

# Cross-Functional Communication to Improve Revenue Cycle Management

Angie Santiago, CRCS

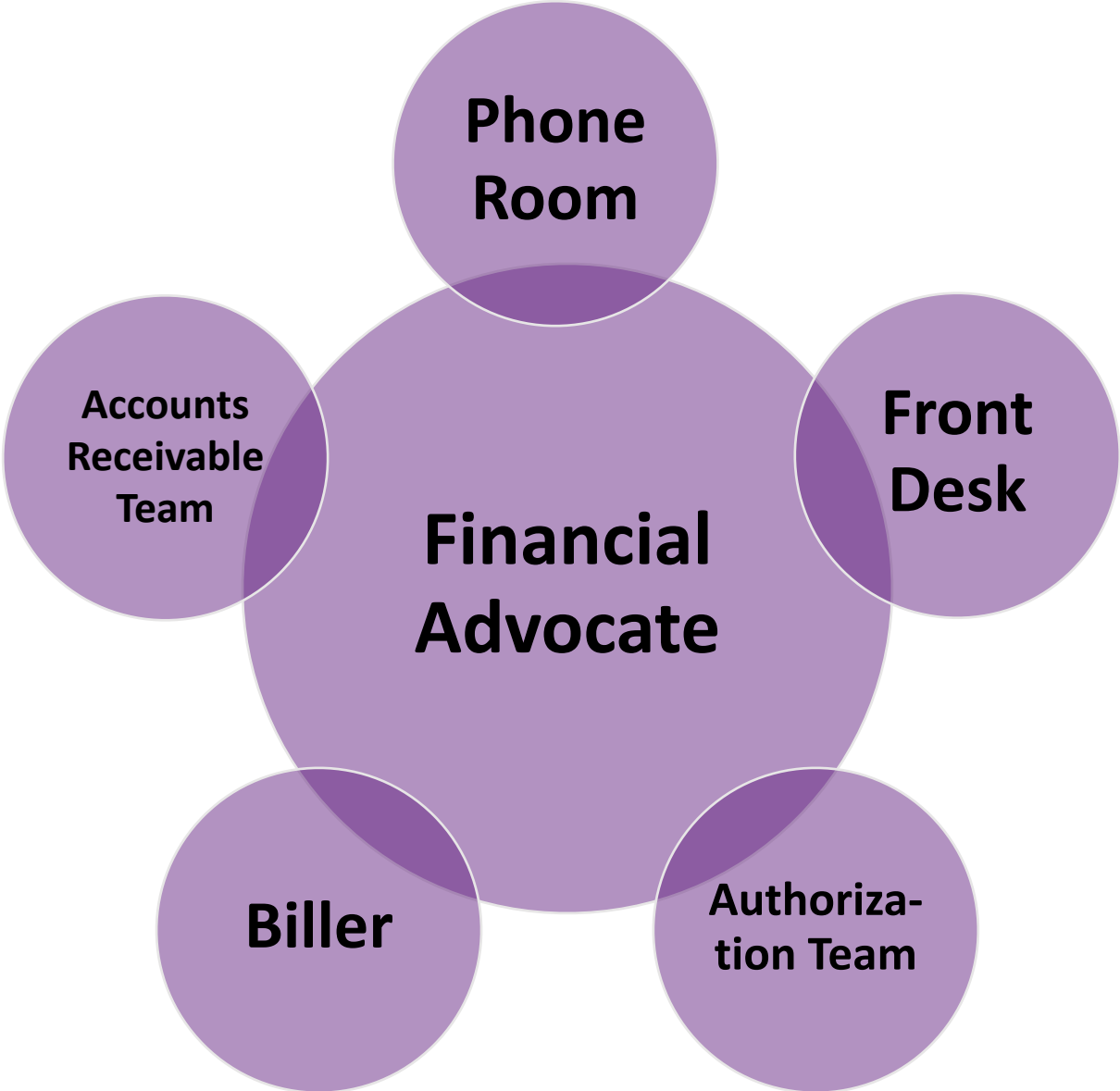
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# Agenda

- Review the revenue lifecycle, beginning at scheduling and ending with payers' payment(s).
- Build understanding of each step of the revenue-cycle process.

