Lowell General Hospital
Lowell, MA

Lowell General Hospital

The Need for Trace

For years, Lowell General, like many mid-sized community hospitals, relied on a paper-based system to track patient orders, insurance authorizations/approvals, and customer interactions.

But the process had several weaknesses:

- Insufficient documentation to overturn payer denials resulting from communication breakdowns
- Lack of phone call monitoring in revenue cycle departments such as the Patient Access Call Center, Patient Financial Services, and the Patient Accounting office, limiting the hospital's ability to improve customer service and resolve customer issues
- An inefficient process for receiving and processing patient orders, sometimes leading to customer frustration and delayed services

Lowell General implemented Trace to address these weaknesses and support its revenue integrity program through the following objectives:

- Overturn denials with documentation of payer communication
- Improve physician satisfaction through streamlined order process
- Increase efficiency by automating manual, paper-based processes
- Enhance customer service with improved quality assurance

396-bed community hospital

Serves the greater Lowell, Massachusetts region, about 30 miles outside of Boston.

Lowell is a very competitive market, with six community hospitals vying for market share, all trying not to lose patients to the tertiary medical centers of Boston. Thus, differentiating the hospital based on the quality of service provided and customer satisfaction is critical.

Implemented Trace in 2011

Situation

Physician orders were lost too frequently according to Lowell General Hospital's standards, sometimes leading to service delays. Lost orders triggered the classic blame game, followed by the all-too-familiar paper chase as employees searched for the orders.

"It all led to wasted time, wasted money, and unhappy patients and physicians, not to mention frustrated employees.

Putting an End to the Paper Chase for Lost Orders

Vyne Medical collaborated with Lowell General Hospital to eliminate a paper-based order tracking and authorization system replacing it with the more efficient Trace solution.

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Connecting Disconnected Data™

Solution

Lowell General implemented Trace to capture faxed orders through a central repository, where they are searchable by patient and available enterprise-wide.

Table 1 highlights the changes in the patient order process since Trace was implemented.

TABLE 1 | Changes to Patient Order Process with Trace

Before Trace	With Trace
Patient orders were faxed into one of several departments. Too often the paper was misfiled to the incorrect date of service or simply could not be found in the department when the patient arrived.	Faxes enter an electronic queue and are given a tracking number and date and time stamp. Staff regularly checks the fax queue and pulls its own faxes, immediately tying it to the patient record.
Whoever retrieved the patient orders had to make copies and deliver them to the appropriate departments.	Patient orders are available electronically throughout the hospital.
Lost orders led to delays, frustrated patients, and upset physicians and office staff.	Since implementing Trace, Lowell General has not lost or misdirected faxed orders. Patient and physician satisfaction is up; administrative time and expenses are down.
The distraction of the time spent in the paper chase led to a less-than-desirable customer service experience for the patient.	The patient is the center of the process.

With Trace, Lowell General has seen a rise in customer service and physician satisfaction. In fact, thanks to Trace and other hospital initiatives, the hospital's Press Ganey scores for physician satisfaction jumped from the 40th to the 90th percentile.

Attacking Claims Denials

Situation

When it implemented Trace, Lowell General was losing approximately $900,000 in gross revenues per year due to notification denials for inpatient admissions.

"We had many process improvement initiatives to develop a tightly refined notification process, but could not get it all the way to zero. This was not good enough for Lowell General Hospital. We knew we could do better which is why we turned to Trace.

"Payers would tell us over the phone that something didn't require preauthorization, and even though we made copious notes about whom we talked to and what they said, the payer would reject the claim. Even when we appealed, they rejected the claim."

- William Wyman, Vice President of Revenue Services

Solution

Lowell General implemented Trace to document voice, fax and electronic communication with payers for proof to prevent and overturn denied claims, streamline appeals and reduce delayed payments.

Today, Lowell General loses less than $75,000 in gross revenues per year due to inpatient notification denials, representing a 91.6% improvement. That, of course, translates into additional revenue.

According to Wyman, "We are now capturing that voice communication in real time…we can even capture a real-time image of the web site and its instructions. Once we share that data with the insurance company, the claim is paid. Most payers are working a lot more easily with us in overturning those denials, even if they don't have a notification in their system.

"That's because Trace brings undeniable proof that we did what we needed to do to get paid. We did everything right, and now we can prove it to the payers."

