

**CASE STUDY** 

# Ambulatory and Inpatient Revenue Cycle Operations Using the Cerner EHR



SouthEast Alaska Regional Health Consortium (SEARHC) is a nonprofit

Tribal health consortium serving 28 communities throughout Southeast Alaska. In 2017, SEARHC joined the Alaska Native Tribal Health Consortium, and other local Tribal health partners in implementing a shared Cerner electronic health record (EHR) system to improve communication between the organizations serving Alaska's Native population and to enhance the quality of care provided.

The aggressive implementation timeline, coupled with limited deployment assistance and training from Cerner experts, caused a decline in SEARHC's financial performance. The lack of a formal training program for an influx of new employees intensified these negative effects.

Nine months after go-live, SEARHC engaged ECG to evaluate the design, use, and performance of the revenue cycle system at two SEARHC facilities: Ethel Lund Medical Center and Mt. Edgecumbe Hospital. The goal of this assessment was to help SEARHC identify and quickly resolve the operational and technical issues negatively affecting its revenue cycle, which in turn would allow SEARHC to achieve positive financial results, realize operational efficiencies, and successfully adopt the new Cerner EHR.

Key findings from the assessment identified three main areas of opportunity: **revenue cycle, utilization review (UR)**, and **ambulatory operations**. With a mandate by SEARHC leadership to provide quick wins, ECG created performance improvement solutions for these three areas by developing specific, focused recommendations intended to enhance Cerner training and system design; we then helped SEARHC implement them. The key recommendations developed by ECG are listed below.

### **REVENUE CYCLE**

Collaborate

**RECOMMENDATIONS:** 

- Create new and improve
   existing major workflows (e.g.,
   charge entry) to eliminate the
   unnecessary rework that is
   currently being completed by
   the revenue cycle team.
- with revenue cycle and clinical leaders to develop policies and procedures that clearly describe responsibilities and accountabilities.
- Ensure the Cerner EHR build is enhanced in a way that is conducive to end-user satisfaction and prevents any negative monetary impact.

# **UTILIZATION REVIEW**

**RECOMMENDATIONS:** 

- Design and create
   clinical review templates
   to meet specific payor
   requirements and
   take advantage of the
   electronic functionality
   available within Cerner
   to aid in obtaining
   authorizations.
- Evaluate and refine
  all admission and
  authorization workflows
  to meet critical access
  hospital billing
  regulations and payor
  requirements.



# **AMBULATORY OPERATIONS**

RECOMMENDATIONS:

- collaborate
  with revenue
  cycle and
  clinical leaders
  to improve the
  current Cerner
  EHR build and
  related workflows to ensure the
  overall system design is fluid
  throughout the entire life cycle
  of a patient.
- Provide hands-on training on optimal workflows using Cerner's Win32 registration system and ambulatory module to over 70 clinical, patient access, and revenue cycle staff.<sup>1</sup>

<sup>1</sup> ECG estimates the training will be provided to approximately 70 individuals when the program is implemented.

A comprehensive work plan that tracked **immediate** (two months), **short-term** (six months), and **long-term** (over six months) activities against organizational goals guided the development of the recommendations. The recommendations centered on the following objectives:

- Ensuring EHR system build decisions were in line with best practices and supported an efficient revenue cycle
- Implementing the tools, processes, and training necessary to establish optimal Cerner workflows and support continuous optimization
- Establishing baseline revenue cycle performance indicators and measurement tools to monitor improvement and opportunity
- Providing a biweekly status report of accomplishments,
   planned activities, and appropriate performance benchmarks
   to relevant stakeholders

### **TOOLS USED:**

Cerner Millennium Registration

**Application: PM Office** 

Cerner Millennium Scheduling

**Application: SchapBook** 

Cerner Millennium Revenue Cycle

**Application: RevCycle** 

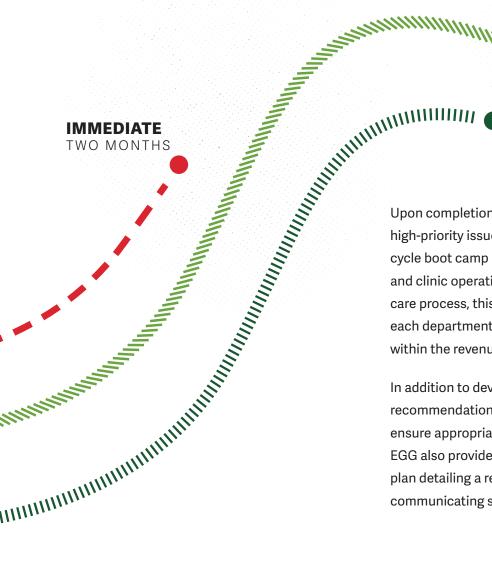


LONG-TERM

SHORT-TERM

Upon completion of the assessment and correction of high-priority issues, ECG coordinated and facilitated a revenue cycle boot camp and presented it to SEARHC's 12 revenue cycle and clinic operations leaders. With a holistic view of the patient care process, this helped the group gain an understanding of each department's unique needs, competing priorities, and role within the revenue cycle.

In addition to developing process improvement recommendations, ECG completed a staffing analysis to ensure appropriate staffing of revenue cycle departments. EGG also provided SEARHC with a comprehensive training plan detailing a revised process for onboarding new hires and communicating system and workflow changes.



# ELIMINATION OF MANUAL UPDATES

SAVED TIME





DA2 REPORTS
CREATED MORE
FINANCIAL
VISIBILITY

REGULATIONS ACHIEVED COMPLIANCE





Over the course of six months, the ECG team and SEARHC's revenue cycle leaders collaborated to identify and rectify





system design and workflow issues across all revenue cycle departments. The revenue cycle department leaders now have a deeper understanding of how the Cerner system functions and the tools needed to maintain the system and ensure it is fully supported moving forward. Other notable achievements included the following:

support. Many times we take our consultant friends for granted, but

I very much recognize the talent,

 Developed the ability to understand and build Cerner Discern Analytics 2 (DA2) reports to aid in the analysis of financial metrics.

- Achieved compliance with Centers for Medicare
   Medicaid Services UR-related regulations.
- Reduced nursing administration time by two hours every day through the creation of a DA2 custom clinical census report.
- Conducted a comprehensive staffing analysis and identified gaps affecting revenue cycle performance in the resource model that demonstrated the need to add or redistribute 12 full-time equivalents across revenue cycle functions.

again for all the great work and support. Many times we take our consultant friends for granted, but I very much recognize the talent, effort, and results you provide. With your help, SEARHC just had the best cash month in its history. I look forward to the future with a process and system we can trust, and I know you will help us get there."

DAN HARRIS
CHIEF FINANCIAL OFFICER
SEARHC EXECUTIVE OFFICES