

# CycleUP

meduit

The National Award Winning RCM Digital Magazine

Vol. 6 | July 2024



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# Humanity and Technology: Finding the Right Balance for RCM Success

from Jeff Nieman, CEO

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Jeff Nieman, CEO

As we sit just beyond the midpoint of 2024, the technological transformation of healthcare RCM is still top of mind. Today, artificial intelligence is working 24/7/365 on everything from coding and billing to walking patients through a completely automated payment process. Predictive analytics are helping organizations target high-probability patient accounts to accelerate cash flow while also flagging insurance claims that are likely to be denied. As you'll read in this edition of *Cycle Up*, Meduit

is leading the way in introducing conversational AI to healthcare RCM, a technology that enhances efficiency and improves patient engagement and satisfaction.

At this moment, there's no question that technology is the unifying force driving innovation and progress in all areas of our industry.

However, as I prepared to write this article, I found myself reflecting on how the rise of AI has underscored the crucial role of human expertise in revenue cycle success. This is a concept that we at Meduit fully appreciate. While AI is a powerful tool for enhancing accuracy and productivity, it lacks the empathy, critical thinking, and nuanced understanding that are vital for navigating complex RCM issues. Therefore, human intervention and oversight remain as essential as ever.

Beyond the challenge of finding enough skilled RCM professionals (a task made more difficult by the current labor shortage, which you can also read more about in this edition), RCM success hinges on effectively integrating these individuals with emerging technologies.

**I suggest that the new healthcare RCM ecosystem features the harmonious interaction of technology and human expertise, working together to drive better financial performances for healthcare organizations and more gratifying experiences for the patients they serve.**

At Meduit, we're striving to help our customers excel in today's evolving landscape with best practices that integrate the latest technologies with our amazing team of RCM specialists. Later this year, we'll have exciting news that reveals the depth of our commitment to this integration, so please stay tuned.

For now, I invite you to read and enjoy this edition of *Cycle Up*, where several of the topics touched on above will be explored in greater detail.

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**Legislative sessions are active nationwide on both the federal and state levels, and the collection industry is once again a hot topic within newly introduced bills.** Many of these bills focus on healthcare and the collection of medical debt; therefore, Meduit's team is closely following the progression of these bills. We know the negative impact some bills could have on the future of collections, and while we cannot control the outcome, we are doing more than just watching from the sidelines.

Meduit is working to communicate and advocate regarding the bills that would have negative and positive impacts on our clients and our agencies. Internally, we are holding cross-departmental meetings to review and determine the challenges each piece of legislation would present.

**Through emails, phone calls, and in-person meetings, Meduit is speaking out to state and federal legislators to educate them on the negative unintended consequences these pieces of legislation can and will have on their constituents.**

In partnership with our industry organization, ACA International, we send representation to Washington DC and individual states throughout the year to meet with senators, members of Congress, and officials from agencies such as the CFPB. While in these meetings, we speak about the impact pending bills have on businesses and employees; to the future of healthcare services for individuals; and focus on showing the positives that are fed into our economy and communities from ensuring that all forms of extended credit and debt continue to be collectable from consumers. By talking through the crucial sections of specific bills, we are taking action that has had a proven impact on the final language of signed legislation.

There is a balance that must be maintained between what sounds great as political buzzwords to voters and what will impact our economy, healthcare, and businesses in the long term. Meduit is dedicated to continuing the fight for transparency on all sides of the issues and will engage in every opportunity available to speak out on behalf of ourselves and our clients. If there is ever legislation you would like to partner with us on, do not hesitate to reach out. We are here to help!

**For questions regarding this alert, please reach out to Jill Cloys, Meduit Director of Compliance, at: [jill.cloys@meduitrcm.com](mailto:jill.cloys@meduitrcm.com).**

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# Let's Talk About Conversational AI



As hospitals and health systems strive to provide an outstanding patient experience while also navigating revenue cycle challenges, conversational AI is emerging as a game-changing technology that helps in both areas.

SARA (Supervised Autonomous Revenue Associate) is Meduit's conversational AI tool that's helping streamline the payment process for patients right now – literally. Whether you're reading this at 11:00 am or pm, SARA takes calls 24/7/365 to give patients the control they desire over their payment journey.

