



INSIGHTS FOR BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDERS

Industry, Billing, and Revenue Cycle Management Happenings for BH and SUD

Avoiding Denials for BH and SUD

Just accept that denied claims are part of doing business and move on. That statement is true if you **don't have access** to an **intelligent, rules engine-architected platform** for managing denials, preferably even **before they become** denials.

For **BH/SUD facilities and treatment centers** that provide any or **all levels of care**, ADS RCM makes handling denials **really simple, compressed down** to two points:



1. Our platform's **Denial Preventer®** is highly accurate in **warning about claims likely to be denied** by their payers for any number of reasons, helping to ensure they're submitted cleanly on the first attempt, avoiding those denials proactively.
2. Denials not detected by the Preventer are **edited and resubmitted within 72 business hours** by the ADS RCM team.

That's it. Our platform **detects denials in advance**, or we'll **edit and resubmit them within three business days**. Clients benefit by not being **inundated with denials** - which in BH and SUD can represent **tens and even hundreds of thousands of dollars in revenue** - and **incalculable staff hours and personnel** to deal with **new denials** mounting up **on top of existing ones**.

Additional ADS RCM **revenue capture** points:

- ✓ **Insurance Discovery** option accurately identifies coverage if it's partially or entirely missing.
- ✓ **Eligibility verifications** are performed up to **four times prior to arrivals**, and clients can do immediate verifications while scheduling appointments.
- ✓ Get **out-of-network alerts** on **scheduling appointments** or any time before arrival, helping you comply with the **No Surprises Act**.
- ✓ Access the **Patient Responsibility Estimator** on scheduling or any time in advance for keeping **patient A/R tightly managed**.
- ✓ We **track submitted claims in real-time** to ensure payers are processing them; with your on-demand data transparency you can also track claims to the extent you want.
- ✓ Our **portal and platform** support **online payments** from patient/client devices.

The urgency for BH and SUD facilities to be **paid cleanly** and with **maximized claims value** has never been greater. ADS RCM and our team support precisely that, and will help **alleviate your staffing issues** with our +300-person **outsourced workforce** of claims, billing, EDI, and workflow specialists.

Contact us or visit us at the **East Coast Symposium (NCAD), booth 308**, for more about ADS RCM and our MedicsRCM services.

Monitoring Outcomes: Everyone wants to know Treatment Results

It's true. "Everyone" means **other providers and organizations** who have a hand in the person's treatment including referring sources, those authorized to view the patient's status, and **payers** who want to know about success rates in helping to lower or even eliminate readmissions. Additionally, **governmental agencies** (federal, state, county, and local) often want to know about outcomes.

To provide **accurate outcomes reporting**, treatment centers and facilities would need a **comprehensive, specialty-specific clinical charting and reporting mechanism** unless they'd prefer to pool resources and work with an academic setting which is the generally less desired route to take.

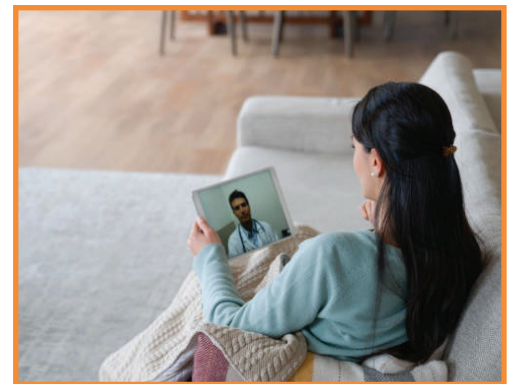
Assuming you'd mostly opt for the self-reliant premise as preferable without relying on an outside entity, you'd want the outcomes reporting mechanism as **part of your EHR**. You wouldn't want a **stand-alone utility** that requires **interfacing or manual entry**.

Presumably, the in-house EHR would be robust enough to **capture the person's treatment journey throughout all levels of care** and have **powerful, built-in clinical reporting functionality** without requiring expensive add-ons to accomplish the outcomes monitoring and measurements goal.

And then, the analytics should be **easily presentable** to whoever is requesting them. Of course, even if you didn't have to do any outside reporting, **you'll want to compile these types of analytics and dashboards yourself** to monitor your outcomes results.

The **MedicsCloud EHR** is ideal for BH/SUD and has **wide-ranging outcomes management and reporting built-in**, exactly for the reasons described above. It's available almost always at no additional cost as part of our MedicsRCM service. Or, you can **retain your existing EHR** interfaced with MedicsRCM.

Don't be apprehensive about outcomes reporting. We can help you simultaneously maximize your **productivity, efficiency, and revenue**.



Why You for Treatment?

Interesting article title, but yes, **why you?** Why would someone who needs any level of care for addiction recovery help or behavioral/mental health treatment select you in a highly competitive marketplace?

Undoubtedly, having a decent referral network is important, but it's generally accepted that most potential new patients/clients **discover treatment resources through online searches**. You *might* know that yourself by determining how people are finding you.

Except that "might" doesn't work; you *must* know how people find you. To do that correctly, you'll need a **customer relationship management (CRM)** system to fully monitor why incoming people are coming to you for help.

If you're thinking, "No, not another system," you'd be correctly dismayed.

