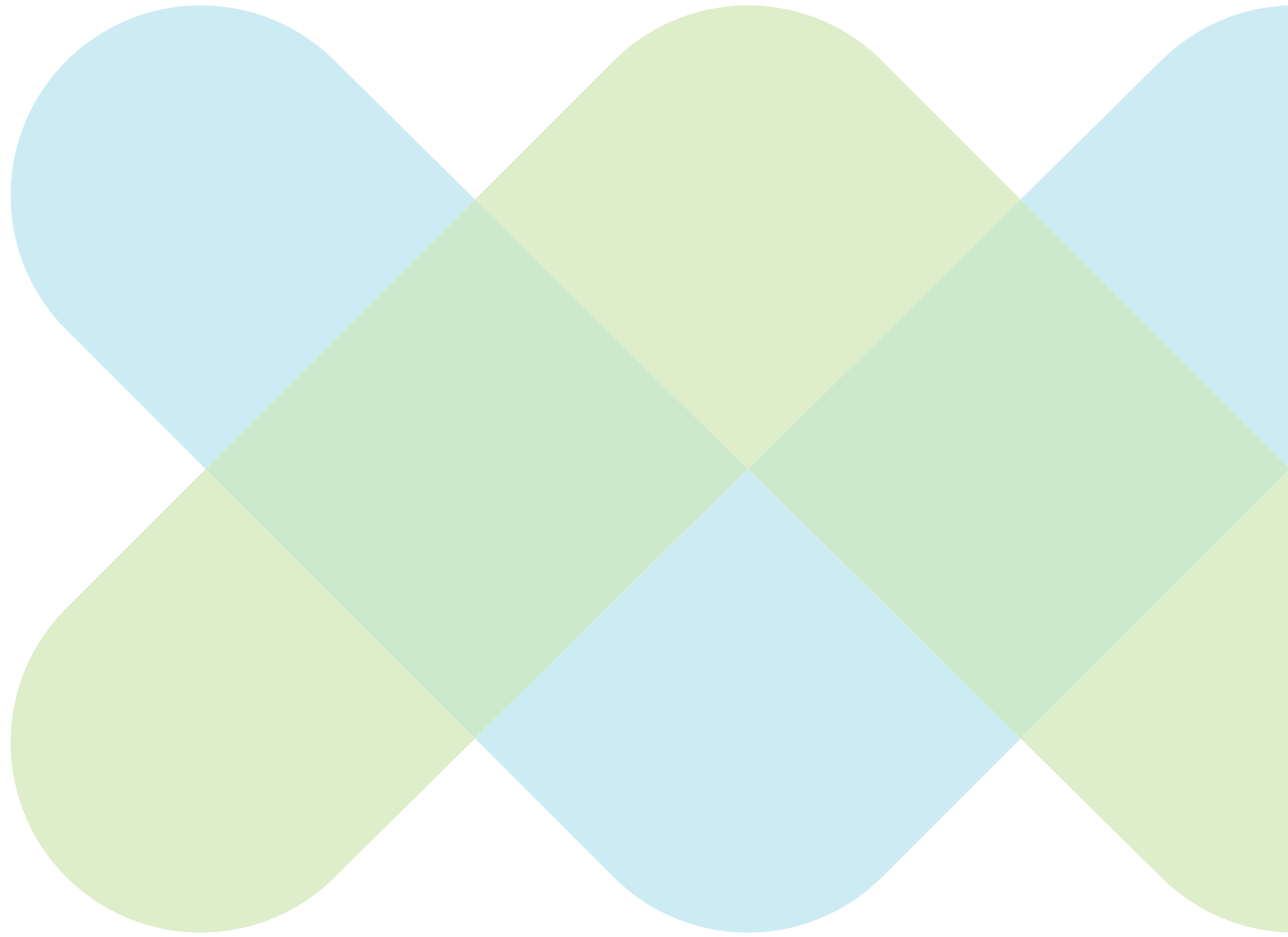




Connecting Disconnected Data®



Improving Revenue Cycle Management

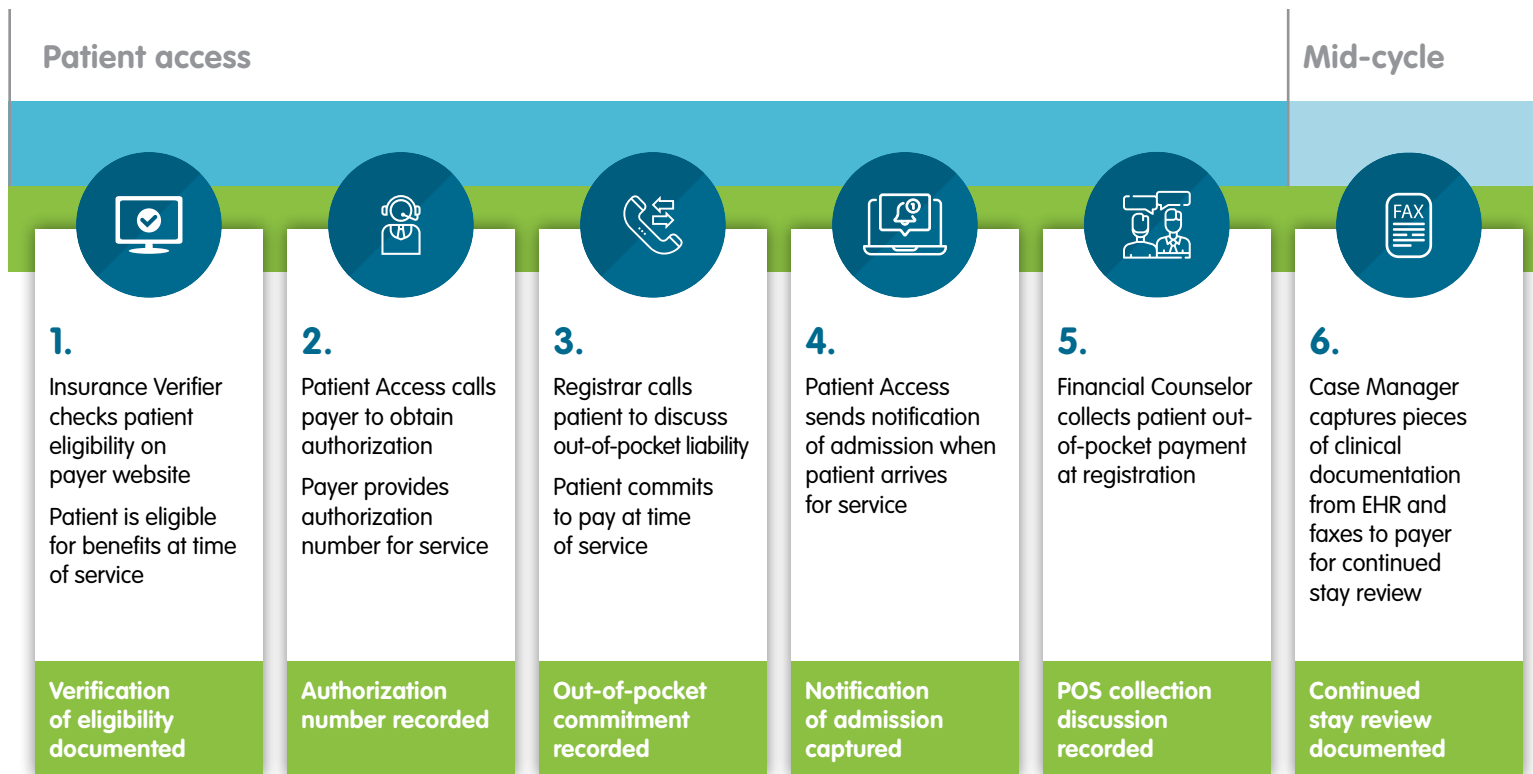
Connecting Disconnected Data®
vynemedical.com

trace
Protect. Prove. Perform.

A Workflow Across the Revenue Cycle

Whether the interaction occurs with a payer, physician or patient, and whether by phone, fax, web, or a face-to-face conversation, the Trace® solution from Vyne Medical provides a central repository of communication to support the payment for services.

Simply use Trace tools to capture the interaction, index it to the appropriate patient and retrieve the data in real-time for playback, processing and forwarding.



Minimizing delays

According to The Advisory Board Company: Nearly **2/3 of errors** leading to initial denials are traced back to issues with eligibility, authorization or demographic information.

“Trace allows us to drive down our denials. Whether it’s a denial related to authorization, verification of benefits or medical necessity, we can quickly provide supporting information to the payer so the denial isn’t there for an extended period of time.”

VP of Revenue Cycle
University Health System, Inc. (TN)

Lowering AR days

