

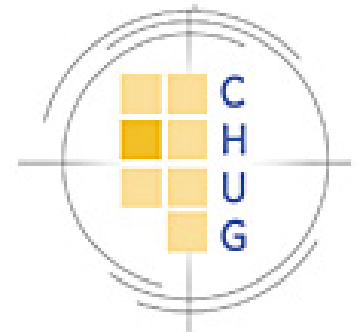
# GE Healthcare

## Centricity Healthcare User Group Centricity Practice Solution Revenue Cycle Roadmap

Hilari Scott  
April 2013



imagination at work



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DESCRIPTIONS OF FUTURE FUNCTIONALITY REFLECT CURRENT PRODUCT DIRECTION, ARE FOR INFORMATIONAL PURPOSES ONLY AND DO NOT CONSTITUTE A COMMITMENT TO PROVIDE SPECIFIC FUNCTIONALITY. TIMING AND AVAILABILITY REMAIN AT GE'S DISCRETION AND ARE SUBJECT TO CHANGE AND APPLICABLE REGULATORY CLEARANCE.

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# Agenda

Roadmap Release Review

Centricity Practice Solution (CPS) 10.1 Task  
Management

CPS 10.1.3

CPS 11

# Significant changes in Ambulatory Practice Market



## Regulatory

- MU
- ICD10
- CMS Sequestration Announcement
- Bundled Payments



## Industry

- Value-based
- ACO/PCMH
- Population Health
- Consumers



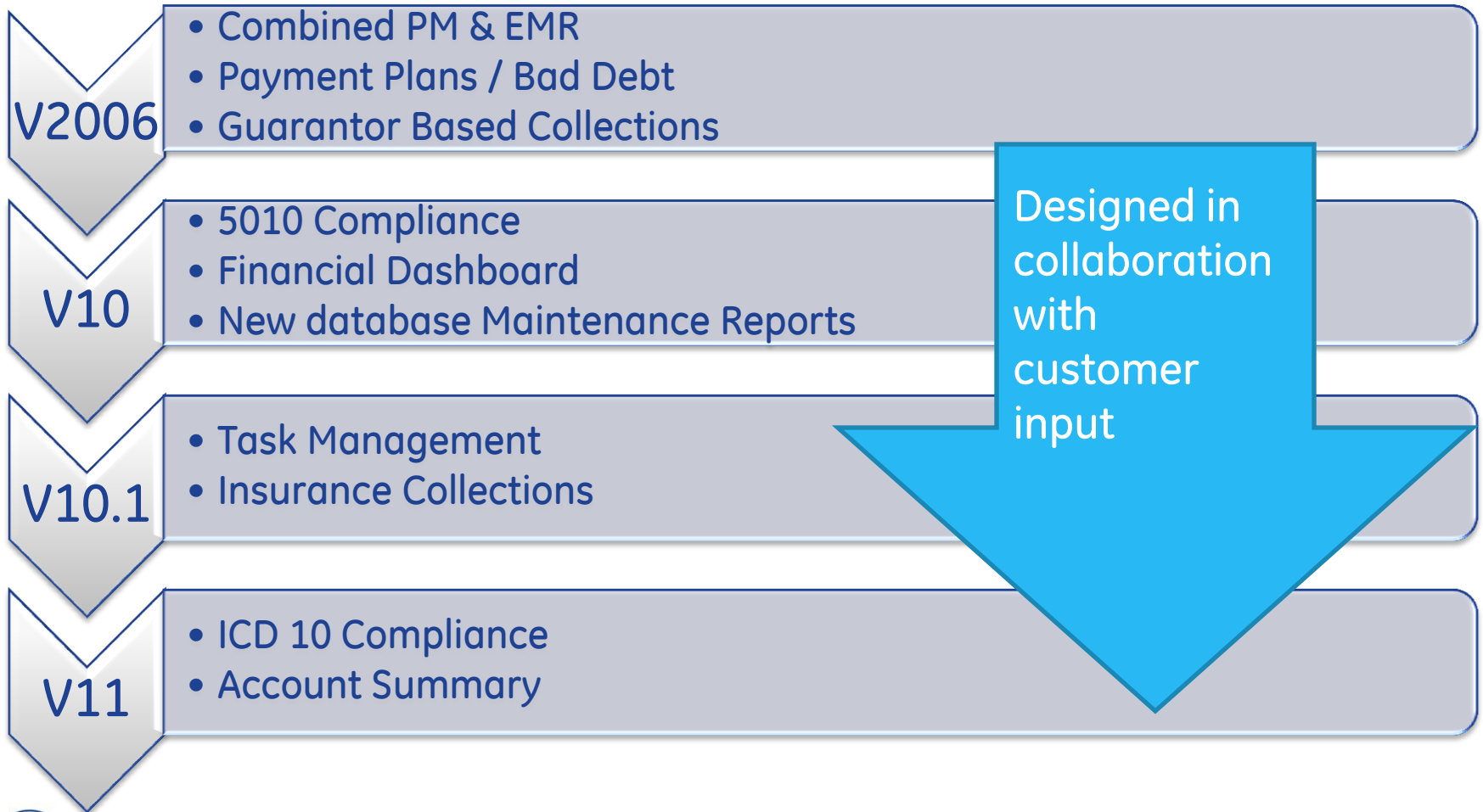
