



Auxis RCM Automation Reduces Cycle Times to Patients by Nearly 20% for Top Medical Supplier

Client Profile

Our client is a leading medical supplier in the healthcare industry, specializing in products and services for individuals with mobility limitations. It also provides maintenance and repair services for its equipment. Founded more than 20 years ago, it has grown to 150 locations across the U.S. and 3,100 employees supporting more than 300,000 customers.

Business Challenge

Manual revenue cycle management processes trigger extremely long delivery cycles

When the client's patients are waiting for mobility products, order delays can have serious consequences – impacting their ability to work or participate in everyday life. Supply chain or manufacturing dependencies out of the medical supplier's control are often a factor in delays.

But the client's cumbersome, manual insurance verification and claims processes also contributed to extremely long order delivery cycles, often stretching as long as 90 days.

The client was committed to minimizing the impact of **revenue cycle management (RCM)**-related delivery delays on its customers' quality of life. It also needed to solve significant operational challenges triggered by its highly manual insurance processes.

Before it can fulfill a customer order, the medical supplier needs to submit supporting documentation and request prior authorization in the insurance payer's web portal. Payer response time varies between two and seven days, and comes without warning of status change – which created multiple inefficiencies:

- > **Overwhelming, tedious workloads distracted staff from more important work.** With no other way to check payer responses, dozens of the client's employees had to manually enter the web portals of its three highest-volume insurance providers thousands of times daily to check the status of more than 300 orders.
- > **Delays registering a payer's approval or denial stretched the order cycle.** The medical supplier's staff checked for prior authorization response three days after each submission. After that, they only had bandwidth to perform follow-ups every three to five days, often causing days to pass before a response was registered.



Lengthy order delivery cycles also **increased the likelihood of impactful changes to a patient's provider or plan coverage**, especially for patients who risked loss of employment and related insurance coverage. Not only was that situation terrible for the patient, but it further delayed equipment delivery as the **client was forced to restart verification of benefits (VOB) and prior authorization with a new payer** if the insurance lapsed during the process.

To avoid payment issues, the **insurance eligibility verification process had to be repeated at various stages** throughout the order cycle up until delivery to ensure patients' coverage and deductibles had not changed – creating more work for the client.



Solution & Approach

Auxis integrates RPA in revenue cycle management to accelerate insurance verification and prior authorizations

The client consulted with Auxis to determine the best approach for reducing cycle times to customers and improving the accuracy of its revenue cycle processes. Together, they decided to improve process steps that required the most manual effort – a frequent source of delays.

Auxis applied a combination UiPath **Robotic Process Automation (RPA)** and application programming interfaces (APIs) to increase efficiency in the medical supplier's verification of benefits, prior authorization submission, and prior authorization follow-up activities. Automation is a proven strategy for optimizing revenue cycle management functions fraught with time-consuming steps and frustration, with the Council for Affordable Quality Healthcare Index recently asserting that fully automating nine common revenue cycle management transactions in areas like claims and insurance verification can save the U.S. healthcare system **\$16.3 billion**.

"Implementing RPA solutions into our order process has truly allowed us to refocus our team's time to more meaningful tasks. This has allowed us to reduce processing cycle time while improving order accuracy and gaining significant efficiencies."

**Chief Operating Officer
Healthcare Provider Company**

Auxis combines more than 25 years of business transformation experience with an elite status as **one of only 26 providers** in the U.S. to achieve both Platinum and Certified Professional Services accreditations from the #1 intelligent automation platform, **UiPath**. Auxis' intelligent automation team came to the table with the tools, best practices, and expertise the client needed to streamline operations and significantly improve productivity in its revenue management cycle processes.



Auxis focused on automating process steps that did not require analysis and decision-making from human staff. To maximize efficiency, its automation team worked with the client to design and deploy unattended robots capable of using information within the supplier's proprietary systems to determine if the bots could work an order or needed to reassign it to a person for further review.

Bots were also designed to take over the time-draining task of logging into the web portals of various insurance payers to review patient insurance information pertinent to coverage and check order status.