But what if the platform used by your billing company or your in-house system **already had a CRM built-in at no additional cost** that **ties directly into the person's record**? Where all the **pre-intake information gathered in advance**, ideally through your online portal, populates the person's record which only becomes live **once the person arrives**? Where an **expensive interface** to an even **more costly stand-alone CRM isn't needed**?

The platform used by MedicsRCM – the MedicsPremier system from ADS – has **CRM capabilities built-in at no additional cost** without requiring any integration. You'll be able to track your marketing, advertising, SEO searches, and referrals neatly, cleanly, and inexpensively right through it's CRM features.

Side note: our platform and CRM do something else of particular interest for BH/SUD settings: patients/clients don't "go live" in the system **until they actually arrive** for treatment as scheduled. They're retained in a holding file and on intake, they become active.

- ✓ This helps to altogether avoid the **inordinate number of "false" patient records** which skews your actual statistics.
- ✓ It **eliminates unnecessary staff work** in deleting or manually moving those records to another file.
- ✓ You can **work your "no shows"** with follow-up calls or messaging while they're still segregated from your live treatment population's records.



If you like your **existing CRM** or want to deploy another one, that's fine because our programming team has **interfaced with almost every CRM**, including Salesforce® and Sugar CRM®.

Contact us for a quick overview of our CRM features and on how people don't become live in the system until they actually arrive. **Or see us at NCAD East, booth 308!**

Stress-Free Bed Management

If you have beds to manage, you know the stress that can cause.

But our inpatient facility clients don't have that stress because they have access to our Medics BedManager which empowers their administrators and admissions teams to quickly view:

- ✓ **real-time status of beds**, if they're available, or if occupied and by whom including the person's gender
- ✓ any **particular program(s)** in which the bed's occupant is enrolled
- ✓ **bed type, size, and location** (room, floor)

Medics BedManager supports:

- ✓ **level of care** management
- ✓ automated **admissions** and **discharges**
- ✓ automatic **charge posting** at **time of discharge**
- ✓ **data/graphics/dashboards** through its built-in, user-defined **report generator**
- ✓ **census** management and reporting
- ✓ **MARS** medication dispensing system (if applicable)
- ✓ maximized **workflow** for **minimizing facility stress**
- ✓ significantly **reduced wait times** as beds become available
- ✓ improved **bed utilization** and **planning** with **overview displays**
- ✓ **updating a bed's status once** enables viewing by all in **real-time**
- ✓ **adding** rooms, configuring **intake windows**, changing **room view** parameters, and more Click or copy and paste www.adsc.com/bed-management-software for a quick Medics BedManager video, and see us at **booth 308** if you're attending the East Coast Symposium!





The Song Remains the Same: Staffing Issues Continue Unabated

Billing, coding, workflow, EDI, and administrative staffing issues greatly affect BH and SUD services. **Workforce outsourcing** is a **proven resource** on that front.

Our +300 MedicsRCM team members can **bolster in-house staffing gaps** with their expertise in “back of the house” routines and requirements.

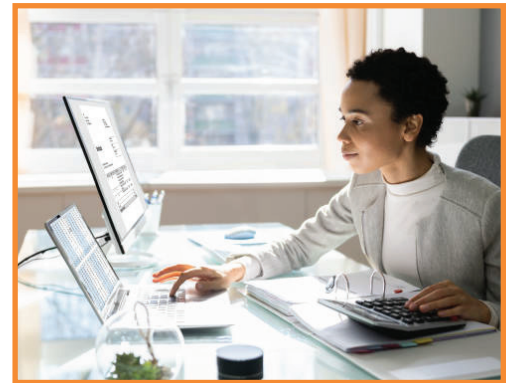
MedicsRCM clients have been able to **compress staffing** and benefit from **increased efficiency** and **workflow** by relying on **our outsourced workforce** and **mobility and engagement** tools for keeping their patients/clients, providers, and centers connected.

We can help you as well!

Versatility in Platform Deployment: your System(s), your Way!

ADS RCM uses the **MedicsCloud Suite** from ADS which consists of the **MedicsPremier** financial, management, and operations system, and the highly comprehensive **MedicsCloud EHR**, ideal for **all levels of care**, and with clinical charting, and reporting.

ADS RCM clients can also **retain their existing EHRs** if preferred, interfaced with ADS RCM’s MedicsPremier system for a **personalized “best-of-breed” RCM / EHR** approach.



Or, our **electronic superbill** can be used instead of an EHR to quickly capture encounter data for billing.

Any number of MedicsRCM configurations can be used **depending on your personal preference**.

Even more, you can deploy the same MedicsPremier and MedicsCloud EHR platforms in the ADS cloud if **in-house automation** is preferred.

Recap: ADS RCM and ADS can provide the specific solutions your BH or SUD setting needs **in ways that work best for you**, and always for **all levels of care**.



Contact us at [844-599-6881](tel:844-599-6881) or email rcminfo@adsc.com for more about MedicsRCM, the MedicsCloud Suite, or both. And if you’re attending the **East Coast Symposium**, see us at **booth 308!**



ADVANCED DATA
SYSTEMS RCM

