

RSB Systems Pvt. Ltd.

A billing company's solution to rising costs and market demands

Revenue Cycle Management Services

PRESENTATION OUTLINE

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ABOUT US

- RSB is a HIPAA Compliant, Knowledge centric organization, offering integrated Healthcare Revenue Cycle Management services.
- We provide 'Accelerators' to overcome process and resource limitations within your Revenue Cycle Management.
- Our services encompass both Front End and Back-office Management which include Patient Appointment Scheduling/Reminder/Confirmation, Medical Transcription, Medical Coding, Medical Billing, Denial Management and Accounts Receivables follow-up for Physician groups, Individual Practitioners and Hospitals.
- RSB has accumulated experience in handling virtually any specialties and consciously provides cost containment, excellent skills and cutting edge technology.

PROFESSIONAL TEAM

Our people are our greatest assets. They are the very core of our customer-oriented culture that allows us to guarantee service levels unmatched in the industry.

- Professional Procedural Coders certified by American Academy for Professional Coders (AAPC)
- Billing Specialists with experience in handling diverse specialties.
- Experienced AR Analysts and Denial Management Specialists

SERVICE OFFERINGS

- **FRONT OFFICE SERVICES**

- ✓ Appointment Scheduling for NEW patients.
- ✓ Appointment CONFIRMATION/REMINDER calls.
- ✓ Insurance Eligibility Verification
- ✓ Pre - certification

- **BACK OFFICE SERVICES**

- ✓ Medical Transcription
- ✓ Medical Coding
- ✓ Medical Billing
- ✓ Denial Management
- ✓ Accounts Receivable Follow-up

