

Optimizing and Strengthening Tribal Healthcare Operations

Increasing Health Care Resources & Services Through Revenue Cycle Management







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Tihtiyas (Dee) Sabattus

Deputy Director or United South and Eastern Tribes, Inc. (USET) and the USET Sovereignty Protection Fund (USET SPF)



Tihtiyas (Dee) Sabattus is a proud citizen of the Passamaquoddy Tribe of Maine and currently serves as the Deputy Director for the United South and Eastern Tribes (USET) and USET Sovereignty Protection Fund (SPF). USET and its sister organization USET SPF are intertribal organizations that represent 33 federally recognized Tribal Nations from the Northeastern Woodlands to the Everglades and across the Gulf of Mexico.

Ms. Sabattus works to promote, protect, and advance the inherent sovereign rights and authorities of Tribal Nations and in assisting its membership in dealing effectively with public policy issues.

She has 23 years of experience with a majority of her career within the health care administration and has worked tirelessly advocating for increased funding and health care for Tribal Nations through various local, regional and national workgroups. In 2008 and again in 2012 and 2015, while working for USET/ USET SPF, she was nominated and awarded the Indian Health Service Nashville Area Exceptional Performance Award for her dedication, commitment and accomplishments to American Indian Tribes. In 2016 she received a National Service Award from the National Indian Health Board for her dedication work toward advancing the health care of American Indians and Alaska Natives.



Marcia Carlson, CHC VP Revenue Integrity and Growth



Marcia Carlson is Vice President of Revenue Integrity and Growth. Marcia is responsible for Revenue Integrity including operational efficiency, reimbursement, and expansion of Tribal Health Innovations. Marcia brings more than 20 years of Revenue Cycle experience to the team, with proven ability to strengthen organizations, drive strategy execution, streamline operations, and capture untapped opportunities for growth.

Marcia is Certified in Health Care Compliance (CHC) through the Health Care Compliance Association, recognizing a high-level of compliance knowledge and excellence related to the healthcare Revenue Cycle.



Tribal Health Innovations

Tribal Health Innovations (THI) was established in 2019 as a subsidiary of United South and Eastern Tribes, Inc. (USET), an inter-tribal organization serving thirty-three (33) federally recognized Tribal Nations from the Northeastern Woodlands to the Everglades and across the Gulf of Mexico.

USET is dedicated to enhancing the development of Tribal Nations, improving the capabilities of Tribal governments, and improving the quality of life for Indian people through a variety of technical and supportive programmatic services, including revenue cycle management.

THI was started to increase revenue recovery for not only USET member Tribal Nations, but Tribal Nations across the country to further optimize the healthcare services available to their Tribal citizens. THI not only understands how to navigate the complexities of Indian country, but also brings technical expertise on how to best improve every step of the healthcare revenue cycle.

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Steps of the Revenue Cycle

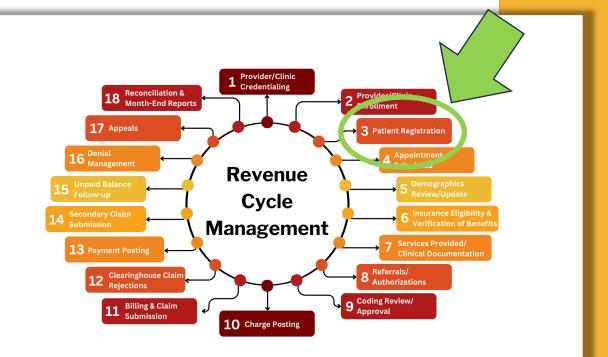


- Each and every step is crucial to maximizing third-party revenue
- Does everyone on the team understand how their "step" impacts the full cycle?





