S2713XXXXXX	36415	\$ 34.00	
S2713XXXXXX	73590	\$ 220.00	\$ 59.86
S2713XXXXXX	80048	\$ 97.00	
S2713XXXXXX	80048	\$ 97.00	
S2713XXXXXX	83036	\$ 66.00	
S2713XXXXXX	83605	\$ 73.00	
S2713XXXXXX	83605	\$ 73.00	
S2713XXXXXX	83735	\$ 46.00	
S2713XXXXXX	84100	\$ 32.00	
S2713XXXXXX	85027	\$ 90.00	
S2713XXXXXX	85610	\$ 27.00	
S2713XXXXXX	85610	\$ 27.00	
S2713XXXXXX	85652	\$ 19.00	
S2713XXXXXX	85730	\$ 42.00	
S2713XXXXXX	85730	\$ 42.00	
S2713XXXXXX	86140	\$ 32.00	
S2713XXXXXX	86140	\$ 64.00	
S2713XXXXXX	93971	\$ 440.00	\$ 112.73
S2713XXXXXX	96372	\$ 52.00	\$ -
S2713XXXXXX	99285	\$ 606.00	\$ -
S2713XXXXXX	J0690	\$ 45.25	
S2713XXXXXX	J0690	\$ 45.25	
S2713XXXXXX	J1815	\$ 82.40	
S2713XXXXXX	J1815	\$ 190.95	
S2713XXXXXX	G0378	\$ 1,156	\$ 2,349.82
		\$ 3,699.01	\$ 2,522.41

Utilization management should ensure that inpatient encounters are reviewed no more than 12 hours after the order is placed

Leading Practice KPIs

- 1 Leading practice Observation to Inpatient Ratios are less than 25%
- 2 Inpatient short stays should be less than 2% of total inpatient encounters
Observation long stays should be less than 5% of total observation encounters
- 3 Average observation hours should be less than 28
- 4 Condition code 44 volume should be greater than Part B resubmissions
- 5 Less than 1% of your inpatient encounters should be denied for medical necessity

