

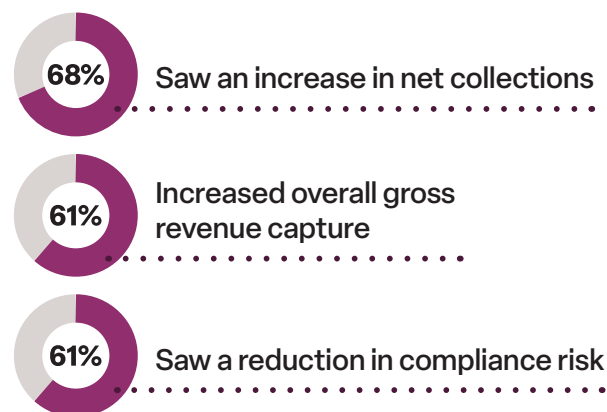
# REVENUE INTEGRITY

Getting paid for everything you do – and keeping it

Revenue Integrity is a holistic approach that breaks down silos and leverages the combined expertise of both revenue cycle and billing compliance professionals to manage financial risks and create a stronger, more resilient organization.

- *An Unexpected Marriage: Tying the Knot Between Compliance and Revenue Cycle to Ensure Revenue Integrity*

## ROI Financial improvements for organizations with Revenue Integrity programs<sup>1</sup>



<sup>1</sup>The Future of the Revenue Cycle, HFMA Magazine, June 2017

## Revenue Integrity GOALS

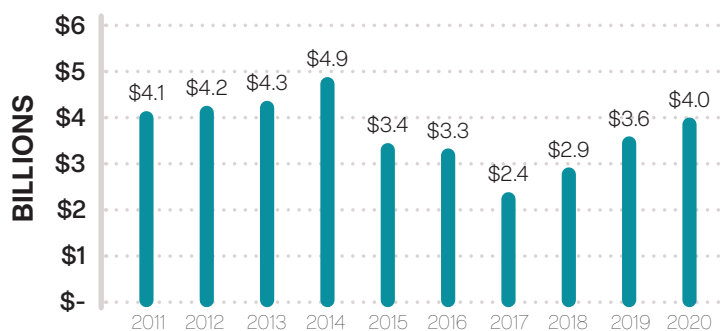
- Identify **revenue “leakage”**
- Identify “at risk” providers
- Ensure **maximum reimbursement**
- Implement **root cause corrective action**
- Increase first pass pay rate (FPPR)
- Decrease **days in accounts receivable (DAR)**
- Decrease discharged not final billed (DNFB)
- **Mitigate risk**, decrease regulatory exposure

## \$37 Billion Recovered

Over the past decade, HHS and the OIG have recovered nearly \$37 billion from individuals and companies who either attempted to defraud federal health programs or sought payments to which they weren’t entitled. A robust Revenue Integrity program can help mitigate overpayment risks.

<sup>2</sup>OIG Press Releases, 2011 to 2021

COST OF HHS & OIG RECOVERIES 2011-2020<sup>2</sup>



To learn how MDaudit Enterprise can support your revenue integrity efforts, visit [www.mdaudit.com](http://www.mdaudit.com)



## Revenue Integrity **DRIVERS**

- Ongoing pressure to **reduce costs**
- **Greater** individual patient **payment** responsibility
- Transition to more complex reimbursement models
- Intensified private and **governmental oversight**
- **Increased risk** of penalties and overpayment reimbursements

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## Reimbursement paybacks **IN THE NEWS**

“OIG tags New York hospital for erroneous billing”<sup>5</sup>

“HCA-owned hospital told to pay \$23M in Medicare over payments”<sup>6</sup>

“OIG audit finds Virtua Our Lady of Lourdes Hospital received \$4.8 million in over payments”<sup>7</sup>

<sup>5</sup> Becker's Hospital Review, June 28th, 2021

<sup>6</sup> Modern Healthcare, April 02, 2021

<sup>7</sup> CDI Strategies – Volume 15, Issue 19, May 13, 2021

## GROWING Industry Focus

The market for revenue integrity solutions is projected to grow by more than 40% between 2020 and 2025 as healthcare organizations seek to improve cash flow and address potential staff shortages.<sup>3</sup>

<sup>3</sup> Revenue Integrity in Healthcare: Solutions Driving Payment Performance, Chilkam Research, August 2020

## BENEFITS

Real-world feedback on the benefits of revenue integrity:<sup>8</sup>

- “Reduced days in AR, successful audits, and increased cash.”
- “Enormous ROI from overturned denials, charge capture, and education of hospital staff.”
- “Increased compliance and increased net revenue.”

<sup>8</sup> 2018 State of the Revenue Integrity Industry, National Association of Healthcare Revenue Integrity (NAHRI)

## MDaudit Enterprise: A COMPLETE REVENUE INTEGRITY SOLUTION

By providing full transparency for your 835s and 837s, MDaudit enables you to efficiently detect anomalies, minimize documentation and coding errors, and apply corrective action, thereby allowing you to retain more of your revenue.

Hayes has **25 years** of experience partnering with leaders in healthcare compliance and revenue integrity.

MDaudit contains **133 million** patient visit claims in our peer benchmark data repository, and growing daily.