According to The Advisory Board Company: The 2011 survey median for AR days is **45 days**, while high-performing hospitals are at 35 days.

“We’ve reduced our net days in AR from 40 to down to 35 days. The fact that we don’t have to fight with payers to get paid has helped impact that for us.”

Vice President of Revenue Cycle Systems
Lowell General Hospital (MA)

Reducing cost to collect

According to The Advisory Board Company: Cost to collect represents **2.3%** of net patient revenue for the average hospital.¹

“My staff can get a claim overturned in the course of a five-minute phone call versus writing an appeal and fighting for months and months. Not only is it helping us get paid more rapidly today, it’s arming us with information to protect that money down the road.”

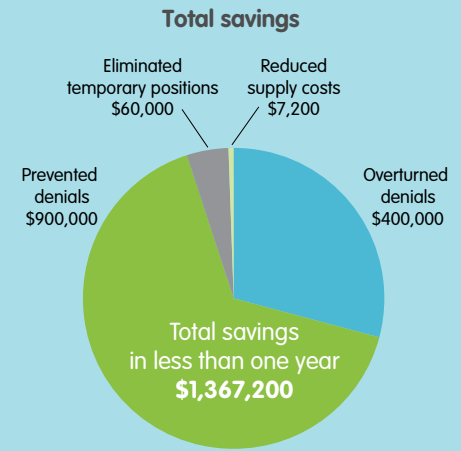
VP of Revenue Cycle
Saint Joseph’s Hospital of Atlanta

Health First Rockledge, FL

Health First used Trace to help overturn \$400,000 in denials and prevent \$900,000 in denials in less than a year. Trace improved staff productivity by 20 calls per day, eliminating the need for two temporary positions. Improvements in productivity and denials management resulted in a return of more than \$1.3 million.