- Information Needed
 - New Patient Packets
 - AOB, ROI, NOPP
 - Alternate Resources (Insurance)
- ➤ Adding to the System
 - Accuracy
 - Completeness
 - Insurance Sequencing

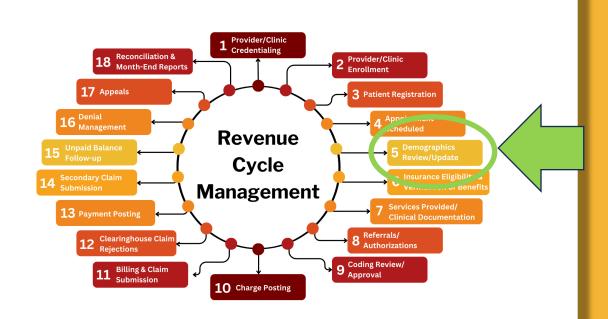






#5 Demographics Review/Update

- > Demographics Review at Each & Every Visit
 - Name
 - Address
 - Phone Number
 - Insurance Information
- > Script if needed

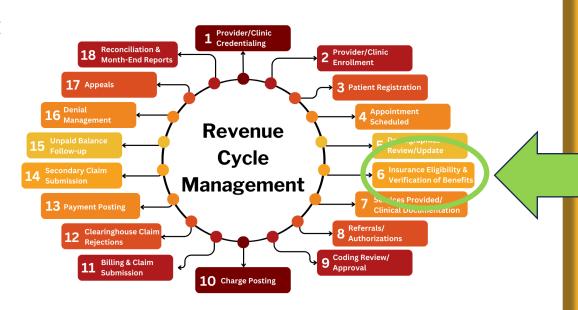






#6 Insurance Eligibility & Verification of Benefits

- ➤ Insurance Eligibility & Verification of Benefits at Each & Every Visit
 - Clearinghouse Eligibility Options
 - Payer Eligibility Portals
- Check Day Before Appointment
 - Same routine as Appointment Reminders
- > Patient Benefit Coordinator
 - Uninsured Patient process







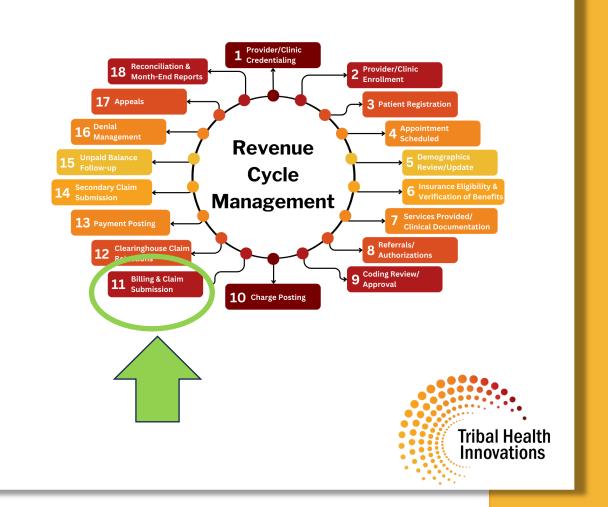
#7 Services Provided/Clinical Documentation

- ➤ Checking Patient In & Out
 - Appointment Reconciliation
- > Clinical Documentation
 - Internal Policy on Timeliness
 - Accuracy, Quality, Templates, Cloning
 - Timely Responses to Incomplete Encounters
 - Audit Schedule
 - Training
 - Importance
 - Patient Continuity of Care
 - Compliance
 - Third Party Revenue





- ➤ Process Batch for Billing
 - First step of Claim Scrubbing
- > Submit Claims
 - Clearinghouse
 - Direct to Payer
- > Clean Claim Rate





- ➤ Rejections from Clearinghouse (second step of claim scrubbing billing system runs first pass as claim scrubber)
- Many can be easily fixed
 - Member ID Not Found (was Eligibility checked?)
 - Coverage Termed
 - COB Info if Secondary
 - Provider Not Enrolled; NPI; Tax ID
- ➤ Others may require Coder review
 - Add-on code without primary
 - Invalid CPT
 - Diagnosis Code incomplete





How?

