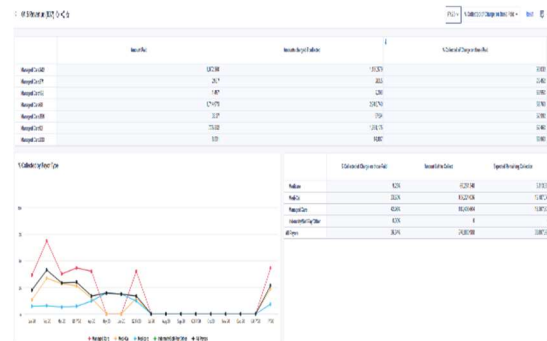
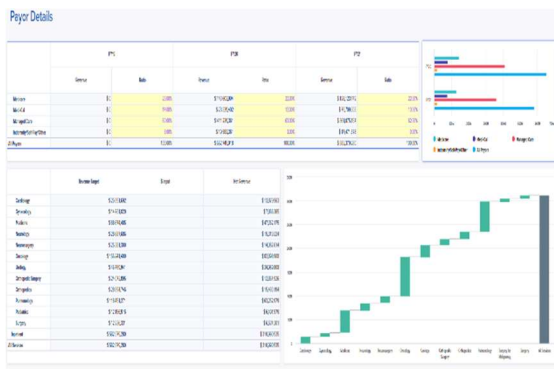


SOLUTION OVERVIEW

TURN INSIGHT INTO VALUE

IMPROVE PATIENT SATISFACTION AND IMPROVE YOUR REVENUE CYCLE MANAGEMENT

- Do you suspect patterns in denials which your Revenue team can improve processes at the authorization, payer, contract, or procedure level to increase reimbursements and reduce write-offs?
- Do you know the average days sales outstanding (DSO) by payer, practice, service line, or facility?
- Is your organization writing off uncollectible debt, which could be managed if you had visibility into authorization or payer contract details?
- Do you have billions of points of data but little information and no way to share it for collaboration with clinical and operations teams?
- Can you measure the cost and effectiveness of care outside the hospital (post-acute care, ambulatory care, and pharmacy)?



CRUCIAL TACTICAL QUICK WINS

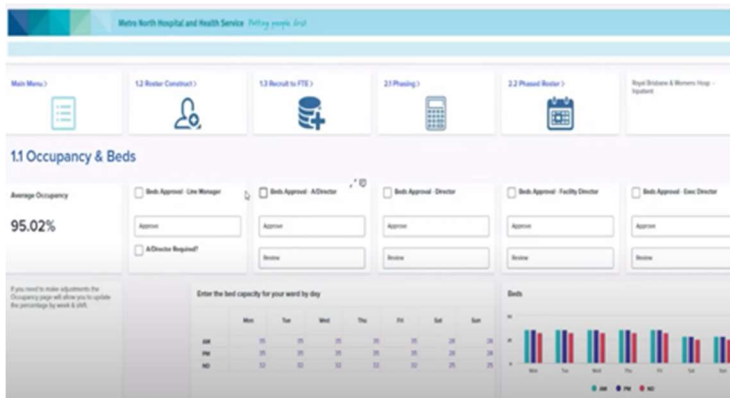
By providing visibility into key performance indicators (KPIs) and trends of accounts receivable (AR) aging and collections, problems can be identified early. If revenue teams are notified of unauthorized patient charges before discharge, they have an opportunity to collaborate with payers earlier in the process rather than adjudicating after denial.

Empower users to easily navigate this information and drill down into problem areas so they can work effectively with clinical areas, service providers, labs, and specialty pharmaceutical groups based upon role, function, and location. By consolidating and grouping problem claims, your teams can prioritize high dollar opportunities for negotiation, contract revisions, and improvement along the care cycle. Care coordinators can be included in the process and utilize this information to transition handovers to the next care site as needed. Not only will this increase patient satisfaction and help improve collections, but it will enhance the continuum of care to prevent readmission. In a value-based care scenario, health systems may benefit from bonuses awarded for improving population health.

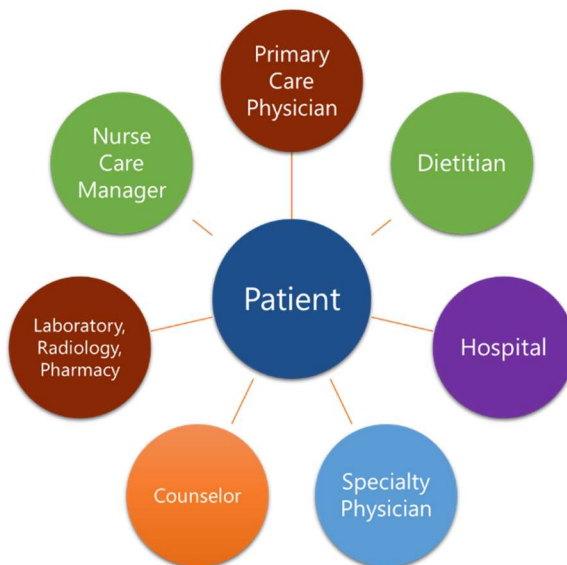
CONNECTED PLANNING IN ANAPLAN:

COLLABORATING TO DRIVE PERFORMANCE

Anaplan is a flexible, best-in-class cloud-based planning and performance management platform. Anaplan is used as a collaboration platform internally and externally by organizations large and small across the globe. Workflow and Process Management enables you to monitor, track and measure performance by user, location and role. Alerts and email notifications can be enabled.



The Keyrus team empowers your team to achieve quick realizable wins today and to drive towards strategic goals for the future. We can help you put the patient back into the center.



KEY FUNCTIONALITY

- Measure AR days by facility and payer and track denials by payer
- Increase transparency to better manage patient financial outcomes
- Review profitability at any level of the organization, including resource, task, procedure, service, or facility
- Enable collaboration between departments and service lines
- User-friendly interactive dashboards to analyze, input, adjust, and model data
- Integrate clinical, operational, and financial data from existing sources (e.g., EHR, ERP, EPM) as a base for forecasting and modeling and to work towards improving accuracy
- Instantaneous what-if scenario modeling to facilitate data-driven decisions and comparative analysis

GET STARTED NOW

Contact us to learn more or receive a demo of this solution.

epm@keyrus.com