

Revenue Integrity Health Trending (RiHT) Tool

Track and Monitor Your Revenue the 'RiHT' Way

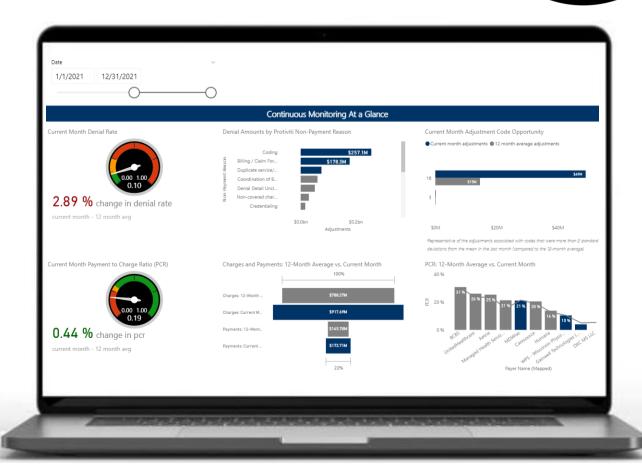
It is critical that healthcare organizations have a solid revenue cycle process inclusive of multiple lines of defense. With margins continuing to shrink across the healthcare industry and increased scrutiny around government funding, it is more important than ever for healthcare providers to accurately capture and preserve the revenue they are entitled.

Built on Microsoft Power BI, Protiviti's RiHT Tool helps healthcare organizations to:

- Utilize 835 & 837 EDI Remittance data to identify areas of opportunity across your organization.
- Mine the vast amount of information that is contained within these files and identify overall revenue cycle improvements related to process breakdowns, payer changes, coding opportunities, underpayments, claim edits, and targeted populations (e.g., COVID-19 and telehealth, etc.).

"Hospitals across the country lose approximately \$262 billion per year on denied claims from insurers."

**Modern Healthcare; modernhealthcare.com



Protiviti's Revenue Integrity Health Trending (RiHT) Tool

Why Protiviti's RiHT Tool?



Gain Powerful Insights

Gain insights on process breakdowns, payer changes, claim variance and historical data in a highly interactive dashboard environment



Maintain Accurate Denial Management & Reporting

Maintain a robust denials management system and validate/verify that current denials reporting is accurate and adequate.



Track Data Across Multiple Systems

Pull accurate data from multiple, disparate systems for a single, user-friendly reporting dashboard



Improve Coding Accuracy

Coding opportunities that can improve coding accuracy and potentially result in additional reimbursement



Achieve Continuous Monitoring & Compliance Analytics

Implement next generation continuous monitoring audit and compliance analytics

Success Story: Healthcare Organization

Challenge: Post Epic™ Implementation, a large hospital system immediately began experiencing a significant negative impact to their net revenue. The organization was virtually blind to the impact denials and contractuals were having on their revenue as the reporting around Epic™ was not yet fully implemented and their historical reporting was severely lacking. They knew revenue was down but could not pinpoint why.

Solution: Knowing the organization's legacy reporting was limited and Epic[™] reporting was still being developed, we took an approach to leverage the RiHT reporting, and dashboard based on raw 835 data directly from the Payer. With this information, we were able to compare revenue before and after Epic[™] implementation to identify when, where, and why deviations occurred.

Results: We identified a large increase in payer contractual adjustments following Epic™'s go-live date that resulted from a claim edit rule within Epic™ that was not set-up correctly. Once this was identified and corrected, the organization was able to retroactively address the claims previously impacted and appropriately address future claims which was expected to result in approximately a \$30M positive impact to the bottom line.

Contact us today to learn more about Protiviti's RiHT Tool!



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