### HPS|2024

HIGH-PERFORMANCE SUMMIT

# CONFERENCE AGENDA

AT-A-GLANCE\*

#### Patient Access

#### Registration QA: A key factor in preventing denials

Is a 100 percent RQA score even attainable? It is if you are LMH Health. Discover how collaboration and commitment consistently keep them at 99%+.

Speaker: LMH Health

#### Winning big with a flawless patient estimator rollout

Integrating new solutions can take time, resources and patience. But they don't have to be intrusive. Find out how Self Regional Healthcare on-boarded Patient Estimator for big wins in point-of-service collections.

**Speaker: Self Regional Healthcare** 

### Maximize patient retention by improving access to patient scheduling

What's the No. 1 peeve of patients, according to Experian Health's annual State of Patient Access survey? Not being able to see a practitioner quickly. A big contributor to that frustration is the scheduling mess many providers fight through every day. IU Health embraced online scheduling and it's been a game changer, making patients happier and more loyal.

Speaker: IU Health

### Supercharge your plan selection and eligibility accuracy

Plan selection and eligibility accuracy don't have to be trench work. Leveraging the right combination of data and tools can put you on the fast track to Patient Access success.

Speaker: McDonough Health

#### You want loyal patients? Give them estimates.

Pick a patient satisfaction survey, any survey. One of the main reasons for disatisfaction is always "did not get cost estimate." It's also a consistent reason patients switch providers. The good news? It's a totally fixable problem. Join us to learn how Amberwell Health turned it around in one year with Experian Health's Patient Estimates.

**Speaker: Amberwell Health** 

#### The many benefits of automated NOA

Learn how Virtua Health automated NOA, added payers and increased cash flow - while reducing denials and eliminating manual work. Virtua was even able to provide its team a "work from home" option.

Speaker: Virtua Health

#### Success is a journey, not a destination

Discover how a collaborative rev cycle team's journey with Registration QA helped an Indiana-based system achieve benchmark-breaking registration accuracy while also driving down denial risk. That's a big deal to a locallyowned, not-for-profit system, where community support and satisfaction are super-high priorities.

**Speaker: Beacon Health System** 

### Learn a new magic trick: make more authorizations appear

Join Amy Grissett, Senior Director of Physician Practices Revenue Cycle at University of South Alabama, as she reveals a top hat full of behind-the-curtain secrets for doing more with less using Prior Authorization. Budding magicians will learn how to add more services, enhance workflows, track productivity and distribute work evenly. Voila!

Speaker: USA Health University Hospital

### Add speed, accuracy and efficiency to your financial assistance process

eCareNEXT and Experian data are a powerful combination when determining financial assistance need and eligibility. Hear how Baptist Health prioritizes and presumptively approves patients for financial assistance.

**Speaker: Baptist Health** 



# Patient Financial Services

#### Claims Management

#### Denial prevention in action: how UC San Diego Health leverages Al automation to reverse denial trends

Investing in a strong denial strategy has helped UC San Diego Health buck current claim denial trends. That's where AI Advantage™ steps in, and its part of the reason the West Coast system has been one of the top-ranked in 10 medical and surgical specialties, according to U.S. News and World Report. Hear from Chief Revenue Cycle Officer Miguel "Mike" Vigo IV and his team have embraced the solution, how it has impacted cashflow, and what's next for this innovative health system.

Speaker: University of San Diego Health

#### Using payer status codes to reduce A/R days

Tired of throwing FTEs at the denial problem? Payer status codes changing daily? Learn how automation and obtaining proprietary status codes can beat payers at their own game and take pressure off the team, giving them time to work on other important things.

Speaker: St. Luke's Health System

### The need for speed; accelerate your denial appeals process.

How much could a 2-4 week head start change the game for your denials and underpayments appeals process? You heard that right. Discover how automation with Enhanced Claim Status and Contract Manager can turbo charge appeals.

Speaker: Mt. Sinai Hospital

#### Collections

#### Three key focus areas to boost your self-pay collections

Learn how the teams at Cone Health and Novant Health have improved their self-pay collections by embracing three key elements in their revenue cycle strategy – automation and segmentation, enhancements as a result of automation, and selecting the right partner to bring it all together.

Panel of speakers: Cone Health and Novant Health

### Stop guessing. Know exactly how your collections agency is performing.

Optimize collections agency results in self pay management by developing a scorecard and automating performance monitoring. Insight is the first step to improvement.

Speaker: Yale New Haven Health

#### Data + Analytics: an RCM leader's 1-2 punch in battling collections

The RCM team at Cornell understands the impact outstanding balances have on their patients – and their system. Learn how they use segmentation to develop a cohesive collection strategy, along with how the system prioritizes account balances based on patient needs.

**Speaker: Weill Medical College of Cornell University** 

#### Contract Management

#### The money report: data leads to revenue

Contract Manager is a powerful solution. Contract Manager Advanced Reports takes that power to another level, improving workflows based on the data and then optimizing revenue based on those workflows. Boston Children's Hospital has it figured out, so come learn from someone who's done it.

**Speaker: Boston Children's Hospital** 

### The secret sauce for negotiating successful payer contracts

Mount Sinai's Brian Skelley is a payer contract maestro, having orchestrated the NYC-based system's payer negotiations for over half a decade. In this can't miss session, Skelley takes the audience through how to develop a payer-focused negotiating skill set, leverage key data and payer policies to identify risk and revenue potential, and protect your revenue using Contract Analysis.

Speaker: Mt. Sinai Hospital

## Harness the power! Use Power Reports to leverage data and identify the trends contributing to clean claims

Analyze edits to improve clean claim rate and reduce denials. Learn how to use the Power Reporting dashboard to drill down and find the root causes of denials.

Speaker: Rady's Children's Hospital



# Operational Excellence

#### Power Reporting: better business decisions based on better information

You've made some changes that seem to be moving the needle in the right direction. Congratulations! But how do you know it wasn't a lucky outcome? Better yet, how can you consistently make the right decisions that improve performance and productivity? It's in the data. Learn how Power Reporting takes the mystery out of consistently improving business processes.

**Speaker: Jefferson Health** 

#### How 3 patient-centric systems are lowering denial rates through analytics and education

What do Northern Light Health, Wooster Community
Hospital and TriState Health all have in common? If you
guessed that all three are incredibly dedicated to
improving the health and lives of their patients, you'd be
only partially right. More importantly, they've all
successfully used Power Reporting to reduce denial rates,
in combination with extensive staff rev cycle education
programs. Hear their stories and shared successes.

Panel of speakers: Wooster Community Hospital, Northern Light Health, Tri-State Memorial Health

### It's all about what you know: using data to increase reimbursements

Learn how to identify employer sponsored funding sources via visibility into key payer, employer sponsor and patient population and utilization trends. Get empowered, gain efficiencies and increase reimbursements now!

**Speaker: Experian Health** 

### Tap in - Health Data Portability and Patient Experience reimagined

One-time enrollment with data accuracy? Yes. See how our plug-and-play solution turns your existing Experian Health products into additional ROI, reducing manual workload for both staff and patients.

Speaker: Experian Health

