

CASE STUDY:

Little Rock Diagnostic Clinic

Large multi-specialty practice and ASC offers broad spectrum of healthcare services with **high volume of complex and diverse claims**

CHALLENGE

- Multi-specialty clinic and ambulatory surgery center with approximately 50 providers manages high volume of diverse claims including UB-04, 1500 and ASC X23 837, with separate teams handling claims for each side of the organization.

SOLUTION

- Waystar, unifies and simplifies the revenue cycle, increasing cash flow via visibility into claims status, work queues for denials and rejections and easy online editing.

RESULTS

- Staff's ability to track claims online and instantly know when they needed to take action—especially with high-dollar UB-04 claims—has increased revenue and accelerated cash flow by approximately 3%.

The challenge

Find a solution to meet both the physician practice and ASC revenue cycle needs

With a goal to provide the best of modern medical care at a reasonable cost, Little Rock Diagnostic Clinic's (LRDC) many specialties include endocrinology, rheumatology, internal medicine, neurology, gastroenterology and pulmonary care. The clinic also offers multiple therapies and radiology; in addition, it has an ambulatory surgery center (ASC), giving patients a one-stop option for many healthcare needs.

LRDC's diverse portfolio of healthcare services creates a particularly challenging environment for claims management. Because it encompasses both a physician practice and an ASC, it has two billing management teams to meet the different revenue cycle technology needs for each side of the clinic.

Tina Elliott, EPM specialist at LRDC, co-manages the business office and notes the challenges inherent in keeping two different sets of claims straight while managing a large volume across many specialties. "We submit hundreds of claims each week that require careful review and editing. Many are high-dollar claims, so we need to stay on top of their status and take care of denials and rejections as fast as we can."

Elliott explains claims such as UB-04s are especially complex but generate significant revenue; therefore, they require close monitoring and fast editing. "Otherwise, our cash flow suffers," she adds.

"Waystar's biggest selling point was the fact we could look at claims in real time, view their status and immediately know if we needed to take any action. We knew this capability would be the key to accelerating the claims process and our cash flow."

Tina Elliott, Specialist at Little Rock Diagnostic Clinic

CASE STUDY: LITTLE ROCK DIAGNOSTIC CLINIC

Waystar solutions

Out with the paper, in with innovative, automated technology

While LRDC offered the most advanced technology for care delivery in its ASC and physician practice, its revenue cycle management wasn't nearly as high-tech.

"Before implementing Navicare's solutions, our processes were completely paper-based. The team billed UB-04 claims on paper, which created challenges due to the claims' complexity," Elliott says. "Staff couldn't view claim status electronically and make necessary edits online. The two teams worked hard, but the manual processes were inefficient. We needed tools to streamline and automate claims management."

After Elliott joined LRDC, the team implemented an electronic health record (EHR) and began submitting claims electronically. This initiative somewhat improved LRDC's claims management; however, the team still had to make do with a slow, manual editing process. They also lacked much needed visibility into the status of the claims.

LRDC leadership decided it was time to overhaul claims management and implement advanced revenue cycle technology. They began exploring solutions that would improve every step of the claims management process, from submission to denials, rejections and appeals. Elliott admits she "fell in love with Waystar" due to its many options such as reports and automated work lists.

"These tools would make our jobs easier and get claims paid sooner. It was exciting because we didn't have these tools with our former clearinghouse."

Tina Elliott, Specialist at Little Rock Diagnostic Clinic

Impact

Empowering staff to be proactive and increase claims revenue

"Waystar has given our staff so much visibility into claims status. As a result, they can work quickly and be very proactive. That's the biggest difference I've seen. They're able to accelerate cash flow just by going into the system, checking status and making necessary edits," explains Elliott. "They don't have to wait 30, 60 or even 90 days to see if a claim is rejected; they can know and act immediately."

The claims teams also use Waystar's work lists, which automate assignments based on LRDC's customized parameters such as financial class and payer. "Each team member always knows which claims to work, which boosts their productivity." Elliott indicates that the claims teams are currently understaffed with four employees rather than six. "Even so, we're keeping up with claims volume," she says. "With Waystar, our four employees have been able to successfully do the work of six."

Prior to Waystar, LRDC leadership was concerned about sluggish cash flow, but Elliott says they've made great strides in this area.

"Waystar has had a huge impact on our revenue because our staff is empowered to act right away when they see a denial or rejection. We've become more efficient and productive, which translates into greater financial health for our organization as a whole."

Tina Elliott, Specialist at Little Rock Diagnostic Clinic

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ABOUT WAYSTAR

Waystar simplifies and unifies the healthcare revenue cycle with innovative, cloud-based technology. Together, our technology, data and client support streamline workflows and improve financials for our clients, so they can focus on their patients.