Research indicates that patients today want the freedom to choose when, how, and with whom they make their payments, whether it's an automated system or a live representative. SARA, as a self-service option, enables patients to execute a variety of tasks on their own schedule, contributing greatly to a more gratifying payment process.

***"We basically train SARA as an entry-level service representative," says Doug Marcum, Meduit's Sr. VP of IT. "SARA is aware of the customized baseline of rules we build for each client and can leverage them in a conversation. If a patient asks to speak with a person at any point, we immediately interrupt and transfer the caller to a human representative."***

24/7 accessibility is only one of the many benefits that conversational AI tools like SARA offer providers and their patients. Others include the following:

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## Let's Talk About Conversational AI

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### Consistent Customer Service



SARA provides the same service to every single person, every single time. SARA can detect the emotion of a caller and whether they'd be better served by a live representative. However, as you'd expect from machine-generated AI, SARA has the same disposition for every call.

### Multi-modal Interactions



This capability allows SARA to engage in a voice conversation with a patient until it reaches a certain complexity level, at which point SARA will text the patient a link to a portal for additional service. Using multi-modal communication in this manner allows SARA to execute and complete more tasks without transferring callers. Meduit is a multi-modal pioneer in the RCM space.

### Faster Access to a Representative



Patients who want or need to speak to a customer representative can get there faster because SARA handles all the simple calls, freeing staff to handle more complex questions. In an industry that's consistently challenged by staffing shortages, conversational AI tools like SARA help providers optimize their existing staff members.

### Accelerated Cash Flow



SARA's 24/7 capabilities allow for more transactions to take place after hours, while also reducing the number of voicemails and callbacks awaiting staff the following day. The revenue SARA generates after closing is equivalent to having multiple full-time employees working shifts after-hours.

More than ever, revenue cycle success for hospitals and health systems is contingent upon providing an excellent patient experience – from the level of care provided through the ease and efficiency of the payment process. Conversational AI and tools like SARA offer patients the convenience, accessibility, and control they desire, translating to more satisfaction and better outcomes. For providers, conversational AI can streamline processes, mitigate staffing challenges, and expand revenue-capturing windows.

**With all its benefits, it's easy to see why conversational AI is being hailed as a transformative technology for healthcare RCM.** As it advances, it will become an even more beneficial choice for providers wanting to significantly improve patient engagement and satisfaction with a single tech-powered solution.

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# Spotlight on Creating a Straighter Path to Customer Success

Stephanie Higdon, Chief Customer Success Officer

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Stephanie Higdon  
Chief Customer Success Officer

In each edition of *Cycle Up*, we sit down with one of the leading voices on the Meduit team. In this issue, we're talking with Stephanie Higdon, *Chief Customer Success Officer*, about the unprecedented RCM challenges facing hospitals and healthcare systems today and how Meduit is helping customers navigate the changing industry landscape.

**Q: What attracted you to this role at Meduit?**

A: I knew I wanted a role at a company with a positive culture and a strong focus on the customer experience. When I met the Meduit leadership team, we talked about what the company is doing well for customers today and identifying ways to make it even

better and more process-driven. I'm very much a fixer, so I felt like what they were looking for was what I had spent most of my career doing in building relationships with hospitals, healthcare systems, and physicians.

**Q: Even though it's only been a few months, what's been the biggest surprise since you joined the Meduit team?**

A: I'd say the level of collaboration. I was invited to a meeting, and I got really excited because they said, "We just want you here so you can weigh in on how this is going to affect the customers," and I kind of had this "Wait, this is the greatest day ever" moment because that's the holy grail of collaboration. So, even at this early stage, I'm impacting areas of the company that haven't always thought about the customer experience before, which is cool.

**Q: It seems like being Meduit's Chief Customer Success Officer would require wearing multiple hats. What's a standard day like, if there is such a thing?**

A: Every day seems like a new adventure into learning more, but also balancing that with putting in new processes and infrastructure. In my first month, I met with everyone I could to understand our products and services, our ideal customers,

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our customer sentiment, and what our processes look like. From there, I've created strategic initiatives to measure our progress against moving forward. I tend to dive into things, so if you ask me a year from now, I'm guessing my day-to-day will look much different than it does today.