✓ Assessment

Include all 18 steps of Revenue Cycle

✓ Optimization | Training

Include all 18 steps of Revenue Cycle

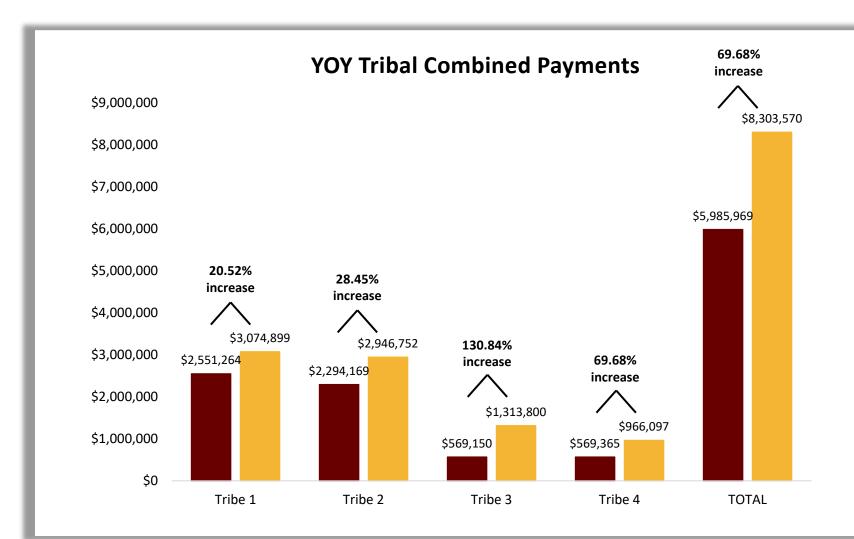
√ Coding and/or Billing Support

- Coding provided by Certified Coders, includes communication with Clinical Providers on documentation deficiencies
- Billing provided by Certified Billers, includes processing claims, posting payments, follow-up on denied and unpaid claims

Results

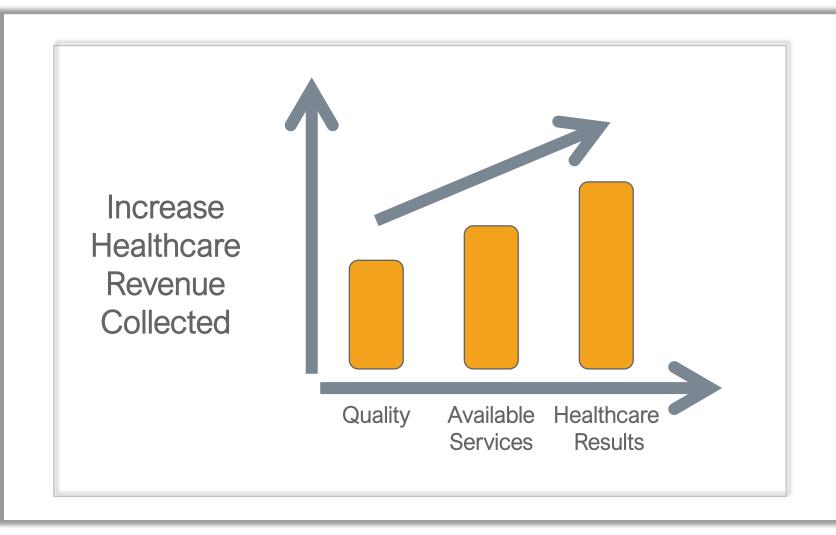
- ✓ Increased third party revenue
- ✓ Recoup previously uncollected revenue
- ✓ Increased efficiency & accuracy in coding and billing
- ✓ Implemented best practices
- ✓ Institute KPIs, reporting and reconciliation
- ✓ Clinical documentation improvement & improved patient continuity of care
- ✓ Compliance following Federal, State & Payer guidelines

Health Center Payment Trends





Goal of THI









Scan the QR code to visit the THI Website www.tribalhealthinnovations.org



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