East Coast CORE

Summer/Fall 2018 Meeting

JPMorgan Chase & Co. Global Headquarters

270 PARK AVENUE BETWEEN 47TH & 48TH STREETS NEW YORK, NEW YORK 10017

Wednesday, August 15

6:00 – 8:00 PM Welcome Reception

Join us to kick-off the East Coast CORE Summer/Fall 2018 Meeting as you arrive in New York City for hors d'oeuvres, cocktails and beautiful views of the city.

Where: Ophelia Lounge NYC (in the Beekman Tower) 3 Mitchell Place, 26th Floor New York, New York 10017

Thursday, August 16

7:30 AM Registration & Breakfast

Breakfast will be set-up outside of Room 203 in the Conference Center

8:30 AM Opening Session: Welcome to East Coast CORE, Meeting our Sponsors – Rm. 203

Ann Adenbaum, Weill Cornell Medicine

9:15 AM Keynote Address – Rm. 203

<u>– 10:10 AM</u> Lori Beel

Global Chief Information Officer, JPMorgan Chase & Co.

<u>10:25 AM</u> Breakout Session 1A: CFB Reduction (HB) – <u>Rm. 203</u>

- 11:20 AM Michelle Krysinski & Shaniece Parker, Cleveland Clinic

Share the journey of our organization's CFB reduction from 11 to 7 days in 2017. The presentation will include the watch indicators/metrics used, cross functional huddle structure, importance of system mappings/WQ ownership and final outcome.

Breakout Session 1B: Turnaround to Top Performer in Two Years (PB) – Rm. 1103

Ryan Bell, Sabina Strzeminska & Brad Cox, Northwestern Memorial HealthCare

Presenters share how they used an analytic-driven, operational and reasoned approach to their denials, payments, WQ structure, and follow up work to turn around many key metrics to increase net patient revenue.

Breakout Session 1C: Reducing Eligibility Denials in Epic (Access) – Rm. 1105

Ben German, Allegheny Health Network

By redesigning and enhancing their Real-time Eligibility tool and using root-cause analysis of eligibility denials to inform Registration Workflow warnings/errors, AHN is pacing towards a 30% reduction in eligibility denials in 2018.

11:35 AM - 12:30 PM

Breakout Session 2A: Price Transparency: Retail Pricing (HB) – Rm. 1103

Gina Filipovits, St. Luke's University Health Network

The benefit of a Price Transparency program: St. Luke's implemented a self-service program that offers patients an option to pay a bundled price, in advance, for imaging studies and surgical procedures. In addition, the tool provides comparison pricing based on insurance costs and self-pay cost.

Breakout Session 2B: Use of CRM to Improve Customer Service (PB) – Rm. 203

Anton Loman and Catherine Casey, UCLA Health

UCLA PB office implemented Epic's CRM module to track and report on patient feedback, with an overall goal of reducing patient calls and increasing patient satisfaction with billing services.

Breakout Session 2C: Referrals Revamp (Access) - Rm. 1105

Lynn Denk, Rochester Regional Health

Seven years post Epic go-live, RRH revamped the health system referrals process in an effort to better track patient care, create accountability, encourage in network utilization, reduce denials and improve provider and patient satisfaction.

12:30 PM

Lunch

<u>– 1:30 PM</u>

Lunch will be set-up outside of Room 203 in the Conference Center

<u>1:45 PM</u>

How to Tackle the Challenges of Epic Together – Rm. 203

<u>– 2:30 PM</u>

Moderated by Ann Adenbaum, Weill Cornell Medicine

<u>2:45 PM</u>

Vignettes – Rm. 203

<u>– 3:45 PM</u>

Vignette A: Building CRM Functionality into Epic

Malik Bahar and Ahalia Simmons, Virtua Health System

Learn how Virtua worked with Epic developers to build CRM functionality along with telephony integration into Epic enabling concierge-like scheduling and navigation services.

Vignette B: Work from Home - Implementing a Telecommuting Program

Melisa Brereton-Esposito, Yale New Haven Health

Explanation of how we implemented a Telecommuting Program in a very traditional revenue cycle work environment which led to increased job satisfaction, increased productivity and reduced office/parking space requirements. Includes an outline of the steps we took to ensure success.

