

Overcoming Billing Challenges:

How a Diagnostic Lab Improved Collections for a New Test

A molecular/genetic laboratory launched a new, proprietary test to the market to provide an individualized risk assessment for cancer. Securing reimbursement from Medicare was difficult. Complex appeals were experienced due to payers not recognizing the test or understanding the medical necessity of this type of diagnostic test.

When partnering with TELCOR Revenue Cycle Services (RCS), the goal was to improve collections by relying on the RCS experience with payers. This included creating smart workflows to manage documentation, claim submissions, appeals, and post-appeal follow-up tasks as well as working closely with the diagnostic team to provide relevant support documentation to manage appeals.

System Capabilities

With new tests being brought to the market, there can be manual intervention to provide payer-specific documentation needed for multi-level appeals. TELCOR RCM automated this process, providing excellent visibility to fully understand success with claims flowing through the system and where focus was needed to tackle complex appeals.

Payer-specific documentation was easily managed via the TELCOR Document Management module. Using OCR, the software recognized critical information and populated the appeals record with the required documents ☑ all without manual intervention.

Tracking the success of multi-level appeals can be difficult, e.g., how long it's been since the appeal was submitted, its status, and next steps. Using smart workqueues, the TELCOR application provided the visibility to track and trend the status of all appeals, by payer, allowing the team to proactively follow up on expected responses.

Reaping the Results

The billing team recognized the following results:

1. The average reimbursement rate increased 400% for the proprietary test.
2. A 95% clean claim pass-through rate across all payers.
3. The collection rate improved to 90% across all payers.

Difference Makers

The diagnostic company knew their test would provide a benefit as part of treatment options for patients battling cancer but would also be faced with the struggles of getting payer acceptance.

They partnered with TELCOR as their billing service vendor because of our specialized understanding and experience with payers. Being able to navigate a complex appeal process along with the ability to streamline the process, the need for manual intervention was greatly reduced. Additionally, the diagnostic lab was able to provide their market access real-time analytics to prove medical necessity and push for higher reimbursements.

The partnership between the laboratory and TELCOR exemplifies how specialized RCM services can dramatically impact the financial viability of new diagnostic tests. By focusing on detailed claim management, efficient appeal processes, and payer knowledge, the lab was able to secure a higher reimbursement for their diagnostic test.