# Revenue Lifecycle



# Oops, We Scheduled Wrong

## Phone Room

- Patient with non-participating coverage scheduled

## Front Desk

- Checks patient in

## Care Team

- Office visit and plans treatment/next steps

## Authorization Team

- Identifies non-participating coverage

## Claim

- Denied office visit

## Financial Advocacy Team

- Burden of bad news

# Phone Room



- Insurance participating guide
- Scripts for non-participating coverage options
- Email/notification of new appointments

# Workflow: Non-Participating Coverage

## Phone Room

- Patient with non-participating coverage
- Script
- Referral to financial advocacy team

## Financial Advocacy Team

- Reviews options:
  - Identify participating facilities
  - Identify change of coverage options

# Oops, Established Patient with Change of Coverage

## Front Desk

- Checks patient in
- Updates new coverage
- Or inactive Coverage

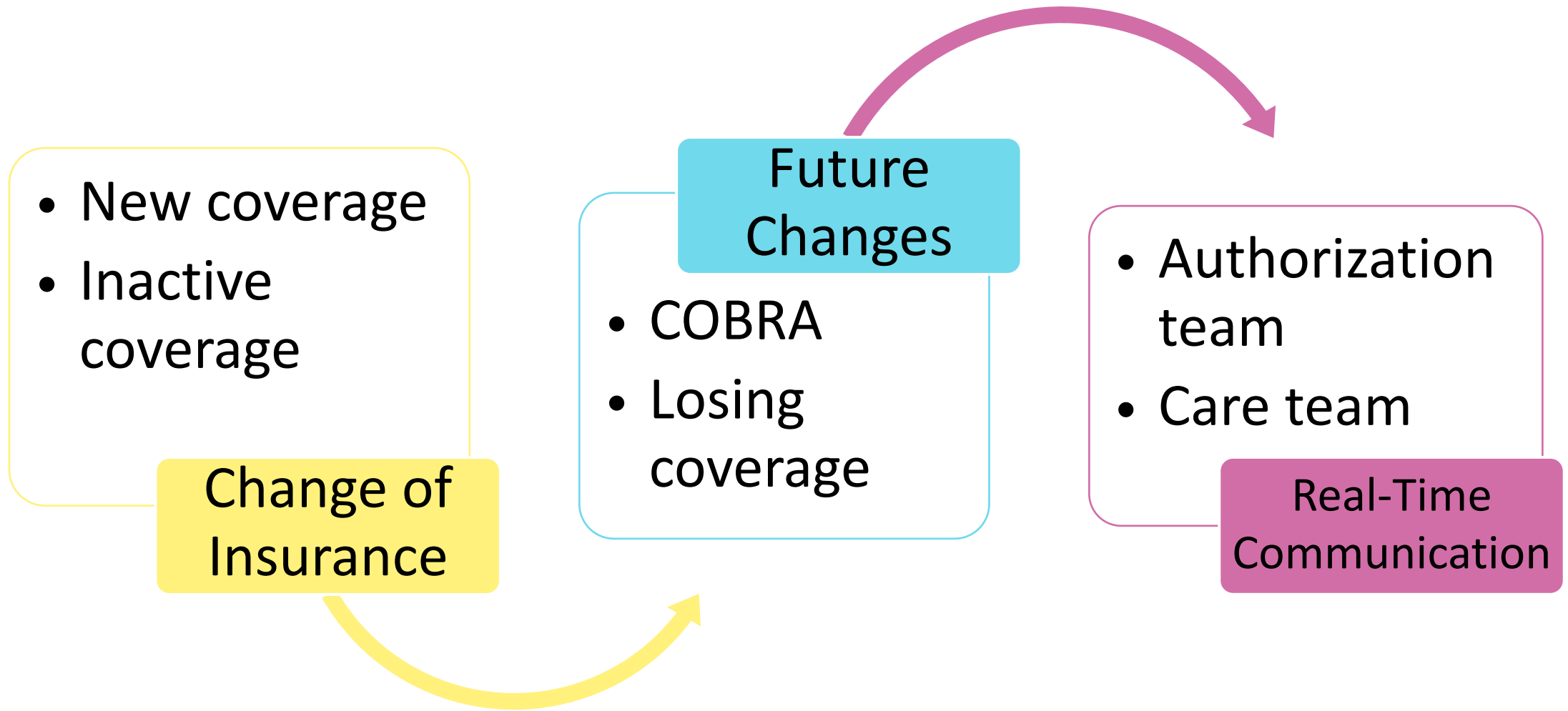
## Treatment

- Received

## Claim

- Infusion denied

# Front Desk





# Workflow: Change of Coverage

## Front Desk

- Checks patient in
- Updates new coverage or inactive coverage
- Notifies in real time

# Workflow: Change of Coverage

## Authorization Team: New Coverage

- Subject matter experts
  - Reviews new coverage
  - Preferred drug
- Immediate authorization request

