



CASE STUDY: CareVault at RC McLean & Associates Inc.

Background

RC McLean & Associates ("RC McLean") is a leading Southern California-based medical billing and management service provider, working with over 250 physicians across multiple specialties. Over the course of almost 25 years, the company has developed deep relationships with its clients and prides itself in its high level of client service and advanced use of technology solutions to improve its clients' profitability, while ensuring compliance with regulations and guidelines.

The Opportunity

As part of its continued improvement commitment to clients, RC McLean wanted to establish a consistent eligibility verification process for all claims. This would ensure that bills were correctly processed from the get-go, without causing delays in payments to its clients due to erroneous data provided on a given claim:

- Claims being submitted to the wrong insurance plan
- Incorrect co-payments, co-insurance or deductible amounts listed for specific procedures
- Incorrect insured and dependent coverage information on every claim

Historically, each of its billers across multiple office locations ran verifications. In addition, the company employed two people full time to augment the verification activities of the dedicated biller staff. However, the eligibility verification process was cumbersome and incomplete:

- The dedicated verification staff would login to multiple insurance carrier websites and spend a significant amount of time navigating the various sites and workflows
- They could only verify about 10% of the total number of claims before submission
- There were internal handoffs between the verification staff and billing staff, causing increased overhead steps

Based on an introduction from one of its physician clients, RC McLean decided to evaluate CareVault Verify. After an initial pilot program, the results were so impressive that RC McLean adopted CareVault throughout its operation.

The Impact

RC McLean has standardized CareVault Verify as its eligibility verification solution. Furthermore, now all the billers themselves run the verification while processing the claims. "CareVault is so quick and easy to use that now we can verify patient information for all claims before submission," says Gary Conway, Vice President, Operations for RC McLean.

"We have redesigned our internal process so that each biller now runs the service on their desktop and can immediately verify insurance for any and all claims, and receive a detailed response in seconds," says Conway. "This further improves our claims billing accuracy, and thus decreases the time to get our clients paid."

In addition, RC McLean now has a consistent process and policy for managing the eligibility verification workflow. All billers can consistently apply the policy and strive for 100% verification with minimal impact to the time spent – while ensuring that the correct information is being provided on every claim, the first time around.

Lessons Learned

Insurance eligibility verification is often overlooked as a key source for revenue quality and timeliness improvement. Through a standardized process, supported by the right technology, billing companies and physician offices can both perceive significant value: improved accuracy, faster payments, and greater customer satisfaction.