## Technology

- Modular SOA
- Mobile, Cloud
- Analytics
- Interoperability

Integrated Care



# Revenue features by version



# Centricity Practice Solution 10.1

## Task Management for Insurance Collections

**Accelerates collection workflow**  
Create self-updating work lists  
and balancing user workloads

**Helps you increase profitability**  
Improve your ability to prioritize  
collection tasks

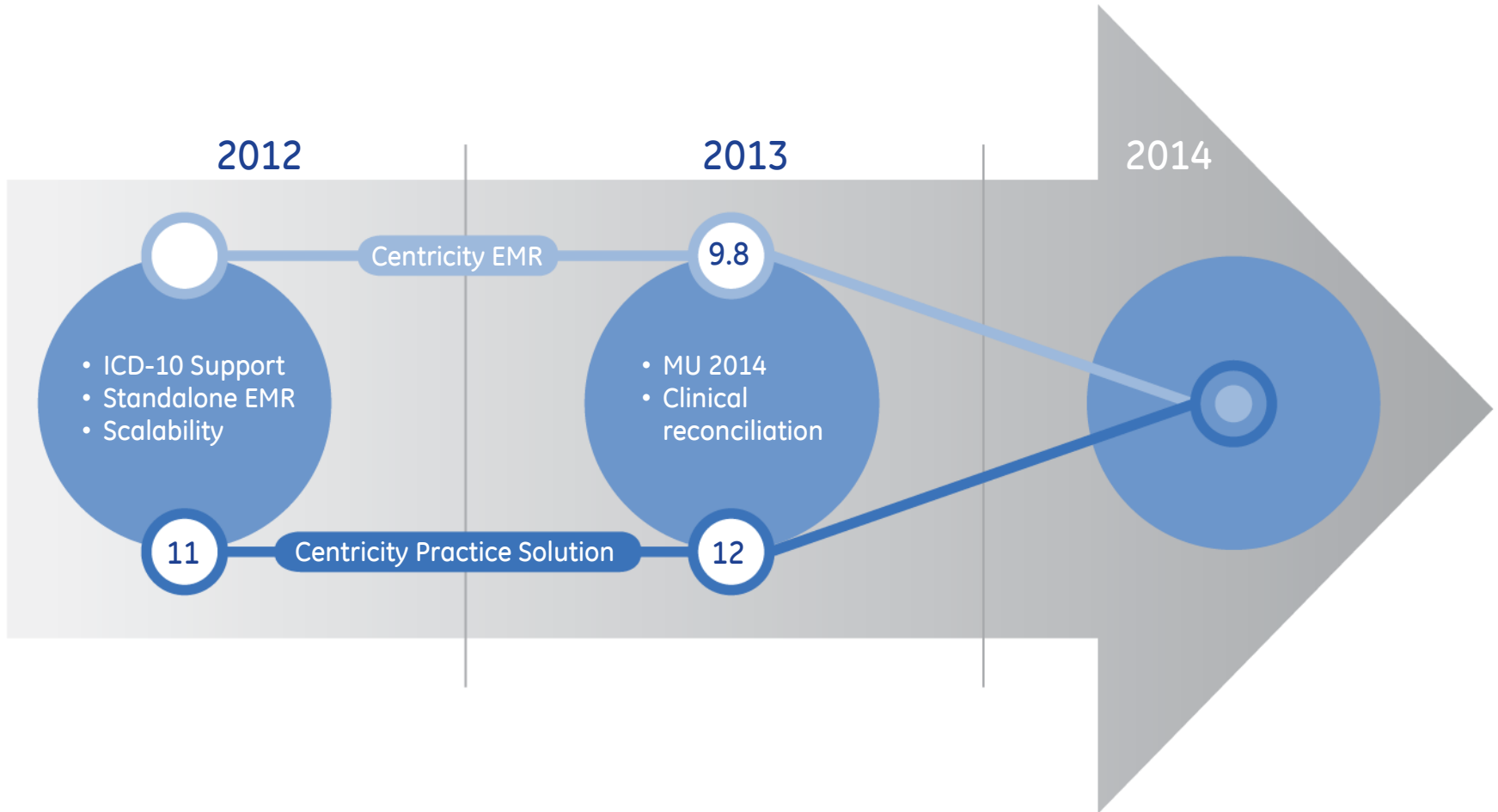


# Centricity Practice Solution 11

- ICD10 both PM and EMR
  - **Regulatory** compliance
  - Intelligent cross-mapping of terms, with side-by-side view
  - New smart/easy term searching, based on the power of MQIC
  - Pre-population of possible ICD10 matches enabling your code selection and assignment
- Standalone CPS EMR on SQL
  - Bringing new commercial flexibility to net new **stand-alone EMR** opportunities
- New Account Summary & Billing Notes
- Generally available since January 1, 2013

