

Deployment Profile

Practice Management System: NextGen Number of offices: 13 Number of providers: 21 Number of Health iPASS kiosks: 25



Case Study: Carolina Asthma and Allergy Center (CAAC)

CAAC Return on Investment (ROI)

- Net patient revenue collection rates rose from approximately 81% to an expected 95% final collection rate after all the data is reported
- The improvement in patient collections was particularly noticeable in the months of March and April 2017 when monthly patient payments exceeded \$500,000
- In contrast, March of 2016 saw just over \$400,000 in patient payments for CAAC, while April of 2016 had less than \$400,000 in patient payments
- The year-over-year difference in April alone saw CAAC collect close to \$200,000 in extra revenue
- The increase in patient revenue collection allowed CAAC to reduce the time and cost of paper statements, phone calls, and other collection activities

Background

Carolina Asthma and Allergy Center (CAAC) has been serving the greater Charlotte area since 1952. With twelve locations throughout the city and its surrounding suburbs staffed by over 15 board-certified physicians and their administrative teams, CAAC is the largest asthma and allergy practice in the region.

Business Challenges

Like many practices, CAAC had been affected by an industry-wide increase in high-deductible healthcare plans (HDHPs) which shift more costs to the patient through higher deductibles and co-payments. In fact, between 2006 and 2015, annual out-of-pocket costs per patient rose nearly 230%, according to Becker's Hospital Review.

From April of 2016 through March of 2017 CAAC saw patient fiscal responsibility increase from 24.75% of revenue to nearly 27% of revenue – a clear sign that strategizing on how to ensure patients were paying was critical to maintain financial stability. Not only was growing patient financial responsibility making an increasingly larger portion of CAAC's revenue difficult to collect, it led to significant cost increases such as:

- Increased use of printing and postage supplies
- · More incoming and outgoing phone calls
- More employee time dedicated to collections
- Fees paid to collection agencies
- Besides these direct costs, growing patient financial responsibility was hindering CAAC's cash flow since patient bills were spending more time in Accounts Receivable (A/R)



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Solution

At the beginning of 2016, CAAC outlined three critical business services goals: reducing the cost of collections, increasing patient collections, and improving transparency around intra-muscular (IM) therapy and skin testing estimates. Before selecting Health iPASS, CAAC evaluated several patient payment vendors including Phreesia, InstaMed, and Alacriti. All were closely examined based on factors such as cost, ease of installation, and positive impact on patient experience.

Health iPASS was chosen based on its easy integration with CAAC's EMR/PM system, compatibility with credit and debit cards, and convenient patient check-in kiosk interface. Additionally, the practice was impressed with the way Health iPASS kept patients informed at each step of the billing process - from the initial email thanking them for registering and estimating post insurance claim adjudication charges to the final post-adjudication email informing the patient what they owed and when their card would be charged.

For a healthcare practice of CAAC's scope and size, the implementation of any new patient collection system would be a complex project. CAAC chose to implement Health iPASS in segments, beginning by a concerted effort to register as many patients as possible to the kiosk coming in for office visits.

From there, they began adding immunotherapy patients into the system which represent the bulk of their daily appointments. They progressed alphabetically through their immunotherapy patient roster to streamline the speed at which patients could receive shots and other treatments.



Results Delivered

- Net patient revenue collection rates rose from approximately 81% to an expected 95% final collection rate after all the data is reported
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Patient satisfaction also improved because of implementing Health iPASS. Since patient insurance plans are verified instantly, it is now much easier for staff to prepare and upload estimates for allergy test patients. For patients with higher deductible plans, clinical staff can provide an accurate cost estimate based on the number of skin prick tests ordered.

Since Health iPASS sends messages to patients at each step of the healthcare billing cycle, customer communication has also improved. CAAC's business office receives fewer complaints and questions about billing now that patients receive emails with more accurate and timely out-of-pocket estimates.

Finally, implementing a tablet-based patient check-in system has given CAAC a "high-tech" first impression. Seeing a new, more sophisticated patient revenue collection system shows patients that the practice truly cares about improving their experience and making it easy for them to understand and settle the costs of their healthcare.

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