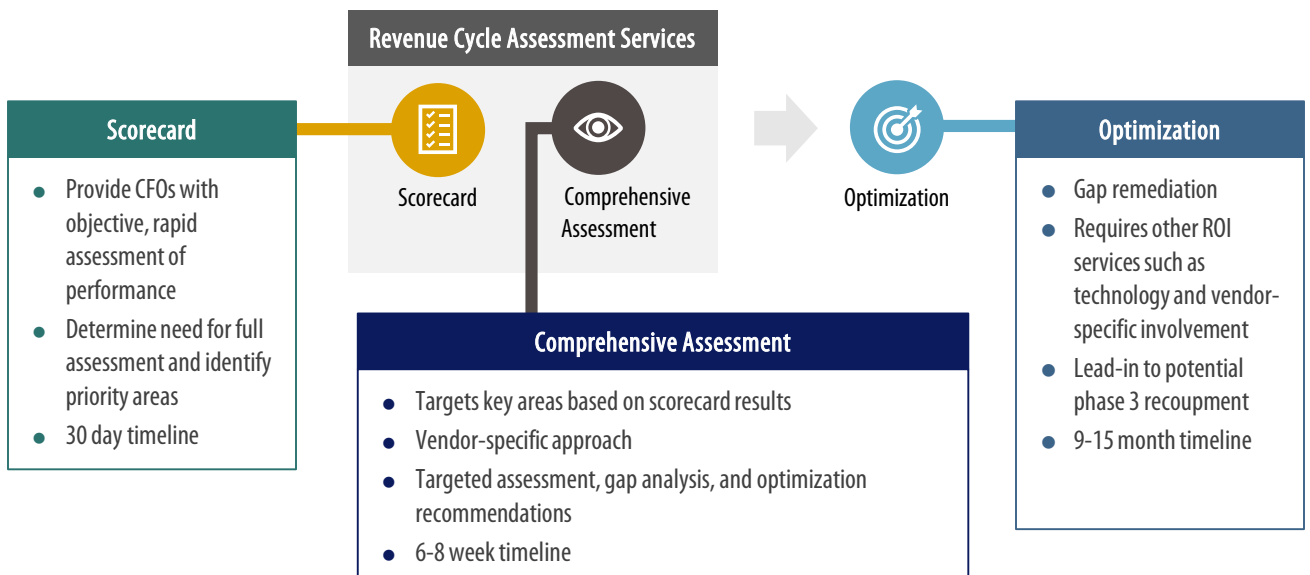


# Revenue Cycle IT Services

## Maximize the value of your technology investments

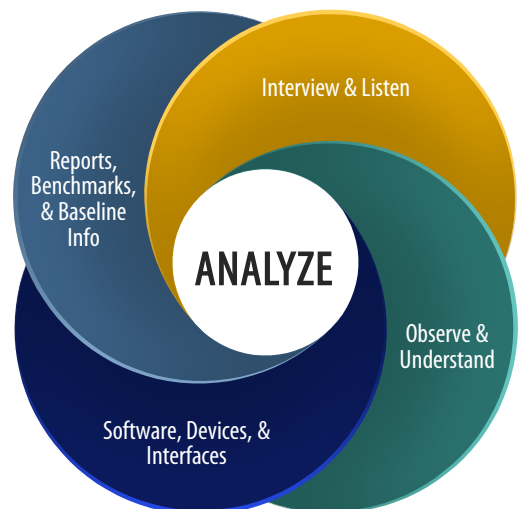
At ROI, we not only identify issues – we provide solutions. We work with you to ensure your **people, processes and technologies** are functioning in concert to maximize the value of your investment in your core systems, improving patient safety, patient satisfaction, and ultimately your bottom line.

### Revenue Cycle Assessment Capabilities



### Revenue Cycle Assessment Approach

- Addresses all key Revenue Cycle pillars
- Cost effective engagement to drive savings and efficiency
- Includes a quick technical system functionality evaluation
- Final deliverable: identification of non-optimized processes and areas, value proposition based on findings and recommendations



## About ROI

ROI Healthcare Solutions is healthcare's trusted IT Services Partner, founded in 1999. As a KLAS-awarded organization in two categories, we save clients time and money, creating clinical, operational, and financial excellence through EHR, Revenue Cycle, ERP, and RTLS initiatives.

ROI offers industry-centric project management, consulting, implementation, optimization, support, and staffing services. Our leadership is committed to delivering quality services with highly engaged team members to clients who appreciate long-term partnerships. We are recognized by both Inc 5000 as a fast-growing private company and Modern Healthcare as a Best Place to Work in Healthcare.

ROI supports 100+ applications, related to such vendors as: Cerner, Siemens, Allscripts, McKesson, Epic, Meditech, and Infor. We are Best in KLAS in Partial IT Outsourcing with a score of 95.7, Category Leader in Business Solutions Implementation, and a Cerner Preferred Collaborator.



## Revenue Cycle Objectives

1

Producing an **accurate, complete, and timely claim** to be reimbursed in the shortest timeframe

2

Getting it **right the first time**

3

Ensuring **patient safety, quality and financial governance**

## Benefits

- Enhanced Patient registration processes to ensure accurate data capture
- Improved insurance eligibility verification and validation
- Additional screening for medical necessity, with focus on appropriate ABN discussion, policies and procedures
- Improved patient safety
- Identify clinical documentation improvement opportunities
- Reduction in denials
- Appropriate coding that is supported by complete and appropriate documentation
- Reduced accounts receivable
- Increased cashflow and one-time cash acceleration
- Improved patient satisfaction
- Enhanced ability to report on data
- Established best practice KPI metrics to manage the business of healthcare
- Additional capital to invest in healthcare quality initiatives.
- Established adherence to regulatory compliance
- Bottom line improvement
- Improved employee satisfaction