Figure 1 | **Reduction in Lost Revenue in Imaging Department**
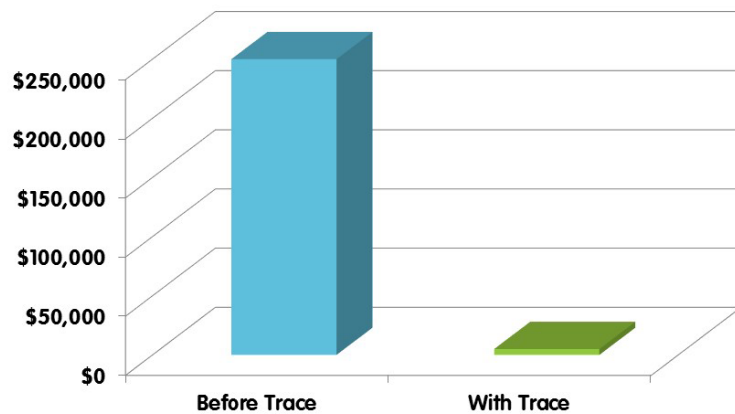
In the area of pre-certifications, the amount of lost revenue from denied claims plummeted from $250,000 a month to just $5,000 a month through a series of revenue cycle process improvements which included Trace, improving the hospital's net reimbursement by nearly $3 million a year.

Figure 2 | **Reduction in Accounts Receivable Days**
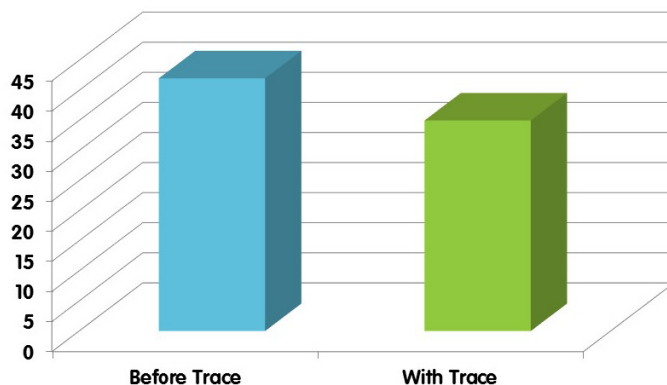
Through these and other revenue cycle improvements, accounts receivable (AR) days dropped, falling 16% in a year from 42 days to 35 days.

Greater Efficiencies

Efficiencies are what really matter to Wyman. "Trace is not only about protecting revenue, but also about evidence of compliance and improving internal communication to, in turn, improve workflow and teamwork."

The hospital now uses Trace to record all customer service calls and refers to the recordings if questions arise later. In addition to service recovery, this also offers important information about the quality of service each employee provides.

Lowell has been able to maintain staffing levels while increasing call volume because staff no longer need to leave their desks to search for paperwork. The hospital also saves 40 percent a month on paper costs.

"As a result of implementing Trace, we have a streamlined workflow and eliminated numerous staff headaches. The order is received electronically, filed to the patient's information, and stored until needed. There is no more paper chase and that's increased productivity. Our staff can spend more time on the phones, at the reception desk—they have more time now to provide excellent customer service to our patients when they arrive. We've eliminated the rescheduling, cancellations, and delays in service that used to occur."

- Michael McAuliffe, Compliance Analyst

Implementing Trace

Lowell General rolled out the Trace system in three phases, focusing on the most patient-centric, revenue-generating departments first.

Leadership noted that Trace was a surprisingly easy sell to staff. That's due, in part, to the intuitive interface between Trace and the hospital's existing electronic systems. But also to the staff's excitement.

"The clinical staff quickly saw the benefits, particularly since they were not being asked to do anything new.

"They saw that Trace freed them up from some of the clerical work they were doing and put information at their fingertips.

"Trace didn't try to change our processes. Trace just supported what we were already doing."

- William Wyman, Vice President of Revenue Services

Lowell General continues to find new uses for Trace. Employees in the medical records department used process mapping to identify how Trace could help it reduce the number of steps required to satisfy records requests.

For instance, instead of the 12 steps required pre-Trace, it now takes just 4 steps. That, in turn, reduced the time required to provide the record from 10 days to just 2 days, reducing AR days and improving claims collection.

"Our mission is to become the best community hospital in America. We drive that goal with our mantra that patients are first in everything we do.

"Through our promise of Complete connected care^{SM}, every touch point with a patient, every transfer of a patient to another staff member, or transfer of the patient's information or paperwork to another department needs to be done efficiently with great effectiveness and with excellent customer care.

"Trace helps us do this by supporting our communication among departments, within departments, and with external entities, including insurance companies and other healthcare facilities."

-Sandra Clay-Hillyard, Director of Patient Access

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