“Trace is a great tool and tremendous recourse with payers that want to disclaim commitments.”

VP of Revenue Operations
Health First



Business office



7.

Discharge notification faxed to payer

Discharge notification captured



8.

Payer issues denial for lack of authorization
Business Office retrieves voice record of authorization and plays back for payer

Denial negotiation documented

Patient details

Last: Stanton
Acct: 0411362
DOB: 05 Nov 1941

First: David
MRN: 9584166
Admit Date: 27 Jun

trace



Patient transactions

	Transaction Date	Activity	Type
View	25 June 11:57 AM	Verification	Web
View	26 June 10:16 AM	Authorization	Phone
View	26 June 1:44 PM	Registration	Phone
View	26 June 2:58 PM	Notification	Fax
View	27 June 7:33 AM	Financial counseling	Face-to-face
View	27 June 10:05 AM	Continued stay review	Web/Fax
View	28 June 11:34 AM	Discharge notification	Fax
View	07 July 1:08 PM	Denial overturn	Phone

A permanent, easily-accessible record of revenue cycle activity arms providers with data to prevent denials, shorten appeals, increase POS collections, and help reduce the cost to collect.

Eliminating rework

According to The Advisory Board Company: The average hospital devotes **10%** of business office resources to reworking claims.²

“Trace gives the business office a single tool to go to for everything involving the front end. If they’re researching a denial or trying to find out what was going on with a patient on a particular date of service, they have that information readily available.”

Director of Access for Ambulatory Service
U.A.M.S. (AR)

Increasing collections

According to FierceHealthcare: **7 out of 10** hospitals and health systems collect less than 30% of their payments at the time of service.

“Since we started recording our notification to the patient on their out-of-pocket, we’ve seen about a 10% increase in people prepared to pay the day of surgery.”

Patient Access Manager
Arizona Hospital

Preventing denials

According to The Advisory Board Company: **1-3%** of hospital revenue is lost to denied claims; **67%** of denied claims are recoverable; **90%** of denied claims are preventable.

“We’ve used Trace to overturn more than \$2 million in denied claims and prevent an estimated \$4 million in denials. Our denials for eligibility and pre-certification issues are now at less than half a percent.”

Director of Patient Access
Children’s Healthcare of Atlanta

Are you protecting your investment?

Hospitals invest countless resources at each point of the revenue cycle to ensure full and accurate reimbursement for services.

What can revenue cycle leaders do to protect the investment being made to secure these hard-earned dollars?

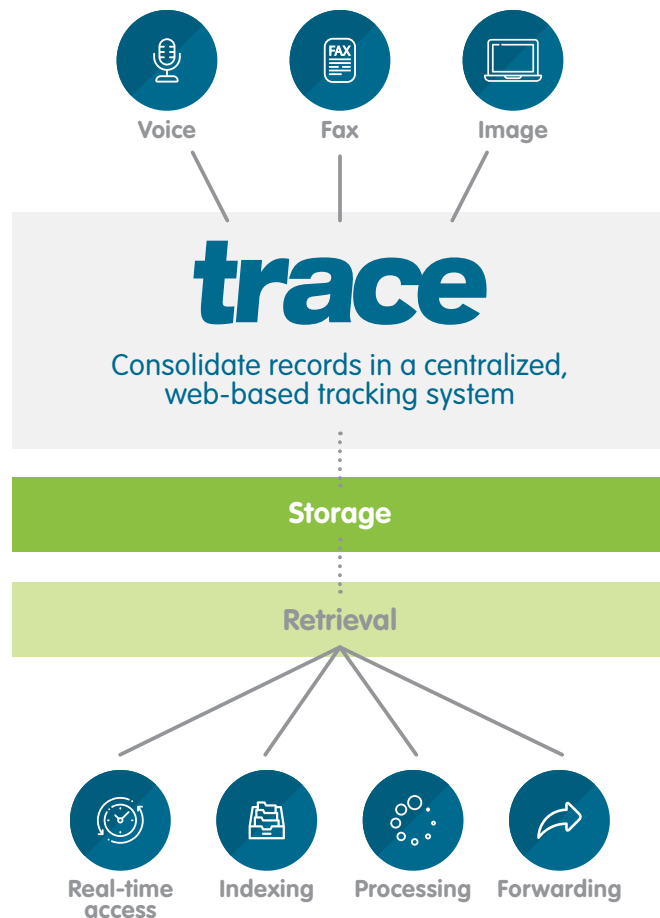
Trace will prove invaluable for your revenue cycle team by capturing and centralizing communication surrounding payment for services.

Communication is chaotic. Trace connects disconnected data by putting it in one place, centered on the patient and available at your fingertips right when you need it.

The Vyne Medical approach

Connecting disconnected data®

Capture all voice, fax and image communication



For more information, contact a Vyne Medical sales representative today.

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