1. Automated insurance verifications

Bots pull data from a work queue within the medical supplier's patient and order management databases, using the information they collect to review customers' insurance policy and coverage details in their insurance payer's portal. Based on a series of predetermined validation rules, the bot decides how to proceed with each order, updating the client's system accordingly.

Below are some examples of tasks that Auxis' automation performs to advance orders to the next stage in the healthcare revenue cycle management process:

- > **Validates key customer details** including first name, last name, and DOB.
- > **Validates policy details**, including active status. Confirms customers do not have existing conditions or other claims that might impact coverage.
- > **Checks deductible amounts**, out-of-pocket maximums, and other details that might impact the amount a customer is required to pay.
- > **Adds order notes** detailing work that the bot performed.
- > **Reassigns the order** to a person for review if certain validation criteria are not met.

2. Automated insurance verifications

After the initial verification of benefits is complete, bots collect all documentation needed from healthcare providers to request pre-authorization from the health insurance company. This step must be completed before medical devices are ordered.

Below are some examples of tasks that Auxis' prior authorization automation submissions perform to advance orders to the next stage in the revenue cycle process:

- > **Pulls additional details** for each order.
- > **Populates needed details** in payer web portals.
- > Uploads required documentation and **submits prior authorization requests**.
- > **Adds order notes** detailing work that the bot performed.

3. Automated prior authorization follow-ups

The ability to review payer responses promptly during the prior authorization process directly impacts the duration of the order delivery cycle. Beginning three days after a prior authorization request is submitted for a customer, a bot logs into the insurance provider's web portal to check if it was approved, partially approved, or denied. The bot continues to check twice daily until the payer responds.

That way, responses can be acted upon as soon they are received – decreasing the duration of the end-to-end order process.




Results


Auxis' RPA solution accelerates delivery of critical mobility products by 15 days


With Auxis' automation solution running smoothly, the medical supplier has been able to process a significantly higher number of orders every month – reducing the average delivery time to patients by 15 days.


Not only did faster delivery create a competitive advantage, but it also significantly increased customer satisfaction – better supporting the client's mission of helping people with disabilities live with greater independence.

Key benefits include:

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Nearly 20% reduction in order cycle time
 - > Auxis' process improvements reduced the medical supplier's order cycle time by nearly 20%, with further improvement expected from additional automation. Significantly faster delivery times create a valuable differentiator in a market serving patients who rely on access to these products for their daily lifestyle, helping to boost physician referrals.

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7x increase in prior authorization follow-ups
 - > Auxis' RPA solution delivered a 7x increase in prior authorization follow-ups, performing the process twice daily (including weekends) instead of once every 3-5 days. Acting on insurance responses the same day they are received shortens revenue cycle times, with the client now able to **process more than 29,000 pre-authorization transactions across all payers every month.**

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Increased cadence reduces insurance verification surprises
 - > Automation significantly increased the client's ability to verify customers' insurance benefits, with bots **validating information for more than 26,000 orders per month.** The increased cadence reduces the possibility of surprise changes to insurance plans that can stall or kill orders.

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Faster speed to revenue
 - > Reducing the time between order and delivery enables the medical supplier to bill payers sooner, increasing speed to revenue. Shortening delivery cycles also increases the client's ability to fulfill orders without experiencing changes to insurance coverage or payer that force it to restart the prior authorization processes.





Reduced human error

- > Bots execute tasks according to defined and programmed rules and therefore do not make errors that humans are prone to make. This greater accuracy came as a huge relief to a large back office responsible for a high volume of tasks, many of which required no subjective review or analysis.



Employees shifted to more proactive, high-level problem solving

- > Having automation take over low-value tasks freed up the medical supplier's human staff to focus on more nuanced orders requiring detailed review. The client also expects turnover to decrease due to the reduction in tedious, manual work and stress caused by overwhelming workloads.

Want to learn about the benefits of revenue cycle management automation or other automation opportunities at your company?

Schedule a consultation with our intelligent automation experts today!

Or, visit our **resource center** for intelligent automation tips, strategies, and success stories.