**Q: What are some common industry obstacles that Meduit's clients face, and how does Meduit help address them?**

A: There are so many more roadblocks and reimbursement challenges that payers put in front of health systems today. Our customers are struggling to find staff to do those hourly tasks, and they need to accelerate cash. They are looking for ways to reduce costs, automate processes, and then drive cash more quickly and efficiently, because they're trying to balance their P&L.

Meduit has an amazing front-line staff that works really hard to collect revenue for our customers in a way that patients feel good about. Medical debt is a hard conversation, and we consistently get feedback from our customers that their patients like the way our front-line employees interact with them. We overlay this really good staff with integrated technology and AI tools to help automate processes. So, I'd say we bring a combination of staffing, expertise and technology to help drive our customers' revenue cycles.

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**Our managers understand their customers' needs and pain points,**  
and our customers know that we are here to support them.

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**Q: Meduit already relies heavily on data and analytics; how do you see that manifesting in the future?**

A: I'm big on data and reporting, so I think having the infrastructure in place to track customer data – not just on their side with claims and collections but also on our side in terms of how often we're meeting with them and what their escalations look like, among other things – is critical. When you add a concerted effort to gather insights from our spectrum of customers, you have the qualitative and quantitative data needed to decide what more we can do as a company to drive change.

**Q: How would you describe Meduit's approach to building and maintaining successful client relationships?**

A: I think it starts with sitting down and really working with a customer to figure out "Why are we here?" "What need are we trying to address?" and then making sure that what we're doing for them is delivering on that need. But it doesn't stop with solution delivery; it's also about looking outside and giving them industry

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knowledge and insight, so we turn into a subject-matter expert for them as well.

**Q: Meduit received a Net Promoter score of 62. Net Promoter is the gold standard customer experience metric, and Meduit's score is higher than Apple's, Google's, and Chick-fil-A's. What do you attribute it to?**

A: I attribute it to two things. First, from a relationship management level, we have really strong, long-tenured relationships. Our managers understand their customers' needs and pain points, and our customers know that we are here to support them. They are very loyal to us because of the relationship manager. Second, we have this patient-facing team that, from all the data I've seen, go above and beyond for patient satisfaction. At the end of the day, if our customers are entrusting us to act as ambassadors for their patients' experience, we have a responsibility to deliver.

**Q: How do you anticipate Meduit's customer success practices evolving?**

A: I think it's continuing to push past being just good relationship managers so that even as we meet customer needs, we're giving them added-value insight to go with it. If a customer has a 64% denial rate from Blue Cross, why? What are the categories? What are the things they can do to improve? What are the things that we can do to impact those denials? So, it goes beyond just having a task and completing it. The next step is looking at customer data, trying to drive insights, and then bringing external information to that customer as they think about their 18–24-month plan. At the end of the day, we're here to help health care systems and hospitals drive revenue, and there are different ways that we can do that.

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*Stephanie Higdon is a data-driven leader with nearly two decades of healthcare experience and extensive expertise in cultivating and managing relationships with hospitals, physicians, and healthcare systems. In her spare time, you can usually find her at a local ballpark or gym, watching the younger of her two daughters play softball or volleyball. Otherwise, she's likely out on the lake, reading fiction or tending to Tate, her Miniature Schnauzer.*

## We Want To Know What You Think

Have comments or questions regarding an article in this issue or a topic you'd like our editorial team to consider for an upcoming issue? Send us your thoughts at: [contactus@meduitrcm.com](mailto:contactus@meduitrcm.com).

And be sure to like and follow us on social media





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# Staffing Shortfalls and Solutions



Hospitals and health systems face unprecedented RCM challenges as they try to optimize patient care while maintaining financial stability. The primary issue is that there's more revenue cycle work than ever before and not enough skilled RCM workers available to do it.

The healthcare RCM labor market has remained flat since COVID-19, and competition is fierce for existing workers, both within healthcare and from other industries where wage inflation has made salaries more competitive. The lack of RCM labor is putting hospitals in a financial bind as they fight shorthanded to keep up with overflowing revenue cycle demands.

