CodeCorrect and athenahealth Team-up to Help Practices Get Paid Faster

Massachusetts-based athenahealth provides an array of easy-to-use Web-based tools and integrated practice management and billing services to group practices in 26 states. athenahealth’s solutions are so flexible that they support practices with a handful of physicians just as easily as practices of several hundred providers.

Challenge
According to athenahealth, the cost of processing flawed healthcare claims adds up to $20 billion annually. Moreover, the Medical Group Management Association estimates the average accounts receivable cycle for claims exceeds 70 days.

“In many cases, practices don’t have the needed information to create a clean claim on the first try,” states athenahealth Product Manager Andrea Nilsen. “athenahealth’s goal is to provide information as early as possible in the claim cycle so that the reimbursement time is short.”

Solution
athenahealth sought a tool to help scrub encounter information, increase compliance and maximize appropriate Medicare reimbursement. “We looked at other types of systems but found only search tools,” says Nilsen. “CodeCorrect is so compelling because we can embed its vast amount of available intelligence into our work flow.”

athenahealth paired with CodeCorrect to create CodeSource. This tool gives the physician or the billing manager information at the point of service to ensure they are creating a clean claim. CodeSource helps users reduce denials and rework by enabling seamless integration of the charge entry component with CodeCorrect’s code validation capabilities. There are two primary ways athenahealth customers use CodeSource. By clicking on a link from athenahealth’s main menu, the user seamlessly accesses CodeCorrect’s CodeCheck, CodeBase and KnowledgeBase resources. athenahealth has also embedded a magnifying glass icon into its claim edits screen.

“If someone enters invalid information, rather than being sent to the payer, the claim goes on ‘hold’ until someone fixes it. All the user has to do is click on the magnifying glass to view more information about the coding error. CodeSource is providing feedback on the validity of the claim at the time of entry, instead of waiting 30 days for the payer to tell you there’s a problem,” explains Nilsen.

Specialty groups find CodeSource especially compelling. It allows the reordering of Current Procedural Terminology (CPT®) codes on the claims based on highest RVU. Failing to enter those codes in the correct order means these groups would be missing the money appropriately due them. Thus, CodeSource directly adds a positive impact to the bottom line of these practices.

Results
“Users don’t have to buy coding books anymore,” says Nilsen. “That’s a direct savings right there. This tool makes searching easier and more efficient so that users can get more work done. It really increases efficiency and decreases cost.”

Arguably, the most important benefit is how quickly athenahealth customers are paid. The accounts receivables cycle is approximately 40 percent faster than the industry average. “There are many factors that create the rapid revenue cycle for athenahealth customers, and the CodeSource tool we’ve created with CodeCorrect definitely contributes to that level of success,” concludes Nilsen. “CodeCorrect is a critical piece of our value proposition because the information it provides speaks directly to our clean claim rate.”

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