Cardiologist





Client Profile:

Cardiology Practice in Texas that has around 5,000 patient visits

Major Specialty	Cardiology
Service Offering	Credentialing, Insurance verification
	Coding, Charge, Payment posting & AR
Practice Management Software	E-Clinical Works



Client Challenges:

This client was not happy with their collection process as they knew they were making lesser than what they need to collect, however needed assistance in understanding where they lag and professional guidance how to increase their collections

Ecare took over the billing processes for this Client in July 2021 and with consistent effort was able to collect 38% more in revenue within a span of one month!



Ecare's Strategic Planning and Resolutions

- On doing a complete review and analysis of their denials and claims processing workflow, Ecare was able to identify a Major Process issue on Charge Scrubbing Scope. We identified that Procedure codes were missed and ICD-10 Linking was not done correctly by their previous Billing partner, which indirectly created Cash Flow issue and Medical Necessity denials and decreased collections to the practice. In order to address the Charge Scrubbing issue for the client, e-care decided to involve itsmost experienced Cardiology coding team to review the Medical Records and confirm the Procedure codes and ICD-10 Linking for each Charge before completing the Charge Scrubbing Process in eCW Practice Management. Ecare deployed exclusively well experience team to work on EFT request
- **EFT/ERA Projects** for different states in the US. They utilized different platform like Availity, Change Healthcare, Echo health, Instamed, Payspan and Optum to have the EFT activation completed immediately and efficiently for the Practice and ensured the collection percentage is increased, also educated the client on with the they need be aware of to achieve the targeted results.

for this Client. Our team had very good exposure in completing

Major Denial on the Practice was for Authorization Issue. handling the Insurance Verification, Ecare provided necessary heads up

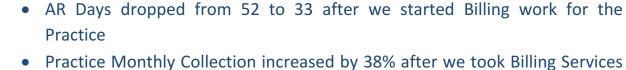
Exclusive Denial Management Team was framed to identify the Day to Day Issue and to do a trending on Denials to prevent repeated Denials

to the client to have authorization received for HMO patients. Practice was prompted to review our list and were able to get Prior Authorization for HMO Patient successfully. Thereby our team was able to prevent further Authorization Denials for the Practice. With consistent efforts from our team on this client over the last one year, we were able to bring down the AR aging claims to 33 days which was initially

Client's monthly Collections was averaging around \$ 47,000 when their previous Biller was working on the Account. Due to our consistent efforts and new process implementations, collections for their Practice has improved to \$ 65,000 in 2022

averaging at 52 days when their previous Biller was working on the Project

for the same volume of Patient Seen in the Practice.

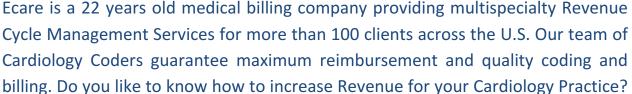


for the Practice

AR Days dropped from 52 to 33 after we started Billing work for the Practice

Benefits to the Client with Ecare's Medical Billing Solutions

- Client has a plan to add one additional Provider to the Group from next month as they are confident with e-care expertise
- **About Ecare**



e-care india

Cardiology Coders guarantee maximum reimbursement and quality coding and

company (ecareindia.com)

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