Dr.BPO

A **KGISL** Enterprise

CLAIMS SUBMISSION

The smart way to increase your revenues

ROBUST | PROFITABLE | STREAMLINED

SEI - CMM Level 4 COMPANY

ISO 9001:2015

SECURE DATA ENCRYPTED — network solutions

PCI DSS COMPLIANT

ISO 27001:2013 — INFORMATION SECURITY MANAGEMENT SYSTEM

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CLIENT PROFILE:

Our client is a leading biometric testing and wellness company based out of Pennsylvania
They provide comprehensive on-site health screenings and wellness programs for public and private employers, insurance companies and promoters of health related products and services

EXISTING PROCESS:

The company was using in-house Medical Coder to submit the claims to insurance company via clearing house but due to non availability of staff they were lagging behind in submitting the claims by at least 3 months with no clear visibility of the claims submitted or received
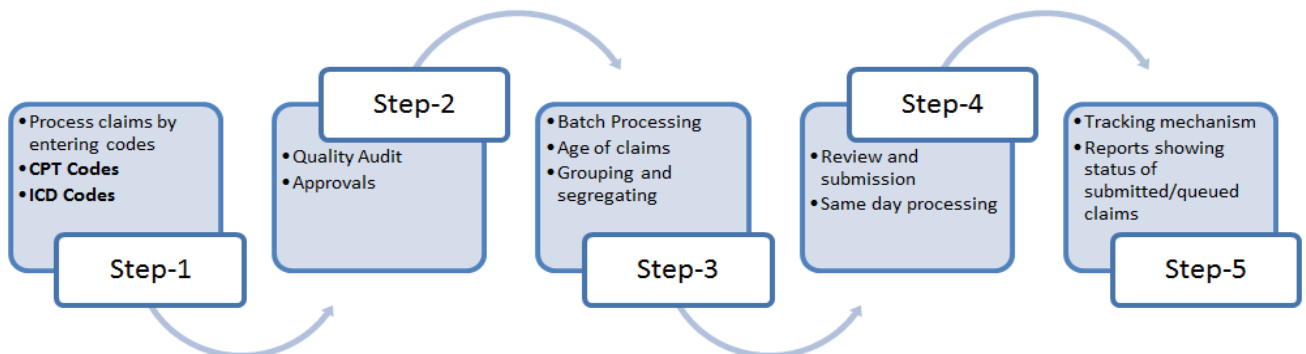
HOW WE HELP THIS CLIENT?

The client approached us to handle their clearing house to process the claims. KGiSL used its Business Process improvement capability in structuring an organized & cost saving methodology for the client's claims submission process

We created a daily workflow for the client and the solution details are as follows:
- As a first step the team cleared off the back logs in a week
    - Analyzed the claims and identified the errors that showed subscribers Id's were not found or the entity's date of birth was wrong
    - Grouped them by insurances and updated as well as resubmitted the claims
    - We submitted 1109 claims of 1367 total pending after eliminating the ones that were already submitted or had no claims
    - Thus the pending claims were processed and updated

Plans	Count
Amerihealth Caritas PA	16
VIP Choice	103
Keystone First	990
Total pending records	1109

The team adhered a proper process flow thus eliminated the possibility of claims getting denied or rejected

Step-1
- Process claims by entering codes
- CPT Codes
- ICD Codes

Step-2
- Quality Audit
- Approvals

Step-3
- Batch Processing
- Age of claims
- Grouping and segregating

Step-4
- Review and submission
- Same day processing

Step-5
- Tracking mechanism
- Reports showing status of submitted/queued claims

- Highly trained Coders were deployed to code with highest level of specificity
- Certified Auditors were assigned to approve the claims which resulted in 24-hour turnaround for our services and guaranteed a score of 95% or higher accuracy
- Post approval, claims fall into queue for processing by the Claims Specialist
- We tracked the claims to be submitted by their age, insurance company and grouped them for batch processing the same day
- A tracking mechanism is in place to review the status of every claim being submitted once in every 15-30 days of submission
- Claims are now being billed on a timely basis, follow-up is current and a more predictable cash flow has returned

RESULTS:
- Cleared all the backlogs accumulated for over 3 months in just 5 work days
- Submitted all the fresh claims received in less than 24 Hours
- 100% track on all claims received with a comprehensive report providing clear visibility of statuses
- Control over ageing claim denials due to timely filing
- Multi-shift operation helps reduce the turnaround time

OUR VALUE PROPOSITION
- ✓ Full revenue cycle solution from patient scheduling to collections
- ✓ Flexibility in using any billing software
- ✓ Certified coders on needs basis
- ✓ Efficiently reduces aging on A/R to maximize cash flow
- ✓ 24 hours turn-around-time
- ✓ Strict quality control standards
- ✓ Provide daily, weekly and monthly reports
- ✓ Gain performance efficiencies

ABOUT US
KGiSL is a leading provider of Business Support Services (BSS) and Global Software Services (GSS) and is a part of the $750M flagship KG Group of Companies which is in business for over 80 years. KG as a group has been in the healthcare business for the past four (4) decades, building on this bedrock of seasoned experience, the enterprise has established and successfully partnered with individual practitioners in USA easing out their complexities in revenue cycle management process.

HIPAA Compliant

Saves Operational Costs by 50%

Process engineered and streamlined operations

24 x 7 Support

Business Analytics

Superior talent: Credentialed staff with Domain Expertise