# Workflow: Change of Coverage

**Financial  
Advocacy Team:  
Inactive Coverage**

- Promptly assess coverage options
  - COBRA
  - Medical assistance
  - Affordable Care Act (ACA) plan

**Care Team**

- Notified of potential treatment hold

# Tips for the Pharmacy/Care Team

- Communication:
  - Include financial advocacy/authorization teams on drug validation groups
    - New drugs
    - New regimens
- Department task force



# Authorization Team

**Medicaid  
Changes**

Fee-for-  
service to  
managed  
care

**Treatment**

- Preferred drug
- Mandated drugs
- Specialty
- Site of service

**Coding**

Documentation

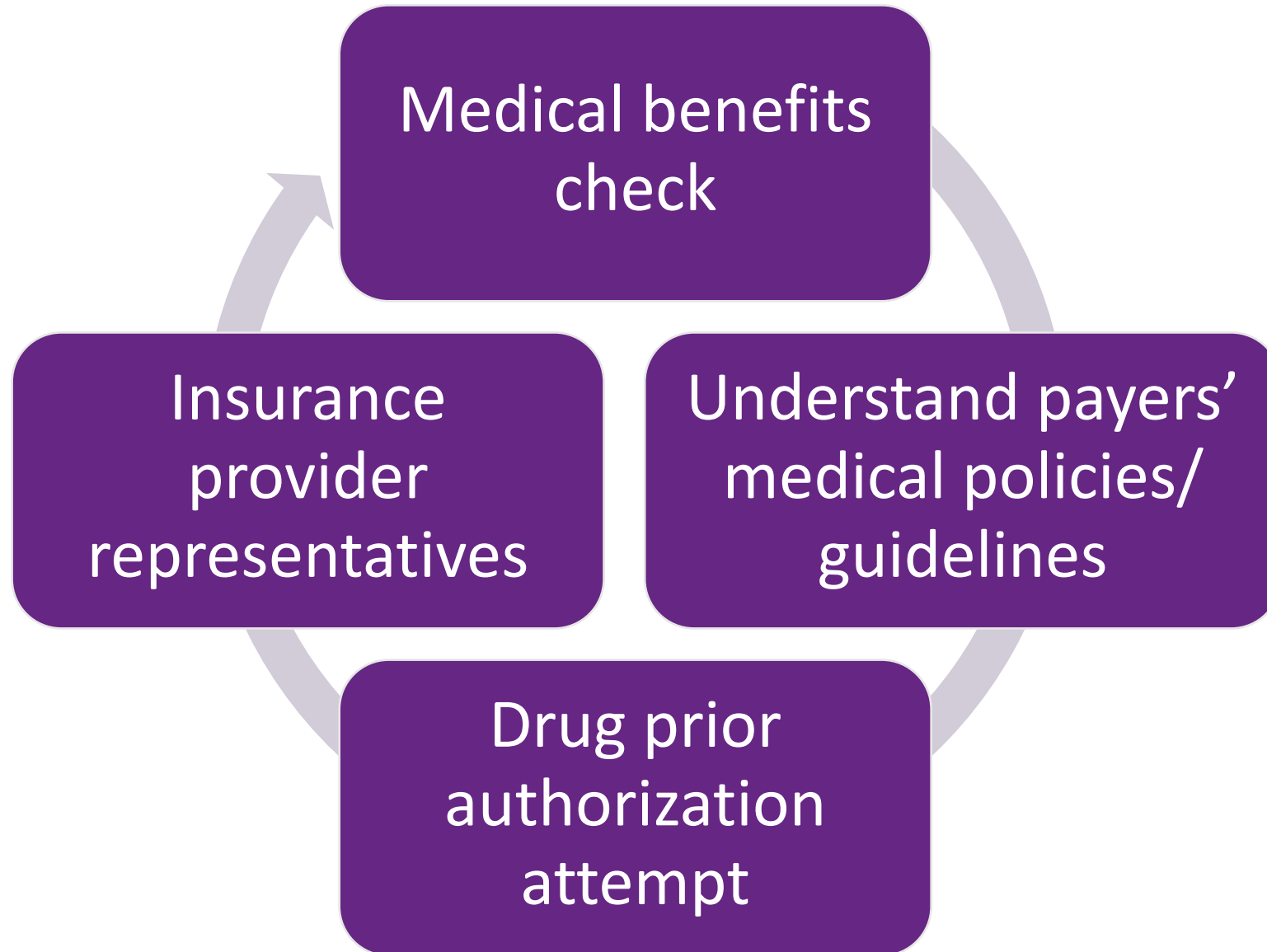
# Treatment

Preferred drug

Specialty drug

Site-of-service drug

# Tips for the Authorization Team



# Oops, We Billed Wrong

## Financial Advocate

Patient assistance program

Authorization denial/adjustment

## Incorrect Billing

340B pharmacy acquisition cost: \$275,088

Field reimbursement manager

## Accounts Receivable Meeting

Rebilled claims

## Paid Claims

Payments: \$411,000



# Biller

- Communication of new drugs
- J-9999 vs. C-9399
- Claim documentation
- Monthly meetings

