



Justin Hammerling, MBA, MA

associate vice president,
ProMedica Innovations

Background

In 2019, there was over \$700 million in denials for post-acute care facilities in the state of Ohio, with approximately \$10 billion in denials nationwide. Using confidential financial information from more than 100 post-acute care facilities within Ohio, the average denial rate for small to mid-size post-acute care providers was 10% in 2019.

Managed care payments made up 22% of all payments at the beginning of 2019, up from 18% in 2018. The shift from fee-for-service to managed care has added another layer of complexity for the smaller post-acute care providers, which creates inefficiencies in processes that were established around fee-for-service practices.

Approach



Our approach at ProMedica Innovations was to create a joint venture (Healthonomy) with other strategic partners in the post-acute care marketplace to develop and commercialize a cloud-based platform that utilizes the latest in AI-enabled robotic process automation to digitize the manual workflows in the revenue-cycle process. This venture will deliver value to the end customer by reducing their claims denials (both first-pass denials and written off bad debt) through intelligent automation of workflows within the revenue-cycle process. This venture will deliver value to its investors by leveraging the resources of LinkAge, Strategic Health and ProMedica to penetrate

the post-acute care market to create an attractive acquisition or investment from a strategic market entity.

Outcomes



The workflows associated with the patient intake process have been identified as having the greatest potential impact to reducing claims denials to a post-acute facility. Eighty percent of claims denials can be prevented by ensuring that all the appropriate patient documentation is collected during the intake process.

The patient intake workflow has been documented and

we are translating the intake workflow into the robotic process automation software. This will allow for the responsible parties at the post-acute facility to review the information collected through an automated process and reduce the potential for a patient's claim denial.





Next Steps



Next steps are to automate the intake assessment process we validated with our subject matter experts and engage two of our seven beta-site members to deploy our automated workflows. We will monitor to ensure that the processes are being automated appropriately and measure the reduction of claims denials for 60 days post-automation.

Once the initial beta sites have validated the efficacy of the process automation, we will begin to develop a cloud-based platform to allow for the scalable deployment of automated workflows to multiple post-acute facilities.

Lessons Learned

“COVID-19 made it difficult to be able to access a post-acute facility to document the processes used for the intake and evaluation of a patient.”

Thus, we pivoted from automating a potentially inefficient process based on observations of current practices to documenting the ideal patient intake review process and automating that process.