



CASE STUDY

More than \$10 million in recovered revenue annually for academic medical center

CLIENT:

A leading academic medical center and comprehensive healthcare system in the Northeast.

OPPORTUNITY:

For one of the largest academic medical centers in the country, revenue leakage was a significant and growing problem. A host of pain points – the constantly evolving payer landscape, determining coverage eligibility and medical necessity, changes in billing requirements, retroactive disenrollment, timing delays and documentation inaccuracy – were leading to thousands of denials each month.

While the leakage comprised of less than 2% of total earned revenues, that still translated into several million dollars per year. Despite the hospital's internal billing team's best efforts to scrub patient data to find other insurance coverage, and navigating challenges with meeting the tight deadline for Medicaid's retrospective billing rule, a more automated system was necessary to avoid additional losses due to missed deadlines.



40%
Medicare



37%
Medicaid



23%
Commercial and
other insurance

The breakdown of inpatient hospital revenues include 40% stemming from Medicare, 37% from Medicaid, and 23% from commercial and other insurance.



Rather than giving you the entire haystack,
TransUnion just gives you the proverbial needles.

- VP, Finance at TransUnion client

SOLUTION:

To streamline timing requirements, the client partnered with TransUnion Healthcare for additional insurance coverage discovery by turning over its internal findings within 45 days. TransUnion Healthcare's Revenue Assurance solution – which is optimized to assist the unique needs of AMCs – used advanced algorithms to supplement these findings, utilizing the hospital's patient data alongside TransUnion's proprietary technology to uncover additional payment opportunities. Once the information was reviewed and the findings were substantiated, TransUnion Healthcare provided accurate and actionable results to the client. TransUnion Healthcare was also able to identify systemic issues within the client's internal processes, enabling the hospital to assess and correct operational inefficiencies.

RESULT:

By partnering with TransUnion Healthcare, the client's coverage findings went up significantly, and timing and eligibility-related denials substantially decreased – as did revenue leakage. To date, the flagship hospital has recouped more than \$10 million in revenue annually by implementing TransUnion Healthcare's Revenue Assurance solution, not including other affiliated hospitals.

TransUnion Healthcare's Revenue Assurance is a technology-enabled service that combines market-leading, proprietary software with expert knowledge of billing processes, regulations and the revenue cycle. Revenue Assurance identifies "hard-to-find" insurance coverage and uncovers incorrect payer information or policy numbers; identifies billing system and process breakdowns that result in unreceived, unaccepted, returned or denied claims; and finds and recovers TDRG underpayments on historical Medicare accounts.

To learn more about Revenue Assurance, inquire about a no-obligation assessment, or to join 6 of the top 12 academic medical centers that already use the solution, visit transunion.com/revenue-assurance