

Revenue Cycle Management (RCM)



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Revenue Cycle Management (RCM) services from GBS encompass the total revenue cycle continuum, from patient registration through billing and collections. GBS provides Clients with outstanding services coupled with unique solutions. This is accomplished by focusing on RCM which we define as: the oversight and supervision of the processes and key performance indicators pertaining to revenue generation, collection functions and all related controls. In addition, GBS offers a host of products and services to ensure that we can provide unique solutions to meet our Clients' specific needs. We pride ourselves on exceeding your practice requirements at every step. The GBS RCM Team will partner with you to analyze and establish controls that capture the appropriate revenue and provide a mechanism to bill and collect properly. The result is assurance that all services performed are billed, and that everything billed can be collected.

Our comprehensive receivables and reimbursement management services can include:

System Analytics: GBS will professionally review where your practice "wellness" resides. We will show you where your efforts to improve Practice Management (PM) workflow should be concentrated, saving you time and money by focusing on the right items at the right time.

Patient Registration/Scheduling: Our RCM services enable your practice to perform patient registration efficiently and allow your staff to schedule appointments easily through flexible scheduling templates.

Eligibility Verification: We enable your practice to proactively determine if a patient is eligible for services with payers prior to services being performed. Eligibility verification affords the opportunity to ensure appropriate reimbursement to the practice.

Insurance/Patient Billing: We place significant emphasis on the proper internal controls and checks and balances necessary to successfully capture, bill, and collect all services performed by the practice. This is accomplished through the utilization of web-based solutions that provide tracking and acknowledgements.

Rely on GBS RCM as your dependable, cost-effective solution.

Our RCM services help your practice reach financial objectives by streamlining the collection, use and delivery of patient and claims information. We help improve profitability and productivity while reducing costs and overhead.

How is Your Revenue Cycle?

Are you satisfied with the speed of reimbursement on your electronic claims transactions?

- Do you have minimal lost or delayed claims?
- Are your A/R Days Outstanding results satisfactory?
- Can you edit rejected claims online for immediate resubmission?
- Can you file both CMS-1500 and UB04 claims?

Can you obtain real-time insurance eligibility verification?

- Is your daily schedule pre-verified for coverage at the beginning of each work day?
- Do you verify eligibility for not only the patient but for any relation to the patient (spouse, subscriber, etc.)?
- Can you verify eligibility in real-time and/or batch mode?

Is the manual or automatic posting of remittance payments into your PM System working satisfactorily?

- Can you search your remittance advice for specific payer, patient, check number or amount?
- Can you readily access historical, archival records of remittance advices?
- Can you accept credit/debit card co-pay/ deductible payments at the time of service?

Are all of your electronic transactions fully HIPAA compliant?

If you answered NO to any of these questions and would like to speak to a GBS RCM Specialist, please contact us at 800.860.4428 for prompt assistance.

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Payment Processing: Daily evaluation and posting of insurance and patient payments by a GBS RCM team member provide clean account histories, prompt denial follow-up and trend tracking. Our team utilizes electronic remittances to ensure the most accurate processing of payments to your practice.

Reporting: In addition to our detailed standard reports, our team can develop explicit and focused reports to meet the specific needs of your practice. We can provide detailed reporting and benchmarking for days in A/R, aging and charge and payment trending that can be filtered by payer, physician, location and more. We can introduce new tools that will assist your practice (or GBS team as a service) to pinpoint and prioritize revenue recovery efforts, as well as define your practice's place in the benchmarks of whatever practice demographic your facilities fall into (Region, Specialty, etc.).

Collection Services: Our RCM services increase productivity and revenue by relieving your practice of the responsibility of working your A/R collections. Our staff accomplishes this through follow-up letters and statements to patients, and by working with unpaid claims and denials with insurance carriers. However, the extent of our RCM services can be clearly defined and selected by your practice, based on your specific needs and/or preferences. Your practice may opt for as few or as many components of our RCM services as they prefer—the choice is up to you.

Flexible Service Agreements

All GBS RCM services can be engaged for long-term contracts or you may select appropriate services to fill specific needs to assist your organization in resolving limited staffing problems, or as a migration path to the GBS Practice Management and medical record solutions. Depending on the services you require, fees may be based on a percentage of collections or be invoiced as a flat fee. Please contact GBS for a tailored quote.

Key Performance Indicators

GBS has established the Key Performance Indicators (KPI) and targets (please see chart to the right) that we adhere to when providing our RCM services. Through our services, our Clients have recognized success in maintaining their KPI target, which ultimately provides increased revenue for their practices.

Indicator	KPI Target
A/R over 90 days	91-120 days = under 5%; 120+ days = under 14%
Denials as a % of gross revenue	<= 3%-5%
Patient seen, number of days before claim is sent to carrier after receipt by GBS:	
Office/Clinics	< 3 Days
Facility Charges	< 5 Days
Days Revenue Outstanding:	24 days on average depending on the provider type and payor mix

Solutions as unique as your needs.



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