Neurosurgical Associates of San Antonio

“Experian Health has raised the level of expectation for effectively auditing and recovering payments.”
— Karl Swann, M.D., Neurosurgical Associates of San Antonio

Client. San Antonio-based neurosurgical group with 11 physicians.

Challenge/Objective. Maximizing performance of payer contracts generating 3,300 claims and $1 million in revenue per month; keeping up with frequent payer policy and procedure changes; and capturing more revenue from patients at the time of service.

Resolution. Experian Health Contract Manager identifies line-item contractual underpayments and offers insight into payer performance; Experian Health Payer Alerts provides immediate access to policy updates posted by payers; and Experian Health Patient Estimates and Experian Health Passport Eligibility work together to calculate quick, accurate estimates of out-of-pocket fees.

Results. Recovered more than $4.7 million in contractual underpayments; negotiated more favorable contract terms; reduced denials; and increased up-front collections of co-pays and deductibles by 60 percent.

Large neurosurgery group strengthens bottom line with Experian Health
“Experian Health has exceeded our expectations from the beginning.”

Client
As a premier neurosurgery and spine surgery practice in south central Texas, Neurosurgical Associates of San Antonio accepted most insurance plans. The practice grew steadily, but as the volume of managed care contracts and the complexity of their terms grew, so did denials and underpayments.

“We were having the same problem everyone sees. Our payers were not paying according to the contracts,” says Rosa Tealer, Business Manager at Neurosurgical Associates of San Antonio. Constant changes to payer policies and procedures further compounded the problem, often resulting in denied claims, payment delays and costly rework. Then, as payer and benefit plans began shifting more financial responsibility to patients, the practice struggled with capturing rising out-of-pocket fees because it could not accurately determine how much was owed until the insurance carrier paid its portion.
Neurosurgical Associates of San Antonio

Challenge/Objective
Manually detecting payment errors, monitoring policy changes and verifying insurance eligibility became overwhelming for the practice. With more than 110 managed care contracts — each with its own payment schedule, global service bundles and billing rules — practice staff had to manually go through stacks of explanation of benefits each day and spot variances. Despite their best efforts, the group missed a significant amount of underpayments.

Meanwhile, staying abreast of frequent changes to payer policies required the group to dedicate one full-time employee to regularly monitoring more than 100 payer websites. “Since 95 percent of our patients are surgical, it was critical that we understood payment policies prior to treatment so that we could avoid any lost revenue stemming from payment delays or denials,” explains Tealer.

The process of calling payers to validate patient eligibility and benefits information was equally labor-intensive and difficult to perform consistently. “Without the ability to determine patient co-pays, co-insurance and deductibles prior to surgery, we were forced to take a reactive approach to getting this money in the door,” says Tealer. “As a result, we missed a lot of opportunities to collect payment from patients.”

Resolution
Neurosurgical Associates of San Antonio first partnered with Experian Health to automate and streamline its payer contract management processes. Contract Manager allows the practice to check for denials and underpayments, identify payment trends and improve contract negotiations.

“Even though some may think the number of appeals will go down once you start to monitor your payments, our appeals are actually increasing,” says Tealer. “Our payers are continually initiating new bundling procedures, and Experian Health helps us manage these claims.”

With Experian Health data, Neurosurgical Associates of San Antonio has identified and eliminated overlapping and underperforming contracts, reducing the total number of contracts it manages from 110 to 26. Now, both commercial and government contracts are modeled in Contract Manager, and all of the practice’s claims volume flows through the application. “To me, it’s more of a management tool,” Tealer says. “I can determine which payers are compliant and which are not.”

Plus, Contract Manager empowers staff during their interactions with payers. “When we are appealing over the phone, we can bring up comparisons of allowables and read verbatim from our contracts,” Tealer says. “We have the data to back up our case.” The practice also uses the system to evaluate proposed contract terms and to secure more favorable rates during renegotiations with payers. A few years later, the practice added Payer Alerts, which enables staff to simplify and streamline the process of tracking the latest payer policy and procedure changes. “Now, each department has immediate access to the most recent policy updates and can make any needed adjustments, whether that means providing a medical necessity letter prior to surgery or revising preauthorization processes,” adds Tealer.

Neurosurgical Associates of San Antonio also leveraged Passport Eligibility along with Patient Estimates so its presurgery department could accurately estimate a patient’s portion of the bill prior to procedures based on the latest contract terms, payment rules and eligibility data. As a result, the practice is able to better set patient expectations regarding their financial obligations, explore flexible payment arrangements and minimize billing expenses.

“We give our patients their payment options up-front, and they welcome the opportunity to know what their insurance is paying. It’s a great educational tool for us,” says Tealer. “With this approach, we’ve practically eliminated outstanding receivables following a procedure because we are collecting so much more at the time of service.”

Results
Since implementing Experian Health’s revenue cycle products and services, Neurosurgical Associates of San Antonio has been pleased with the service it has received. The practice recovered more than $4.7 million in contractual underpayments; negotiated more favorable contract terms; reduced denials; and increased up-front collections of co-pays and deductibles by 60 percent.

“Experian Health’s service is characterized by integrity, efficiency and accountability,” says Karl Swann, M.D. at Neurosurgical Associates of San Antonio.

Throughout the group’s 12-year partnership with Experian Health, both business office staff and physicians say they appreciate the peace of mind that comes from knowing the practice collects what it deserves. Additional benefits include:
Case study
Neurosurgical Associates of San Antonio

Experian Health adds more than $4.7 million
Neurosurgical Associates of San Antonio
January 2000–January 2012
Recoveries from successful appeals: $4,798,000
Annual underallowance variance: 2.5 percent

- **Improved time-of-service collections** — In the past three years, the practice increased up-front collections of patient co-pays, co-insurance and deductibles by 60 percent. Providing accurate patient estimates prior to treatment has not only improved average monthly cash collections, but also has reduced the risk of nonpayment following treatment.

- **Increased revenue** — Experian Health helps the practice monitor the accuracy of its reimbursement, effectively appeal underpaid claims and accelerate payment collection from both payers and patients.

- **Cleaner claims** — Having immediate access to the latest payer policy and procedure changes means staff members can easily make required adjustments well in advance of claims submission. Additionally, Contract Manager helps staff identify registration and posting mistakes as well as data entry errors, further minimizing the need to resubmit claims and improving overall cash flow.

- **Enhanced efficiency** — Without the need to manually track payment variances, verify eligibility, monitor policy modifications or follow up on the status of patient bills, the practice has been able to reallocate staff to other responsibilities.

- **Better-performing contracts** — The data stored in Contract Manager helps staff negotiate increased payment rates and maximize revenue.