Case Study

Organization

One of the nation's largest providers of advanced wound healing services, encompassing hundreds of wound care centers and a national network of hospital-based wound specialists.

Challenge

The organization sought to collate multiple, disparate data inputs needed for professional fee coding and billing to increase staff productivity, reduce the cost to code, and ensure compliance.

Solution

Revenue cycle leadership worked with LightSpeed to centralize information inputs, identify missing documentation, and improve overall coding performance.

Results

- Reduced cost to code
- Increased coder productivity by 300%
- Improved coder and physician satisfaction through real-time reporting
- Built a central repository to gather up-front information from multiple data inputs
- Captured all billable visits and ensured complete documentation prior to claim submission

> "LightSpeed does everything we need to support efficient professional fee coding and billing for our hospital-based providers. They capture all the information we need on the front end so our team remains productive and accurate on the back end."

-Vice President Revenue Cycle

National Wound Care Provider Improves Professional Fee Coding Performance by 300%

One of the nation's largest providers of chronic wound care services was facing a coding and billing conundrum. With hundreds of wound care centers and a national network of hospital-based wound specialists, the organization struggled to reduce cost and improve efficiency across its coding and billing processes—mainly due to lack of control over information inputs from multiple, disparate sources.

Since the physicians provide services at hundreds of hospitals and other care settings, gathering visit information is time consuming and labor intensive. Details such as visit dates, patient demographics, insurance coverage, patient care charges, and clinical documentation are all needed for efficient and compliant billing and coding. The lack of standard data formats across EHRs and other data sources hindered the organization's ability to easily receive and collate this information.

"Staff were spending exorbitant amounts of time to obtain and verify clinical documentation on the front end to ensure correct and compliant coding on the back end," states the vice president of revenue cycle. They also lacked the ability to know when documentation was missing and notify providers prior to cases being coded and claims submitted.

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Gaining Control Over the Front End

To address these issues, the organization sought a partner with professional fee revenue cycle expertise. Partnering with Lightspeed Technology Group, it moved to centralize all information inputs, check incoming data for completeness, and alert providers of documentation gaps using the following strategies:

- **Centralize information**—collate data from multiple sources, including who was seen, their demographics and insurance information, and the charges chosen by providers
- **Check and verify documentation**—determine what's missing before the case is submitted to the coding queue, including which providers are missing notes, which cases are on hold for other data, and reconciliation of cases
- **Report and notify**—alert providers of documentation gaps, coding queries and missing notes for compliance coding, including medical necessity of wound care services

LightSpeed's ability to centralize information and provide full record management services with real-time provider feedback helped the provider get a handle on the front end of professional fee coding and billing. But the benefits of the LightSpeed project didn't stop there. The coding team also achieved a dramatic improvement in productivity, resulting in significant drops in the organization's overall cost to code.

Reducing Cost through Better Coding Workflows

According to a recent Health Affairs survey, doctors spend about three hours per week dealing with billing-related matters—including clinical coding. By one estimate, for every 10 physicians providing care, almost seven additional people are engaged in billing-related activities. Each of these medical support workers spends 19 hours per week per physician. Practice administrators spend an additional 36 hours per week. Added together, this time costs $68,000 per year per physician. Decreasing time and cost was another strategic goal for the organization.

By partnering with LightSpeed, the organization successfully reduced its cost to code by achieving a 300 percent increase in coder productivity. Coders no longer spend time tracking down information, identifying documentation gaps or communicating with physicians. The system handles these tasks for them. Changes introduced by LightSpeed save coder hours and administrative paperwork hassles to drive significant operational savings for the entire organization.

Beyond cost savings, improved coder and physician satisfaction were also strategic wins for this partnership with LightSpeed.

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Boosting Coder and Provider Satisfaction

The organization's coders review 100 percent of coding completed by providers. It then sends a variance report including coding changes and justification for each change using the LightSpeed solution. Providers receive a weekly report via an automated email link that takes them to the system login for further detail.

Initially, there was some pushback because providers sometimes challenge a coder's decision. But with ongoing education, providers have come to appreciate the feedback and have improved their coding skills as well. For example, as more of the organization's providers are brought into the LightSpeed workflow and education is provided, clinical documentation continues to improve. Specific provider benefits include the ability to:

- View real-time coding feedback
- Analyze actual examples of documentation opportunities
- Receive targeted education based on system-identified gaps
- Know why specific reimbursement is being received for procedures

The organization's revenue cycle administrators also appreciate having real-time visibility into which cases are missing documentation, are on hold for other data, or need feedback from the providers. Trends in RVU values, physician documentation and patient therapies are also visible to leadership personnel.

Advancing Revenue Cycle Performance in Wound Care

The organization now has the technology and workflow infrastructure to continually improve coding compliance as payers request more clinical documentation to prove medical necessity. Chronic wound care therapy is only allowed for a specific number of treatments and 30 days of standard care. With the support of LightSpeed, the organization is well equipped to demonstrate medical necessity for the patients they serve and ensure appropriate reimbursement is received for every treatment.

To summarize, the organization's vice president emphasizes the unique capabilities of LightSpeed. "Nobody does exactly what LightSpeed can do for the professional fee revenue cycle. Some outsourced business companies have developed similar capabilities, but they don't have the breadth of data integration, reporting power, or depth of coding workflow expertise."

To find out more about LightSpeed's revenue cycle and coding services, please visit **www.lightspeedinc.com**, call **(919) 259-0550**, or email **info@lightspeedinc.com**.

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