# Accounts Receivable Team

System  
Adjustments

Bundled  
Payments

Denials

Review of  
Authorized  
Documentation

# System Adjustments/Bundled Payments

Contractual write-offs are those wherein the excess of the billed amount over the carrier's allowed amount is written off.

- System Adjustments
  - Request accounts receivable team to provide adjustments
- Bundled payments
  - Ensure revenue integrity has correct build

# Denials/Review of Authorized Documentation

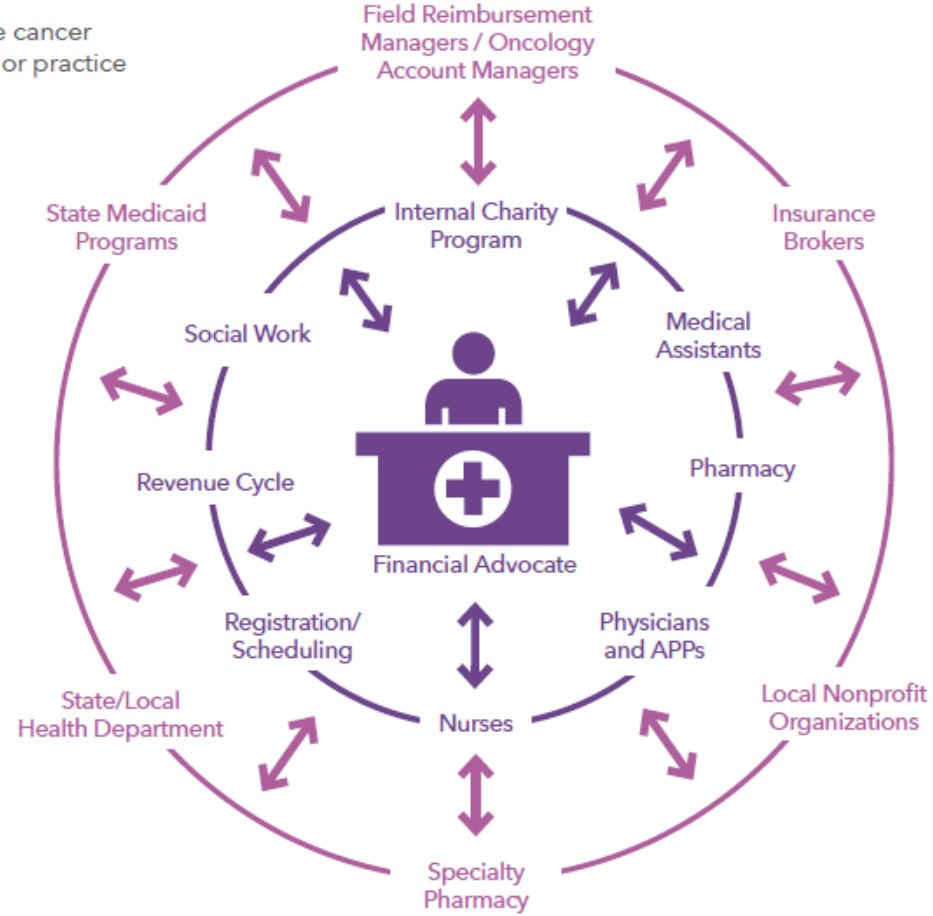
- Group effort
- Monthly reviews:
  - Identify trends
- Timely communication

# Denials/Review of Authorized Documentation

- Documentation:
  - Authorization attachment
  - “No authorization required” attachment
  - National Comprehensive Cancer Network Guidelines®
  - Reference number

**Figure 3. Who is Involved in Financial Advocacy?**

- Outside the cancer program or practice
- Inside the cancer program



# Questions?

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# References

1. Association of Community Cancer Centers, ACCC Financial Advocacy Network. Ready, set, go! Financial advocacy playbook. Published September 2021. Accessed April 27, 2022. <https://www.accc-cancer.org/home/learn/financial-advocacy/financial-advocacy-playbook>