*Of course, the emergence of AI and automated processes is helping to compensate for the lack of RCM workers. AI can automate repetitive tasks or tasks that don't require critical thinking and execute them exponentially faster, leaving more complex issues to experienced RCM employees.*

The flip side is that payers use AI to make successful insurance claim outcomes harder. Before AI, payers had a limited capacity to look at all the claims filed and often just automatically paid claims under a specific value. Now, with AI, payers can look at every single claim to find causes for denial. As a result, claim denials have risen 20% over the last five years (1) – with no repercussions. The worst case for payers that incorrectly deny a claim is that they'll eventually have to pay, but in the meantime, they can hold on to more cash. The scenario is much more severe for providers who are denied the critical revenue they need to improve care and services and must also spend more on trying to get reimbursed. It's a double-whammy for hospitals and health systems that, if not appropriately staffed from an RCM perspective, will likely never see most of their denials overturned.

## Maintaining the Status Quo Won't Work

Today's RCM landscape is as perilous as it's ever been for healthcare organizations. More work, fewer experienced workers, and payers employing AI to muddy the claims process are all significant obstacles to overcome. Adding more employees isn't a viable avenue. Even if it was, adding people without technology doesn't help overcome the AI being deployed by payers to subvert claims.

It's time for hospitals, healthcare systems, and physician practices to adapt and adopt a multi-pronged solution that combines tiered personnel with AI and automation to achieve RCM success.

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## Staffing Shortfalls and Solutions

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### Finding a (Combined) Solution

Today’s RCM challenges require healthcare organizations to deploy a combined solution that addresses obstacles from multiple fronts. The three key elements of an effective RCM model include the following:



#### 1. Artificial Intelligence and Automation

Implement advanced technology, analytics, and automation to perform simple, repetitive tasks that don’t require critical decision-making skills



#### 2. Trained Customer Representatives

A small, dedicated staff to handle the lower-level tasks that fall outside AI’s capabilities



#### 3. Experienced Staff w/RCM Expertise

Industry-savvy employees who handle complex tasks that require high-end critical thinking and expertise

For hospitals and healthcare systems, it’s not about doing one of these things, but about creating a model that successfully incorporates all three. Larger organizations might try to build their own models in-house, but it’s costly and complex and detracts from their core mission of delivering exceptional patient care.

A more viable and immediate avenue is collaborating with a proven RCM partner with a platform already in place. Joining forces with an RCM partner allows healthcare organizations to focus on allocating revenue instead of how to collect it, which is a much more natural fit.

***Meduit’s tech-powered RCM solution seamlessly balances RCM expertise, AI, and automation to accelerate cash flow, minimize claim denials, and provide a more gratifying and productive patient experience.***

Our solution lessens the impact of the RCM labor shortage while still addressing the most pressing RCM issues facing healthcare organizations today, including the following:



**1. Collecting Owed Revenue** – Our solution employs predictive analytics to target accounts that are most likely to pay, which significantly increases the odds of collection.

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**2. Reducing Claim Denials** – Providers **MUST** utilize the same AI capabilities that payers use to increase denial rates. Meduit’s solution uses AI to preemptively identify claims that could be denied so they can be fixed ahead of the review process.



**3. Enhancing the Patient Experience** – Our solution combines self-service automation tools and compassionate customer specialists to give patients the freedom to create their own payment journey.



**4. Back-office Staff** – This is an area hit hard by the industry’s staffing shortage, and our solution provides the necessary support so providers can optimize their existing staff.

**Meduit’s three-dimensional RCM solution empowers healthcare organizations to achieve revenue cycle success.** By leveraging the strengths of AI, industry expertise, and tiered staffing, hospitals and health systems can minimize their exposure to workforce challenges, fortify their end-to-end RCM systems and processes, level the technology playing field against payers, and future-proof their revenue cycle for whatever industry challenges await.

<sup>1</sup> Claims Denials: A Step-by-Step Approach to Resolution (ahima.org)



### Key Meduit **RCM Factoid**

**Meduit’s Net Promoter score (62),** which measures customer satisfaction, was higher than Google’s and Apple’s!

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