



**‘Maternity Care
Deserts’ Continue
to Threaten both
Provider and
Community Health**

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Harnessing the Power of AI to Drive the Revenue Cycle

Leveraging the “virtual employee” to maximize efficiency

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While healthcare providers are seeing financial pressures begin to abate this year, staffing challenges still persist. Providers are relying on more expensive contract labor to meet staffing demands, which continues to negatively impact the bottom line.

Wherever providers are struggling with the volume of work, automation via artificial intelligence (AI) is a viable solution.

Leveraging AI

AI is ideal for taking on repetitive revenue cycle tasks and can do so for a fraction of the cost of a full-time employee. By increasing reliance on AI technologies, providers can get more work done faster and leave more complex challenges to human staff.

Incorporating AI does not necessarily mean that jobs will go away. It means that:

- More work gets done, so accounts are worked and not left untouched, stagnant and aging to the point of write-off
- Existing staff have additional support so they can do their jobs more effectively
- Providers benefit financially

In a world where payers are ramping up their use of AI to deny or stall payment of claims, providers need to step up with automation to keep up with the increase in claim rejections.

It may feel like we are living in a futuristic “battle of the bots,” but providers need to use AI to stay competitive.

The “Virtual Employee”

In a very complex operating environment with financial margins slowly recovering and labor costs increasing, many healthcare provider teams simply do not have the internal staff or resources to build AI technologies internally.

To take full advantage of AI, providers should carefully vet potential AI partners in order to select the best solution. The AI vendor should be able to show that it has experience in the healthcare revenue cycle and a strong track record of leveraging AI that generates measurable financial results for its provider clients.

What should an AI vendor’s “Virtual Employee” look like? Here are qualities to look for when identifying an AI vendor. Their AI technologies should:

- Run 24/7/365 with no downtime
- Solve specific revenue cycle tasks
- Apply machine learning to grow in their capabilities and scale up as they advance
- Work in tandem with staff to augment revenue cycle capabilities and work exponentially

An Example

In mid-2020, my company Meduit set out to create a “Virtual Employee,” which was an idea that had never been done before. Our

AI team built a solution that initially solved one repetitive revenue cycle task and quickly grew to handling a dozen. Because the AI solution was infused with machine learning, it has expanded over time, now works 150,000+ accounts every month and has solved 2.5+M tasks since its launch a little over three years ago.

This AI solution scaled up quickly because it eliminated the need for the provider’s IT department to be involved, build interfaces and do testing. That takes a tremendous amount of time and resources. The AI technology was able to just start working for the provider, similar to their hiring a temp employee to do a job.

What Can AI Solutions Do?

AI technology can be programmed to perform any task that can be done automatically.

Today, AI solutions can accomplish tasks like these:

- Insurance: Verify insurance eligibility, update coverage and generate a replacement claim
- Claims: Scrub pre-bill claims in editor, apply business logic billing changes and free up billers to focus on complex claims
- Medical records: Recognize records requests from payers, locate document in EHR and upload document to payer portal
- Adjustments: Assess when an adjustment is required; post adjustment to claim with code and documentation

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Staffing is also a challenge for providers given labor shortages due to the increased cost of recruiting and retaining the specialized staff that maternity services require. Add that payer reimbursements – especially government payors – may only cover a small portion of actual costs, offering obstetric services becomes increasingly difficult if not, for some providers, impossible.

While these closures may offer some marginal relief to struggling providers, they create challenges as well. Among them are making it more difficult for providers to adequately protect the health of their local communities by exacerbating already existing health disparities. One example of this is borne by [research](#) by the Harvard T.H. Chan School of Public Health that found that these closures disproportionately impact communities of color. This type of disparity also impacts lower-income women who are less likely to receive early prenatal care.

The health risks created by women being forced to forgo preventative and/or required care before, during, and after delivery can translate into higher treatment costs, especially if they need to use the ED as an obstetrics department. Many of these additional increased costs may not be fully

reimbursable by government or private payors. This, in turn, creates an additional drag on the provider bottom line that even the most talented RCM teams may find difficult to surmount. And the reduction of obstetric services of course results in reduced revenues to the provider (a NICU for example, can be a profit center for many providers).

There are a variety of steps that providers can take to address both the community health and operational challenges posed by maternity care deserts. These include the following:

- Better address workplace concerns that may make it more challenging to recruit qualified maternity department staff
- Task RCM and financial planning teams to identify ways to maximize both government and private payor reimbursements
- Work with other local providers to see where consolidation and/or sharing of resources and services may provide economies of scale and new maternity revenue opportunities
- Explore local area community hub-and-spoke operations that can reduce staff costs while ensuring that basic pre- and post-natal services remain available
- Expand obstetric telehealth capabilities to help ensure expectant mothers are

- receiving the prenatal visits they need while creating new revenue stream possibilities that RCM can maximize
- Explore offering midwifery and doula services, again to fill in care gaps as well as create possible new revenue streams
- Combine forces with other local providers and provider associations to lobby for changes to Medicaid reimbursements rates to better align with today's costs (for example, by creating an add-on and/or lump-sum payment program like existing Medicare prospective payment systems)
- Work with local communities and governments to explore the feasibility of establishing freestanding child birthing centers for lower risk pregnancies
- Partner with local businesses, including payors, to develop or charter mobile prenatal care clinics to take this critical care into the communities most impacted by maternity care deserts

The challenges posed by maternity deserts are not insurmountable. The health of our communities, and of the providers that serve them, depend on it.



Joy Stephenson-Laws, JD

- Denials: Provide proper verbiage in the submitted claim, manage the appeal process and deliver denial analytics and transparent reporting back to the provider's system
- Patient emails: Read emails from patients, identify what they are asking for and determine whether it's something that can be done automatically

Conversational AI, which is expected to have a very positive impact on patient satisfaction, is on the near horizon.

Conversational AI involves:

- Listening to live patient calls 24/7/365
- Understanding the request or question
- Either responding with a solution or routing the call to the correct place for an agent

Conclusion

Tapping AI-powered solutions for solving RCM issues is not a passing trend. It is a fundamental transformation that will require providers to get onboard or risk falling

behind financially. The right course of action is to engage a trusted AI partner that knows the RCM landscape well. This strategy will help providers survive and thrive in 2024 and beyond.



Jeff Nieman

Does Your Healthcare Revenue Cycle

ENSURE FINANCIAL STRENGTH?



GET STRONGER WITH MEDUIT

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STREAMLINE A SEAMLESS PATIENT FINANCIAL EXPERIENCE across all channels

UNCOVER AND GENERATE CASH from areas you might not have considered

HANDLE THE WORK OF 100 FTES through AI and automation, freeing your staff for more complex RCM tasks

Meduit's proven team of healthcare RCM experts delivers unparalleled financial results while always striving to create positive patient experiences.



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For more information, contact Meduit – call: **877-615-6360** or visit: meduitrcm.com

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