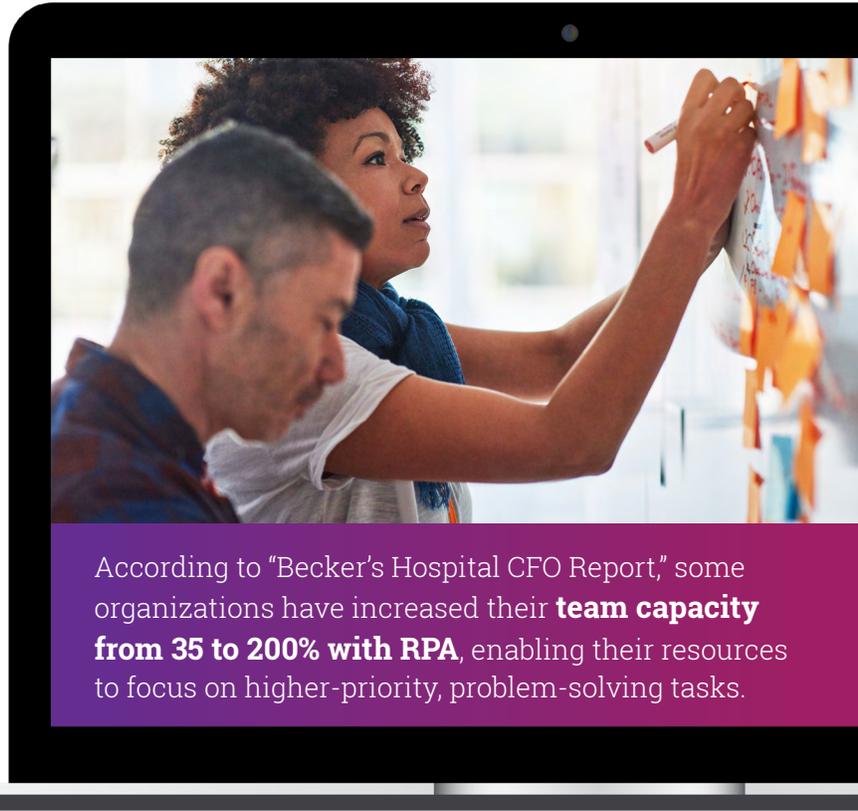


# Are you getting the most out of your labor spend?

## Robotic Process Automation

can help improve operational and financial performance by greatly reducing the time to complete typical manual tasks, including the following impact areas:

-  Repetitive, low-value work that may be unnecessary for human intervention
-  Processes that are capable of being partially or completely automated
-  Predictive insight based on historical data to forecast KPIs



According to "Becker's Hospital CFO Report," some organizations have increased their **team capacity from 35 to 200% with RPA**, enabling their resources to focus on higher-priority, problem-solving tasks.



### nThrive RPA offering

**Identify**, assess and optimize processes

**Identify** and scope specific bots

**Achieve lasting results** by addressing root cause

**Prioritize** around revenue cycle area of highest opportunity

**Deploy selected bots** with client and measure overall process improvement

### Why nThrive?

**Revenue Cycle Management** experience with exclusive focus on health care

**Assessment to identify** and optimize process prior to bot deployment

**Limited risk** and investment with "price-per-bot" approach

**Platform agnostic** to integrate into industry systems

### An RPA bot example:



Looks up claim in payor website



Gets medical records directly from EMR



Downloads as a pdf



Creates an appeal on payor website



Attaches medical records pdf file



Submits the appeal



Gets the ticket number from payor website

Puts note into patient accounting system stating what it did and includes the payor ticket number for the appeal



## ROBOTIC PROCESS AUTOMATION OVERVIEW

The process of engaging with nThrive for RPA bots begins with evaluation of processes. nThrive believes that RPA is an opportunity to re-design and optimize processes before automation, **eliminating the constraints that shaped the manual processes currently being performed by humans.**

### CLIENT SUCCESS:

LARGE 50+ HOSPITAL GROUP #1

Adjustment (XX7) Claim Type Bot	
AVG. LABOR SAVINGS	<b>2.5-4 FTEs</b>
ROI	<b>365-583%</b>

Medicare and Medicaid Eligibility Scrub Bot	
AVG. LABOR SAVINGS	<b>1.8-3 FTEs</b>
ROI	<b>263-438%</b>

Late Charge Management Bot	
AVG. LABOR SAVINGS	<b>1.2-2.75 FTEs</b>
ROI	<b>175-401%</b>

### ADJUSTMENT CLAIMS (XX7 Type of Bill)

Eliminates high labor cost and accelerates billing cycle

Checks for ICN/DCN daily and fixes any claims for which it finds an ICN/DCN

Eliminates time-consuming claim holds and prevents delays caused when ICN/DCN is available prior to the hold date expiration

### ELIGIBILITY DENIALS

Addresses denials for Medicare/Medicaid patients whose claims were rejected/denied for having a MCO Medicare replacement plan

Identifies the MCO plan and gathers the needed registration information to update the account prior to billing

Prevents denials rather than simply automating the working of the denial

### ROOT CAUSE (XX7 Claims)

Supports Adjustment Claims Bot

Leverages the pricing engine in Contract Manager to adjust the late charge for those that will not have net reimbursement effect

Eliminates the need for an adjustment claim



**3 minutes and 14 seconds**

Average time for billers to work each XX7 claim looking for an ICN/DCN

**16.7 seconds**

Average time for bot to work each XX7 claim looking for an ICN/DCN

### Examples of process where bots can deploy

- Working Denials requesting Medical Records
- Lockbox Correspondence
- Late Charge Automation
- Loading Fee Schedules
- Clearinghouse Submission/Retrieval
- Medicaid Remit Data Extraction
- Eligibility Research
- Billing Edits
- Plan Code Selection from scanned Insurance Card
- Government Eligibility Denial Elimination
- Underpayment Recovery
- Prior Auth Submission/Tracking
- Initial Attachment Submission
- Notice of Admission
- Late Charge Validation Pre-Bill
- Charge Reconciliation to Dept Systems
- Medical Records for Work Comp – Jopari
- Missing Internal Claim Number (ICN)/ Document Control Number (CDN) Claim Edit/Hold
- Medicare Hospice Overlap
- Medicare Bad Debt Validation

### CLIENT SUCCESS:

LARGE 50+ HOSPITAL GROUP #2

False Underpayment Variance Bot	
AVG. LABOR SAVINGS	<b>3.6-6 FTEs</b>
ROI	<b>525-875%</b>

### FALSE VARIANCES

Works within the nThrive Contract Management system

Scrubs accounts with payment variances

Checks several sources to identify if the variances are false

Finds registration data discrepancies (The largest root cause of false variances)

A second bot in development stages will address root cause to help registration select correct plan code based on information entered or scanned insurance card

### A small 25-bed hospital

expects to save **two FTEs** once their cash-posting bot is live.



### The functions the bot performs are:

- ✓ Getting cash posting files
- ✓ Modifying cash posting adjustments to prevent credits and other posting errors
- ✓ Automation of manual posting into Hospice and Durable Medical Equipment (DME) systems
- ✓ Reconciliation of posting to bank deposits

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