Vignette C: Performance Management & Engagement of Remote Staff

Waldemar Mena, Hackensack Meridian Health

Organizations are required to become more effective, efficient and do more with less. Effective performance management allows for visible and clear accountability, documentation for evaluations, identification of areas of improvement and overall monitor of day to day activities. Employees are more productive when their work experiences are easy-going, challenging and fulfilling. Additional benefits of a happy workforce are lower employee turnover, better communication and loyalty to the organization/mission. We will discuss elements of our performance management approach such as productivity and quality standards, evaluation methodology, error/feedback workflow, educational sessions, etc. Also, we will discuss strategy for engaging and improving employee satisfaction scores such as accessibility, webinars, onsite meetings, recognition, social/educational events, timely response to inquiries from staff, etc.

Vignette D: PB Productivity, Benchmarking & Reporting

Dianne Pelay, Medical University of South Carolina

How to use productivity and benchmarking data to drive results; utilize reporting to support results.

<u>4:00 PM</u> – 4:55 PM

Breakout Session 3A: Efficiencies Gained with the Financial Assistance Module (HB) – Rm. 203 Kathy Lima and Lynn J. Waters, *Greenville Health System*

Learn how the Greenville Health System's Patient Access team utilizes the Epic Financial Assistance Module tool to collect and track financial assistance data, provide status reports, record collection of documents, track program requests, and improve overall efficiency of approvals.

Breakout Session 3B: Professional Billing Quality Review Program (PB) – Rm. 1103 Georganna Price, *The Ohio State University*

OSU Physicians will share their billing office quality review program, including audit policies, criteria for account selection, the process of reviewing accounts and reports from their quality review database.

Breakout Session 3C: Implementing Registration Productivity and Quality Dashboards (Access) – Rm. 1105

Alicia Bogner and Barbara Mehne, The Ohio State University

Implementation of Epic's Registration Productivity & Quality and Registration Scorecard Dashboards. Overview of the reasons behind the decision to transition to the Epic dashboards after using a third party vendor, how the dashboards are being utilized by staff and leadership, how users were educated on the change and the impacts of it.

5:00 PM - 7:00 PM

Networking Reception to follow at JPMorgan Chase & Co.

JPMorgan Chase & CO. would like to invite you to network with your colleagues and the Summer/Fall 2018 Meeting Sponsors after our first day of sessions at the beautiful JPMorgan Chase & Co. Global Headquarters on the 50th floor with an open bar, hors d'Oeuvres, and beautiful views of New York City and beyond.

Friday, August 17

8:00 AM Networking & Breakfast

Breakfast will be set-up outside of Room 203 in the Conference Center

8:35 AM - 9:40 AM Breakout Session 4A: Achieving Revenue Neutrality through Claims Denial Management (HB) – Rm. 1103

Robert Rubinowitz and Andrea Clark-Rubinowitz, MaineHealth

Case study of the tool we developed with clinical department to implement a new charge structure after Revenue Integrity identified a pattern in denials. We were able to identify clinical and billing indicators of our historical patients and build a predictive modeling analytic that projected revenue based on the new charge structure. The result enabled us to maintain gross revenue neutrality while increasing net revenue and decreasing denials.

Breakout Session 4B: Using 277 Claim Response Messages to Improve Efficiency (PB) – Rm. 1105 Shawnda Akers, *The Ohio State University*

OSU Physicians present their process of loading claim acceptance and claim status messages, which are used to populate follow-up work queues. OSUP will describe how the messages are used to prioritize work and improve efficiency by focusing on items that require follow-up.

Breakout Session 4C: Enterprise Pre-Service Financial Clearance Strategy (Access) – Rm. 203 Gail Scarboro-Hritz, Allegheny Health Network

This session will present the stakeholder business case and roll out of a pre-service financial clearance strategy implemented at Allegheny Health Network to target reductions in denials for medical necessity, out of network, authorization and eligibility.

9:45 AM EPIC Update: Current/Future Functionality and Q&A – Rm. 203

<u>– 11:45 AM</u> Epic Systems

What's coming next in Epic?

12:00 PM Meeting Adjourned