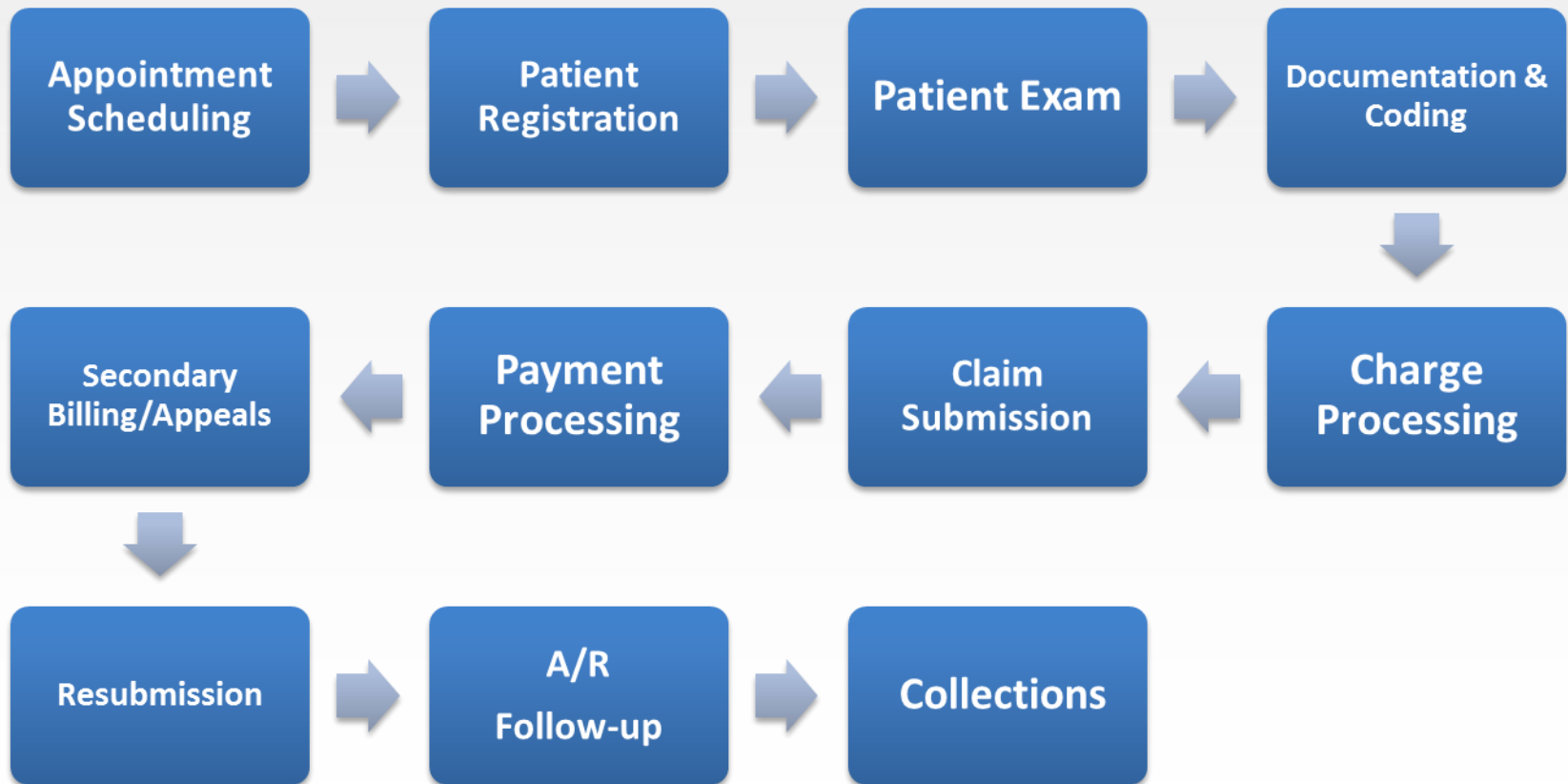
SPECIALTY EXPERTISE

- Anesthesia
- Cardio Vascular
- Chiropractic
- Family Practice
- Gastroenteritis
- Internal Medicine
- Orthopedics
- Pain Management
- Pediatrics
- Physical Therapy
- Podiatry
- Radiology
- Surgery
- OB/GYN

SOFTWARE EXPERTISE



REVENUE CYCLE



FRONT OFFICE SERVICES

- **APPOINTMENT SCHEDULING/REMINDER**

- ✓ Cross-facility information flow reducing errors in patient information
- ✓ Complete patient information obtained to ensure proper payment
- ✓ Increased revenue and patient volume through reduced patient no-show rates & more efficient scheduling

- **INSURANCE ELIGIBILITY VERIFICATION**

- ✓ Lower instances of claims denial from the payer results in increased revenue & decreased bad debt
- ✓ Patients clearly understand payment obligations for better patient satisfaction and increased self-pay collections.

- **PRE - CERTIFICATION**

- ✓ Lower denial instances with insurance companies results in quicker payment
- ✓ Proper pre-certification prior to service ensures payment & reduces bad debt

BACK OFFICE SERVICES – MEDICAL TRANSCRIPTION

- We have a team of high quality analysts, experienced transcriptionists, Proofreaders, Editors and Medical professionals.
- At our state-of-the-art medical transcription facility, we constantly reinvent ourselves to embrace latest technology and upgrade ourselves to meet the demanding customer requirements. RSB employs the services of one of the most reputed service provider in telecommunication to get the dictation / voice files from Physicians and Medical professionals.
- At RSB, we follow a strict quality process to ensure that the transcription output we deliver is of the finest standards.

We employ a certified physician to supervise the transaction QA team. Our dedicated team of professionals follows the AAMT guidelines and specifics of clients meticulously to provide the ultimate results that our clients expect and many a times better than they expect of us.

BACK OFFICE SERVICES – MEDICAL CODING

- We eliminate hiring and retention expenses by providing a team of fully trained and experienced Certified Professional Coders (CPCs) certified by the American Academy of Professional Coders (AAPC). They have proficiency in multiple specialties code sets and usage guidelines; CPT-4, HCPCS, ICD-9-CM, LCD/NCD and CCI EDITS.
- Our regular audits and continuous knowledge acquisition ensure maximum quality, which in turn improves billing, decreased denials and rejections.
- Our strong Procedure Code Analysis team ensures that our customers no longer lose money due to wrong/invalid codes.

BACK OFFICE SERVICES – MEDICAL BILLING

● **PATIENT REGISTRATION AND CHARGE POSTING**

- ✓ We adhere to the strict workflow management process , that makes sure there is absolutely no drop in quality standards.
- ✓ Our continuous quality assurance program ensures that there are minimal keying errors, and we constantly update correct coding requirements from insurance companies.

● **CLAIM SUBMISSION**

- ✓ Our target is to electronically transmit all claims within 12 hours from the time the super bills and correct patient documents are received by our office
- ✓ We do a proper validation check before forwarding to the insurance company
- ✓ One of the most common denial reasons given by insurance companies that claim is not in the system. We dispute the denial instantly since we maintain the proof of transmission of each claim

● **PAYMENT PROCESSING**

- ✓ We process all payments within 12hours of receipt
- ✓ We do proper reconciliation of charges, payments and adjustments to ensure accurate posting from EOB
- ✓ Process refunds in a timely manner
- ✓ We do proper validation check and send across accurate statements to patients

BACK OFFICE SERVICES – DENIAL MANAGEMENT

- **At RSB Denial Management is handled by :**

- ✓ Identification of key denial reasons.
- ✓ Identification of non-contractual adjustments due to denials.
- ✓ Identification of Problematic Payers.
- ✓ Identification of contractual issues.
- ✓ Qualification of denial reasons.

