IHA Patient Financial Services Program





Advocating for hospitals. **Resolving** systemic issues. **Supporting** revenue cycle success.

Strengthening Your Hospital's Financial Health

In today's complex healthcare environment, timely and accurate payment is essential. The IHA Patient Financial Services (PFS) Program helps hospitals navigate complicated payer policies and processes. We work closely with member hospitals, offering expert support and representing hospital interests to payers.

Recovering payment on just one patient account can offset the entire cost of your PFS membership, making it a smart and strategic investment in your hospital's financial success.

Our Approach

The IHA PFS Program is committed to reducing administrative burden for hospitals and health systems. We work across the payer spectrum, from government to commercial, to resolve complex, systemic claims and revenue cycle and utilization management issues.

The PFS team assisted our organization in resolving a Medicaid eligibility error that resulted in a Medicaid MCO recoupment of a high-dollar claim. After the PFS team worked with the Illinois Department of Healthcare and Family Services to correct the Medicaid eligibility error, the claim was repaid. The gross charges for the claim were \$1.1M, with a net payment of \$239K.

Mounika Kata—Senior Director, Enterprise Patient Financial Services, Revenue Excellence, **Trinity Health**

IHA Patient Financial Services Program

Providing revenue cycle intelligence to strengthen hospitals



Key Program Benefits

Payer Advocacy

Builds critical relationships with all major payers, and through those relationships, provides solutions to complex claims and utilization management issues.

Member Engagement

Brings members together through three distinct groups to collaborate, share best practices, and discuss payment, compliance, and operational challenges:

- Committee on Patient Financial Services (six meetings per year)
- Subcommittee on Utilization Review and Case Management (two meetings per year)
- Subcommittee on Access and Registration (one meeting per year)

These meetings provide a forum for members to raise concerns, receive updates on ongoing issues, identify trending issues and shape the direction of the PFS team's engagement efforts.

The PFS program and the IHA PFS team provide solutions to problems resulting from payer practices that disrupt our revenue cycle. The PFS team uses their knowledge and expertise not only to solve problems, but to innovate in effecting real change that supports PFS members.

Marc DeVar, CHFP—Associate Chief Financial Officer, Revenue Cycle, Patient Accounting, UI Health



The PFS program has been an invaluable resource for our organization. They leverage their relationships with commercial, Medicare, and Medicaid payers to address issues and solve problems that have a direct impact on our revenue cycle.

Ana Wolfe—Senior Director, Payer Relations, Managed Care, **Ascension Illinois**

Communications

Keeps members informed with timely updates on key revenue cycle issues, policy changes and payer developments.

- Regular newsletters containing payer updates
- Detailed technical memos
- Medicare, Medicaid and commercial payer-specific alerts

Technical Assistance

Provides hands-on support to help hospitals address complicated hospital-specific claims and compliance issues.

- Escalation and resolution of technical billing questions
- Guidance on navigating payer rules
- Assistance with individual reimbursement disputes



Become Part of IHA Patient Financial Services

To enroll in a complimentary trial membership, contact Lisa Lynn, Senior <u>Director, Patient Financial Services at Ilynn@team-iha.org</u> or 217.541.1181