

The Hawthorn CONNECTION

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New Payment Plan Option for Patients- HonorCare:

Hawthorn Physician Services is continually looking for ways to help our clients collect better with the ever growing self-pay population. We are very excited to be partners with CPU/Imagine to offer HonorCare to our clients. This is a quick and simple no interest healthcare payment plan that patients can sign up for.

- The practice is funded within 15 DAYS
- There is no recourse to the practice if the patient cannot make payment obligations
- HonorCare provides increased patient collections and faster payments so our doctors can focus on patient care

Simple, Flexible and Clear Plan for Patients

- Credit scores are not a factor; application approval is based on account and employment history
- Patients fill out a simple application online and receive approval in less than one minute!
- No interest EVER for the patient!!
- Patients choose a 3, 6, or 12 month payment option
- Perfect for true self-pays and patients with high deductibles

HonorCare can offer your patients a better way to pay with flexible payment options.

A/R Tactical Teams Deliver Exceptional Recovery: by Stan Hosler

Exceptional Recovery is one of the promises of The Hawthorn Advantage. As stated on our website (www.hawthorngrp.com), we promise to retain accounts longer and work them harder, so we recover more revenue and place fewer bad debts with collection agencies.

Our exceptional results are not achieved by luck or chance. Rather, Hawthorn takes a proactive approach to accounts receivable management. Our tactical teams confront accounts receivable (A/R) directly. *The Hawthorn Connection* recently talked with Shelly Bangert, Director of Revenue Cycle Management, to learn how the A/R teams are organized for success.

Hawthorn Connection: I think our readers would be interested to know the roles for A/R team members.

Shelly Bangert: Sure. There are three roles in each team. Let's start with the revenue and payment posters. These team members fulfill a front line role by reviewing EOBs to make sure payments are remitted accurately and on time. They also review and appeal all denials on the spot. The next level of support is provided by accounts receivable representatives. They collect information from patients and settle open account balances. The third level is filled by the senior accounts receivable representatives. They maintain high-level contacts with all the payers, and their access to these individuals makes it easier to solve problems and speed up the claims.

HC: So you're following a systematic approach to accounts receivable.

SB: Yes, it is systematic, and it's a proprietary process that we believe is unique to Hawthorn. It's probably important to mention that we also work our accounts receivable by medical specialty, so the team members are very familiar with the codes and procedures for pathology, radiology and emergency medicine. Like you said, it's a systematic approach to working appeals and denials—trying to keep accounts from aging and becoming uncollectible.

HC: You're trying to stay ahead of the game.

SB: That's right. Accounts become more difficult to collect when they age 90 or 120 days. Our goal is to work denials every day, before they have a chance to age, so we can accelerate recovery and reduce the number of accounts that become uncollectible.

HC: So the team members are highly trained and experienced.

SB: Training and experience are key factors in our success. We cross-train all our team members. They understand that each carrier has a slightly different review and appeal process for pursuing unpaid claims, and when you know the system you can improve your results. We achieve high rates of success with our appeals, so we are able to collect what our physicians are due to be paid.

HC: It sounds like your routines are well established.

SB: I would say that our methods continue to evolve, but we have proven that a persistent, professional approach works best with third-party payers. Most payers prefer to work with us instead of against us. Our senior accounts receivable representatives, for example, must have a minimum of 7 years' experience in managing A/R. That means they have built relationships with key contacts among the various payers, so they're fully equipped to appeal denied claims—and they can lead a special project if they detect trends in

payments and denials.

HC: Perhaps you could provide an example of a special project.

SB: Let's say we notice a payment trend for an individual payer, like when a particular CPT code is getting reimbursed consistently at a lower rate. Our A/R tactical team can audit that code for every instance over a specified time frame and look for causes behind the reduced payments. We can aggregate this information and engage directly with our payer contacts. In most cases the critical mass of these aggregated accounts will produce a swift resolution and a quicker recovery of the physician's revenue.

HC: Thanks for sharing your perspectives. Is there anything you would like to say by way of a summary?

SB: I'd just like to reinforce the point I made earlier, that we apply a hands-on, roll-up-the-sleeves approach to confront A/R proactively. It's a commitment of time and resources that most billing companies are not willing to pursue. Our system offers a cost-effective way to accelerate revenue recovery, reduce days in A/R and minimize bad debt.

2016 Q1 Employee Service Awards

Jennifer O., Laura W., Kristen C. -
5 year Anniversary

Shellee T., Bonnie S., Teresa H. -
15 year Anniversary



Addressing Complexity with Certainty

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