CASE STUDY: North Atlanta Primary Care

Expanding practice uses Navicure to strengthen revenue cycle

Challenge

North Atlanta Primary Care (NAPC) needed a clearinghouse that was accessible when they had questions, and that would help manage rejected claims in a timely manner and speed claims turnaround. NAPC required a solution that could integrate with its existing practice management system and could handle a large volume of claims efficiently, leading to an easier and faster way to maximize revenue and optimize results.

Solutions

Navicure®, now known as Waystar, met all of NAPC's needs and provided a seamless transition.

Results

After implementing Navicure, NAPC has seen a decrease in AR days and an increase in productivity through an end-to-end, cloud-based revenue cycle technology solution.

- 82% reduction in AR over 90 days
- 58% reduction in average AR days
- 70% increase in total revenue
- 97.4% total net collections

North Atlanta Primary Care (NAPC), an Alpharetta, Georgia-based practice, decided to make the transition from paper-based claims submission to an electronic clearinghouse solution. But instead of realizing anticipated revenue cycle enhancements, the practice found itself struggling to track claims and generate crucial reports. NAPC averaged a 50-day turnaround for claims reimbursement, and accounts receivable (AR) over 90 days stood at about 29%. Net collections hovered around 78%, with "no claim on file" as a frequent response when payers were contacted regarding claim status.

Efforts to contact the clearinghouse posed yet another problem. Stifled productivity resulted from staff commonly spending as many as 45 minutes playing "telephone tag" before actually speaking with a representative.

After two years with a traditional clearinghouse solution, NAPC decided change was essential for achieving future growth. The expanding practice needed a clearinghouse partner that would aid efforts to manage rejected claims information in a timely and efficient manner—and at the same time reduce rejections, lower administrative costs, accelerate payments and improve cash flow, further enabling them to collect more from their payers and patients with less cost and stress.

The Search Criteria and Transition Process

The quest for a new clearinghouse began. As with each of the vendors examined, prime consideration was given to Navicure's ability to track claims easily, speed claims turnaround, boost staff productivity and aid management of denials. NAPC was pleased with what they saw with Navicure, now known as Waystar.

To compare to the clearinghouse they were using was like comparing a toy matchbox car with a luxury vehicle. Assurance that Navicure would not only provide the tools needed to effectively manage a large claim volume, but also integrate well with the existing practice management (PM) system, cemented the decision to move forward.

A few months prior to the go-live date, Navicure began working with NAPC and its PM software vendor to ensure a seamless transition. The practice was informed about the information it would need to provide, and an assigned client service representative conducted thorough product training within the practice's schedule, ensuring that the staff was confident using the solution. With no hardware or software installations involved, NAPC experienced little downtime during the conversion.

Improved AR and rejection rates drive increased revenue

With Navicure, NAPC has experienced dramatic improvements in all aspects of its revenue cycle. AR days have dropped and productivity has increased, even as the practice has expanded to include four facilities, 13 full-time physicians and 12 physician assistants. It now bills an average of 9,000 claims every month, yet it has maintained the same four billing office employees required for a much smaller practice.

NAPC has saved significant money because they have not needed to hire new staff even though the practice continues to see tremendous growth. Using the products available in Navicure allows the billing staff to efficiently and effectively work rejected claims and track claims when necessary. That provides more time for them to work on their other job responsibilities like claims follow-up, appeals, and education on coding and medical necessity issues.

Claims turnaround is just one example of positive change. The practice has always sent claims daily, but the previous clearinghouse required billing office staff to spend a majority of their time on the phone with payers checking claim status—often to hear a claim never arrived electronically. Now, however, staff can easily track claims from transmit date to payer acceptance date, and in some cases instantly view an electronic remittance. Claims typically are paid within 14 to 17 days of the patient visit—a dramatic drop from the 50 days NAPC previously experienced.

Through the Navicure claims manager, staff can pull up "problem" or "unclean" claims and make necessary changes. Both cleaner front-end claims submission and better back-end management of rejections have contributed to progress in AR and net collections. Overall, AR has dropped from a 41-day average to a 17-day average, with AR over 90 days reduced by 82% to a mere 5.10%. Net collections now stand at 97.4%. The numbers have all combined to create a 70% increase in total revenue.

Many of the bottom-line advances can be attributed to strategic business intelligence that staff can now easily pull from Navicure. Responsive reporting tools allow billing management to recognize—and as a result educate staff to eliminate—error patterns. The practice additionallybenefits from available payer data. Navicure's services enabled NAPC to pull accurate payer trending figures, which they can leverage in payer negotiation.

A solid relationship into the future

After using Navicure for six years, NAPC continues to see marked improvement in key areas of its revenue cycle, and the practice anticipates that the responsive nature of the clearinghouse will help it maintain its high performance measures.

Take, for instance, Navicure's 3-Ring® Policy. It guarantees client calls are always are connected to an individual within three rings—in sharp contrast to the automated, impersonal nature of most client service departments.

In the rare instances where NAPC has needed to call client service for help, they were assisted immediately. NAPC staff finds Navicure's client services team to be extremely knowledgeable and eager to help, a testament to the quality of their personnel and product training.

With today's reimbursement allowances, turnaround on claims is vital to all practices. Although hard to argue with the 58% drop in average AR days that NAPC has experienced since partnering with Navicure, the practice continues to use tools available through the clearinghouse to achieve further improvement and simplify and unify its revenue cycle. With days in AR worked down, they are now fine-tuning as they look forward, finding even better ways to become more efficient and further empower its financial success.

Ready to transform your performance?
Contact Navicure, now known as Waystar: 1-877-628-4287
or visit us at www.Waystar.com.

ABOUT WAYSTAR
Waystar is the combination of Navicure and ZirMed, the two top-rated providers of revenue cycle technologies. Waystar simplifies and unifies the healthcare revenue cycle with innovative technology that allows clients to collect more with less cost and less stress, so they can focus on their goals, patients and communities.

WAYSTAR
REVENUE CYCLE TECHNOLOGY
NAVICURE + ZIRMED