

Two Providers Increase RVU, Allowed Amount and Lines of Service with INCISIVE™

In an industry that has been barraged with payer cutbacks, the questionable financial promises of EMR and the sheer complexity of clinical coding and billing, it is difficult to accept that a product can consistently increase top line revenue in spinal or neurological clinics by 10 – 30%. Nevertheless, it is true.

This study analyzes several major indicators of financial productivity before and after the use of INCISIVE. The indicators are as follows: Average RVU by Case, Average Allowed by Case and Average Lines of Service by Case. The providers studied consisted of two established eastern US spine surgeons practicing in the same clinic using very similar payer mixes.

For the study all PHI has been removed, and the providers will be referred to by their initials.

Significant Variables in the use of INCISIVE

Through direct experience with use-case results and detailed analysis of millions of lines of service in dozens of clinics using INCISIVE across the nation, CrossCurrent has determined that best practice is for Providers to use INCISIVE themselves. In other words, it is best when a surgeon plans and codes his or her own surgeries and for these coded surgeries to then be reviewed by a certified coder for compliance.

This practice often drastically increases the surgeon’s awareness of the impact of the operative notes, coding, contracts and surgical practices upon the clinic’s top-line revenue. It also drastically reduces the loss of billable data which inevitably occurs between the operating room and the billing office using the traditional methods. In other words, when a surgeon uses INCISIVE first hand, more procedures are billed, more procedures are billed more profitably and more procedures are compliant and thus paid according to contract. As this study shows, this practice adds significant revenue to the Clinic’s top line.

Summarized Results of INCISIVE Use

Doctor V followed best practice and planned and coded his own surgeries in INCISIVE. These surgeries were then reviewed by a certified coder for compliance. Doctor S only reviewed the planned and coded surgeries completed by his staff in INCISIVE.

Measure of Increase	Provider Planned and Coded	Staff Planed and Coded
Average RVU Per Case	43.6%	15.5%
Average Allowed Per Case	35.4%	8.7%
Average Service Lines Per Case	48.1%	5.3%

As can be seen, the results of using INCISIVE can be impressive. But the results of using INCISIVE according to best practice, is exceptional. Please see the attached detail data for more insight.

How does INCISIVE Increase Revenue?

INCISIVE is not magic. But the implementation of technology to allow the strategic transition of planning and coding to the same person who is performing the clinical services and producing the operative notes is revolutionary -and with the INCISIVE technology, extremely profitable and quick. CrossCurrent and its partners have determined that an average of one-third of a surgeon's billable value is lost due to forgotten or missed billable procedures, communication failure, inadequate operative notes and misunderstandings around the significance of surgical procedure on revenue. By enabling a surgeon to be quickly guided through the most compliant and profitable critical path to a coded surgery, CrossCurrent has brought all the critical claim-producing functions together in the surgeon. The result of this is greater charge capture, more compliant and profitable documentation, increased financial motivation, better coding and an end result of increased top line revenue.

Conclusion

For most clinic administrators, what has been said in the study is common knowledge. The loss of billable information is a given in all practices, but the economic impact of this loss is often greatly under-appreciated by administrators and clinicians. The path that a billable service travels from date of service then through operative notes, dictation, transcription, coding, billing, payment and disputing is a path marked with staff frustration and lost revenue.

Using technology new to this field, INCISIVE successfully enables a paradigm shift that allows the major revenue producing functions of planning, performing service, documentation, coding and integration of complex surgeries to be performed by the surgeon while only requiring a few extra minutes a day. In doing this, CrossCurrent has overcome a central and historically difficult barrier to increased revenue and uncovered a wealth of revenue enhancing opportunities.