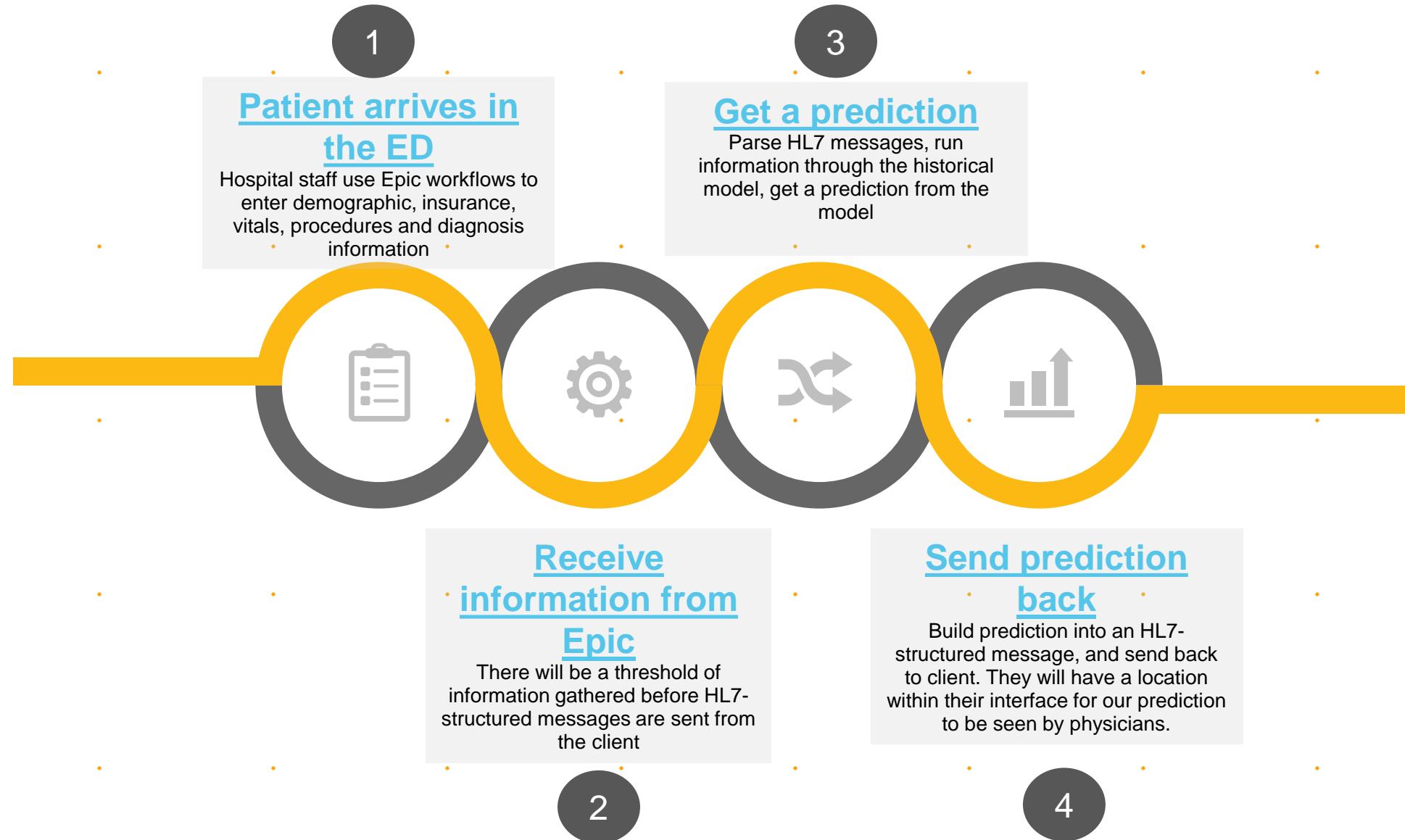
Crowe Status Predictor



Why is a Solution Necessary?

- Observation status is a consistent pain point for our current clients. Reimbursement is less than an inpatient stay and Commercial and Governmental insurers are pushing to have patients treated in an Observation status rather than an Inpatient Status
- There is significant misunderstanding of the guidelines to determine the patient's status, often resulting in denied accounts and lost revenue
- Physicians and UM nurses often make the wrong status determination which costs the organization significant reimbursement
- It is difficult to staff the Utilization Management Departments at the leading practice level (24/7) plus presence within the Emergency Departments
- Utilization Management nurses are challenged to meet all the demands of their job which leaves reviewing patient encounters for status decisions last on the list

How It Works



Benefits of the Crowe Status Predictor

- Reduce burden on Utilization Management
- Allow for the status upon transition from the ED to be accurate
- Reduce FTE requirements
- Decrease inpatient medical necessity denials
- Increased and more timely reimbursement



- Continually teach the machine on outcomes
- Allows for UM to better communicate with Physicians on more complicated cases
- Payer trending identified and can be used for managed care contract negotiations
- Reduce reliance on Physician Advisors
- Begin to predict LOS and identify outliers

Health System Pilot

Adt, Noa Two
Female, 08/15/1987, 31 y.o.
Race: White or Caucasian

Location: MC IMAGING... CSN: 116186565 MRN: M1104221

Allergies: Unknown: N... CrCl: <No order found.> Admission Date: 10/30/2015
Height: None Hospital, Discharge Date: None
Weight: None Saphenofemoral venous re PCP: Tiffany A Weakley, MD
Last BMI: None Primary Ins.: UHC Attending: WEAKLEY, T

Flowsheets

File Add Rows LDAAvatar Cascade Add Col Insert Col Data Validate Hide Device Data

PA-DO NOT USE Data EKOS/TPA Procedure CRRT Palliative Care Screen... Pain Assessment Pain Re-Ass

Jump To (Alt+Comma) Hide All Show All

Accordion Expanded View All

Utilization Management

UR Flag

1m 5m 10m 15m 30m

Admission (Current) from 8/29/18 1400

Utilization Management

Admit Date

Type

Financial Class

Reviewed by:

SI

IS

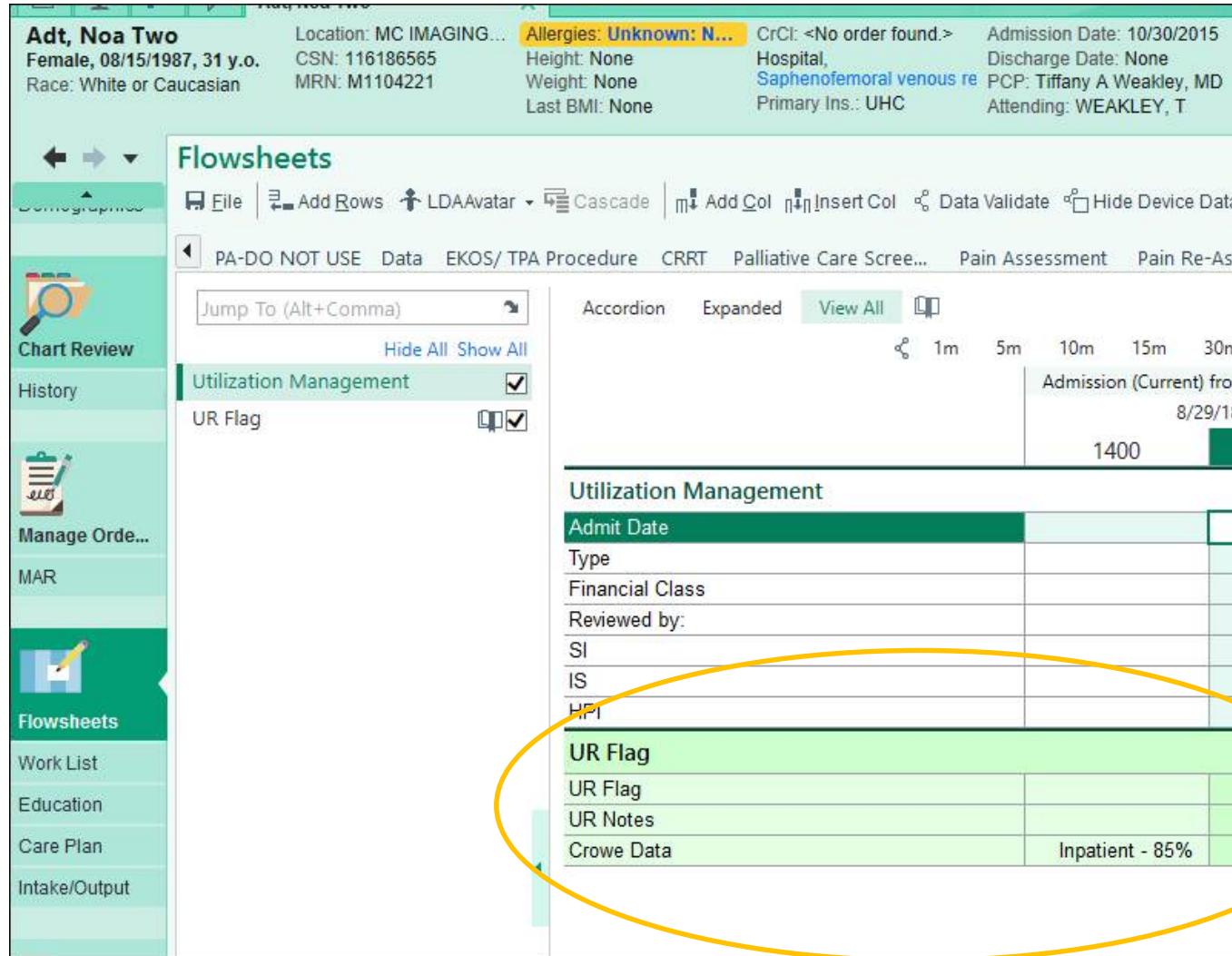
HPI

UR Flag

UR Flag

UR Notes

Crowe Data Inpatient - 85%



Johnhdil,Yoltavi X

Room and Bed: NMICU... Allergies: Penicillins (R...) CrCl: None Admission Date: 01/15/... Attending: SARDINA, E Pref Language, Need Interp: English
 Location: None Height: 6' 4" (1.93 m) Hospital, Cirrhosis of liv... Discharge Date: None PCP: No Local Pcp MyChart: Inactive Registries: None
 CSN: 112009942 Weight: 222 lb (100.7 kg) Last BMI: 27.0 UR Flag: Inpatient JH [...] FYI Hospice Status: Hospice Service: Medical ICU
 MRN: 2356531 Pt Class: Inpatient Code: FULL HAR: 61655527

Flowsheets

SnapShot Demographics Chart Review History Manage Orders MAR Flowsheets Work List Education Care Plan Intake/Output Notes iReport

File Add Rows Add LDA Cascade Add Col Insert Col Hide Device Data Last Filed Reg Doc Graph Go to Date Values By Refresh Legend Chart Correction Cosign Link Lines Calc

UR Screen

Lines/Drains/Airways Neurological Respiratory Gastrointestinal Genitourinary Musculoskeletal Peripheral Vascular Skin Color/Condition Pain Assessment

Utilization Management Mode: Accordion Expanded View All

UR Flag

ED to Hosp-Admission (Current) from 1/15/2015 in ...

1m 5m 10m 15m 30m 1h 2h 4h 8h 24h Based On: 0700 Reset Now

	1/15/15	8/29/18	
	1533	1726	1500
Utilization Management			
Procedure (Retired)		ZFT AAH	
Admit Date	1/15/2015		
Type	ER		
Financial Class	Commercial		
Reviewed by:	LO	DK	
SI	ML SKHDL, K...	IFGHOPOECM...	
IS	STX	VB	
HPI			
UR Flag			
UR Flag			
UR Notes			
Crowe Data	Inpatient - 75% <input checked="" type="checkbox"/>		

08/29/18 1500
Crowe Data
 Inpatient - 75%
 Comment (F6)

Value Information
 Inpatient - 75%
 Taken by:
 Florence Young, MA at 08/29/18 1500 (today)
 Recorded by:
 Florence Young, MA at 08/29/18 1503 (today)

Last Filed Values (24 hours)
 Inpatient - 75%
 by Florence Young, MA at 08/29/18 1500

First Filed Value
 Inpatient - 75%
 by Florence Young, MA at 08/29/18 1500

The machine will predict the patient's status with a higher level of accuracy than a human

Polling Question



Thank you

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