## **REVENUE CYCLE CASE STUDY** Caught off-guard with coding changes



#### MORE THAN OUTSOURCED BILLING

Wakefield is dedicated to ensuring healthcare providers feel empowered to make informed decisions and improve their operations by turning information into action. We drive the manual work and human error out of the revenue cycle process so we can focus on resolving the exceptions to your revenue cycle, and improving the overall financial health of your organization.



#### **CONTACT US**





### CUSTOMER PROFILE

A high volume multiple ASC Practice, with multiple physicians who completed cases at their various centers. They focused their physician relationships primarily with pain management providers and provided procedures that ranged from nerve blocks to spinal cord stimulators While they outsourced their billing and collections work to Wakefield they maintained all coding in-house and submitted cases to Wakefield after coding was complete.

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In 2021 a common procedure for their centers, which had been traditionally coded based on the number of branches that were destroyed, underwent a major overhaul that was subtle in nature. Although the code and much of the description remained the same, the manner in which the code could be used to identify the complexity of the procedure changed, making it less likely to see this code performed multiple times in one day. For years, their coder reported cases for this procedure with multiple codes, not knowing the rules had changed.

#### **HOW WE HELPED**

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Wakefield identified, using our exception based workflow system that focuses on the 'right touch right time' philosophy, a trend across multiple centers and payers where this procedure was rendered. Although Wakefield was not completing coding services for the client, our team engaged our coding experts who were quickly able to identify that the cases were being coded under expired coding guidelines. Our team met with the client we went over the new guidelines with their in-house coder and provided the documentation to clarify the intent of the codes moving forward. We learned during our conversations that the coder simply did not have the time or resources in her facility to stay up-to-date with the guidelines. The team quickly got to work correcting the claims that had been sent in error, and resubmitting them to their appropriate payers.

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Wakefield was able to identify, plan, and resolve a receivable issue quickly because we focus on the claims that needed our help!