



HEALTH

Clean Claim Submission, Accelerated Revenue, Decreased A/R

How Coronis Health Helped an Orthopedic Facility Transition from In-
Network to Out-of-Network and Lowered A/R

Stats

- \$10M A/R decrease in 4 months
- 697 decrease in phone inquiries in 3 months
- 77.47% increased revenue in 6 months
- 7,281 average monthly visits
- \$2M average monthly receipts
- 27 providers

Coronis Quote

“When we first partnered with our client, a perfect storm of high A/R and increasing patient statements prevented the facility from reaching its full potential. We are already seeing plummeting A/R and more streamlined statement processing operations that have allowed the staff to focus on what matter most: their patients.” - Stephen Grubbs, CEO, Coronis Health

Situation

An orthopedic facility in the Northeast struggled with skyrocketing A/R and low revenue, which made it difficult to maintain healthy margins. Along with these financial woes, the facility’s front desk did not have the training or experience to run efficiently.

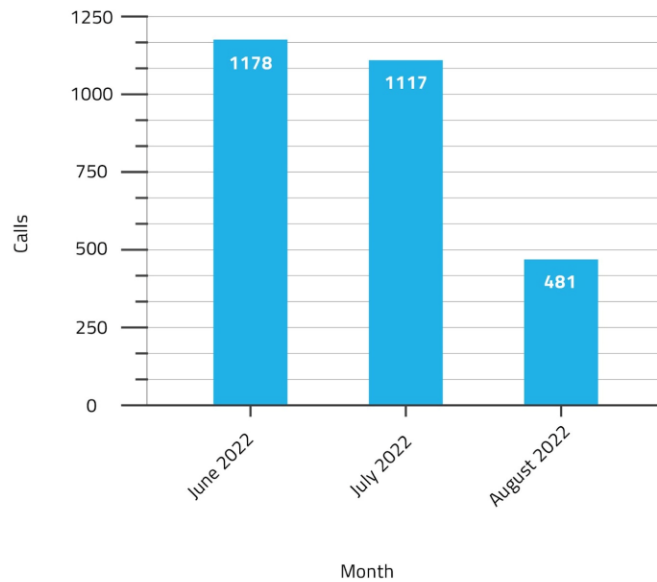
These gaps in their policies and procedures led to low productivity and slow claims processing. The medical systems that the facility operated on were also too complex to effectively process patient statements. As patient statements piled up, reimbursement rates slowed, and revenue became stagnant.

Solution

Once Coronis Health came on board, the team immediately created a multi-step plan to:

1. Accelerate revenue
2. Submit clean claims
3. Decrease A/R
4. Improved communications
5. Streamline operations

Total Calls Received



Coronis quickly began managing all patient telephone inquiries to move statements through the company's call center. They also initiated training to help improve the front desk managers' policies and procedures for smoother operations.

The team implemented a designated personal injury and workers' compensation specialist who negotiates with insurance companies for out-of-network payments that are not meeting the threshold that was sent for payment. This specialist negotiates with insurance companies to file claims, allowing the facility to transition from in-network to out-of-network payers for higher reimbursement rates.

Results

Coronis Health's new quality measures now allow the team to move claims through cleaner and more quickly for faster reimbursement. Routine audits also give the team an opportunity to review denials and resubmit clean claims, ensuring lower A/R and higher revenue for the facility.

Over the last six months, the orthopedic facility has seen a \$10 million decrease in A/R, 697 fewer phone inquiries, and a 77.47% increase in revenue. The facility now brings in about \$2-2.5 million in revenue each month. Both parties are excited to see where their partnership goes next.