- **RSB optimizes Denial Management by :**

- ✓ Providing Good Documentation.
- ✓ Using accurate Procedure codes and modifiers.
- ✓ Utilizing well-informed, trained and qualified staff.

BACK OFFICE SERVICES – A/R FOLLOW-UP

❑ Our Benchmark for Accounts Receivables

- The total accounts receivable in the 0-30 day aging category should not exceed 70 percent of monthly charges.
- The A/R in the 31-60 day category should not exceed 15 percent of monthly charges.
- The A/R in the 61-90 day category should not exceed 10 percent of monthly charges.
- The A/R in the 91-120 day category should not exceed 7 percent of charges.

- Our A/R and Denial Management specialists receive extensive training in AR follow-up
- Our specialists are chosen for their analytical skills and are provided with access to all the documentation required to make sure that the claim is paid on the first call.

E.g. When the Insurance rep says that the claim is “Not in system”, our Specialists are taught to immediately retrieve the clearinghouse confirmation from our database and fax it while still on the call.

DELIVERY MODEL

- In India, all of which function as an extension of your organization, are assigned specifically to your account to ensure consistent, high quality service delivery.



RSB'S ADVANTAGES vs. IN-HOUSE BILLING

- **Corporate Approach**

- Specialization, individual accountability, and emphasis on reporting and metrics

- **Flexibility and Scalability**

- Predictable cost component regardless of growth or seasonality

- **Professional Qualifications**

- Heavy concentration of certified coders, trained in an environment that crafts expertise with Visionary Office

- **ROI**

- Our staff is cost-competitive with most existing billing operations, and allows staff to be productive in patient care and throughput

RSB'S ADVANTAGES vs. other BILLING COMPANIES

- **Enhanced Analysis Based on Large-Sample Data (Bench marking)**
 - Better idea of acceptable performance in wide range of different specialties
- **Professional Metrics**
 - Trend tracking, Daily / Weekly/ Monthly Financial Reports, Collection Reports
- **More Manpower**
 - Our ratio of staff per account is well above industry standard, for higher touch and redundancy as well as better specialization
- **Separation of Labor**
 - No crossover in staff from one account to another. Primary billers working your account are exclusive to your company. This results in more familiarity, improved performance and better HIPAA controls
- **Application expertise**

QUALITY ASSURANCE

- Experienced Quality Assurance team.
- Initial training for all process associates prior to job assignment.
- Monthly training based on continuously identified needs.
- Live monitoring of transactions for each process associate.
- Quality assessments of completed work based on random sampling.
- Redundant Screening through many processes
- Weekly quality review meetings to discuss quality concerns identified by our Quality Audit department
- All employees are required to take refresher courses in respective departments
- Monthly evaluations of all staff

VALUE PROPOSITION AND PRINCIPLES

Collections

Increase collections through RCM best practices.
Identify and collect in areas where you previously leaked hard earned cash

Cost Savings

Save 35%+ on the cost of RCM staff

Cash Flow

Drive down GDRO (Gross Days Revenue Outstanding) and speed up timely collections, reinvest cash into care giving assets and talent.

Focus

Allow healthcare providers to focus on core business of patient care while we focus on collecting their cash

Contingency Fees

RSB's services are delivered on a percentage of revenue based model.
100% vendor / client partnership and alignment

HIPAA – INFORMATION SECURITY STANDARD

● PHYSICAL SPACE

- Common practice is to question a person's identity by asking for proof of identity, such as a picture ID, before allowing access to a facility.
- Centralized key card access control across the entire billing facility.
- Demarcated paperless zone.

● SITE SECURITY

- Site manned by 24*7 professional security guards.
- Photo ID cards
- All visitors escorted with authorized personnel
- No Camera phones are allowed at production floor

HIPAA – INFORMATION SECURITY STANDARD

● INFORMATION SECURITY

- Well defined & documented security policies
- Need based resource allocation
- Stringently controlled and monitored net access
- No floppy / CD-ROM / Pen Drives on all production PCs

● DATA SECURITY

- Antivirus Client installed on all PCs updating through Dedicated Server end Application
- Regular Windows updates & patch management Server
- All programs & e-mails scanned for viruses before opening
- Real-time monitoring of network traffic & restrictions on unauthorized activity and intrusion attempts.
- Provisions for regular backup of data residing on the system.
- Maintain retrievable exact copies of PHI. Protect the security of PHI while operating in an emergency mode.

Thank You! Questions?

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