

Regional Clinic Uses Al to Perform 50 Percent of Revenue-Cycle Workload

Inadequate Pre-Certification Resources Negatively Impact Reimbursements

Located in a large metropolitan city in the Southeast, this clinic is part of a larger comprehensive healthcare network. The clinic employs more than 2,200 outpatient clinical providers who schedule procedures that potentially require payer pre-certification of services—thus, necessitating a review of payer portals and the submission of pre-certification requests. The clinic's pre-certification department was not adequately staffed with enough resources to address each request efficiently, resulting in a high volume of high-dollar denials and write-offs as well as a reduction in reimbursements from missing pre-certifications.

With limited resources available to augment the pre-certification department's staff, the clinic began looking for an innovative technology solution to address these challenges. Clinic administrators turned to Windham Brannon's Healthcare Advisory team that recommended implementing an artificial-intelligence (AI) technology solution. The clinic outlined several objectives for the AI implementation:

- Reduce a need to assign resources to repetitive, "simple" pre-certification requests, allowing leaders an opportunity to deploy staff to more complex, acute requests that require additional clinical information, peer-to-peer review, and/or other payer required information;
- Eliminate the need to increase the pre-certification staff count, possibly reducing full-time-equivalent (FTE) overhead costs; and
- As AI completes programmed tasks, the technology would begin to identify areas of improvement learned through these processes to likely reduce denials and write-offs.

Windham Brannon Offers Al Technology as Part of Revenue-Cycle Consultation

The clinic had no prior experience with AI, so it was imperative that Windham Brannon ensured a seamless and successful experience. Windham Brannon partnered with Digitize.AI, a fast-growing independent AI company that had successfully implemented the technology in other business areas and could tailor it to the clinic's revenue-cycle needs.

As part of the implementation, the team conducted the following activities:

- Attended an onsite visit at the clinic;
- Identified areas of observation;
- Documented pre-certification process map(s) by specialty;
- Pinpointed areas where AI would improve processes;
- Collaborated with clinic finance and pre-cert teams to understand workflows to ensure AI was tailored to support work across existing systems;
- Obtained required system access and manuals for Al programming; and
- Worked jointly with IT leadership to determine the most appropriate method of deployment.

The decision was made to apply the AI technology to outpatient cardiology payer pre-certification request procedures. The team had to educate multiple stakeholders on the use of "digital employee" Lia. There are currently three people at the clinic who work directly with the AI technology.

More Submitted Claims and Improved Accuracy Rates Result in More Insurance Payments for Clinic

Once the AI technology was fully implemented, the clinic realized the new-found benefit of being able to address a percentage of pre-certification requests that were otherwise unresolved or not submitted to payers for completion. AI minimized the need for clinic leaders to allocate resources to less complex cardiology requests—thereby increasing visibility and the resolution ratio of more complex requests and improving the potential for reimbursement.

The clinic has been most pleased with the consistent, minute-by-minute submission of pre-certification requests that would have been left unresolved prior to implementation, drastically reducing the potential for denials and write-offs. All will continuously submit pre-certification requests—24 hours a day—increasing productivity and improving the visibility of incomplete requests and those without required information. In contrast, a human employee submits requests only during designated work hours (between eight to 10 hours a day based on work schedules).

Al has been able to perform approximately 50 percent of the workload assigned without manual intervention with accuracy rates higher than work involving humans. Prior to the implementation of Al, claims submitted with pre-cert information may not have been processed by the department due to limited staffing availability.

Because of Al's successful application within the revenue cycle, the clinic plans to roll out the technology to other areas beginning in early 2019.