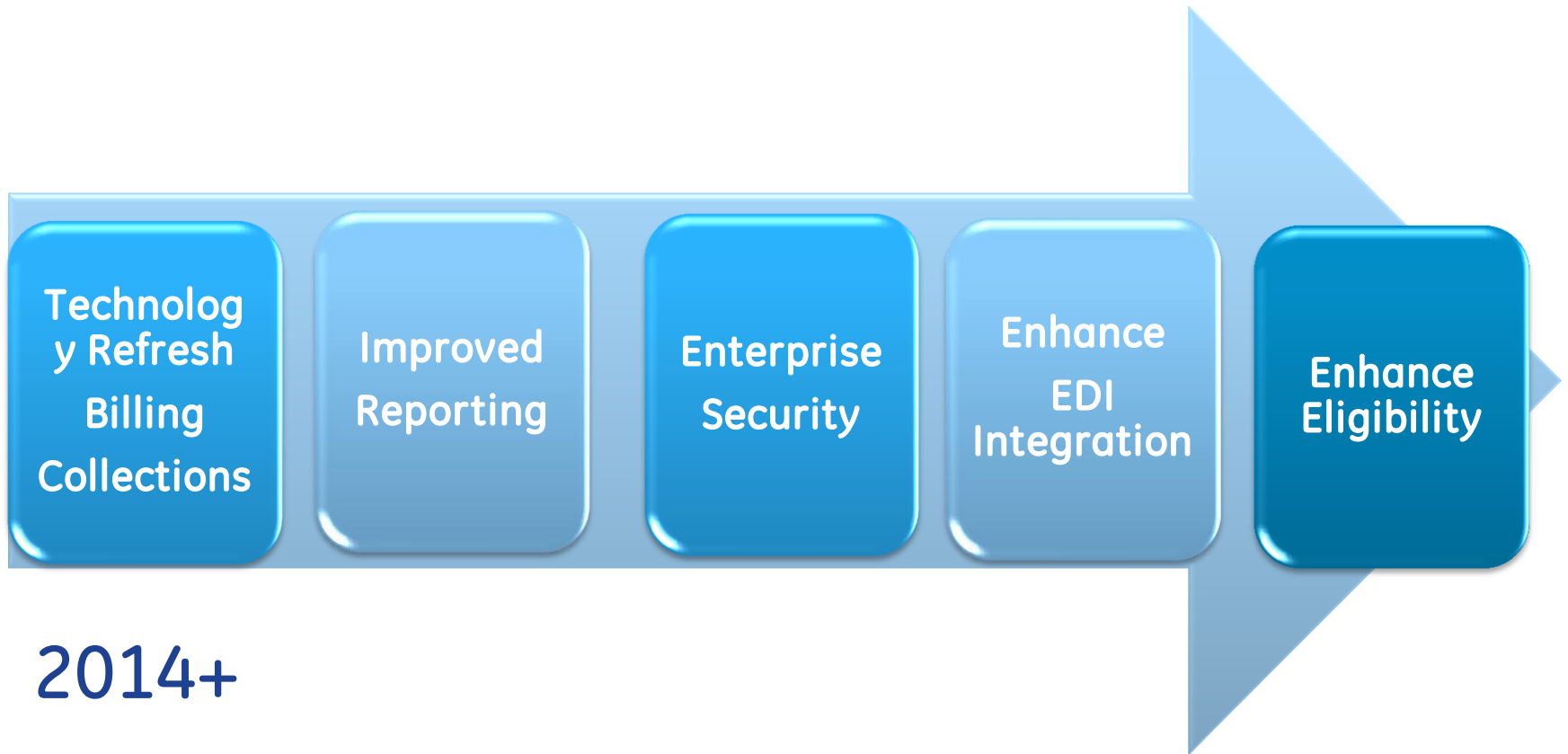


# Planned EMR evolution





# Future revenue cycle investments



# GEHC's commitment to improve

- ✓ Deliver Higher Quality
- ✓ Deliver Consistently
- ✓ Continue to Partner with our Customers
- ✓ Deliver What Customers Want and Need

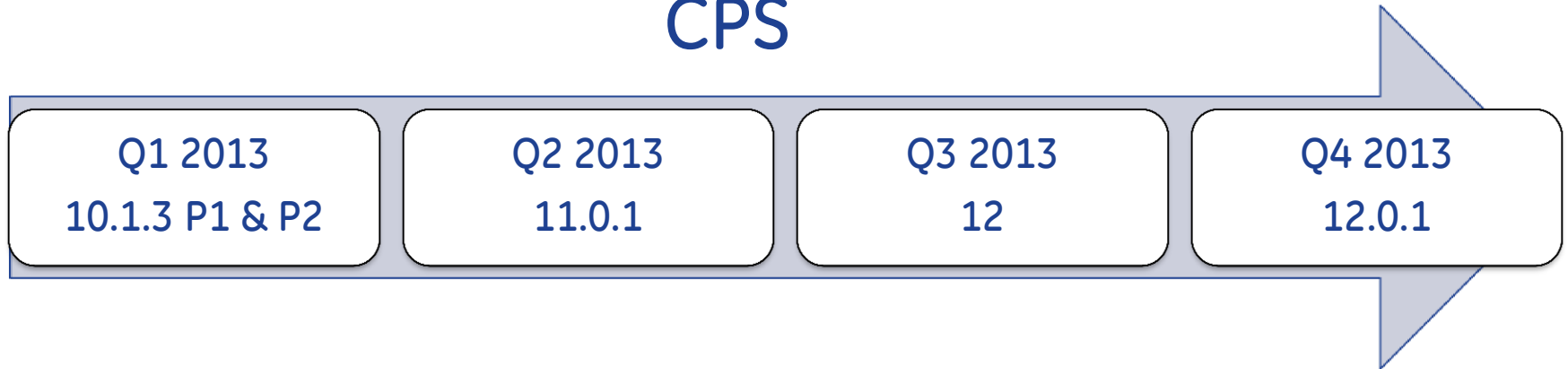
# Service pack releases quarterly

- All releases are consecutive
- You can wait to upgrade when you are ready and still receive all fixes
- Content determined through customer and service input to Product Management

# 2013 service pack releases plan

Deliver consistently

CPS



EDI



# Task Management – Centricity Practice Solution 10.1+

# Centricity Practice Solution 10.1

## Task Management for Insurance Collections

Allows customers to **focus** resources on **key areas** in the insurance collections process.

Provides **workload balancing** tools for administrators to effectively manage their teams efforts

Provides tools to **prioritize work** for end users



# Accelerates Collection Workflow

“

The tasking module tremendously helps our workflows because we do not have to search the system as much. It narrows down items we are looking for.

- *Christy Chester, Insurance Specialist  
Texas Institute of Orthopedic Surgery  
and Sports Medicine, PLLC*

”

# Focus Key Resources

Administrators can Create a task list

Queues can be targeted for specific users or groups based on billing specific criteria

Queue Criteria

Insurance Group	<input type="text" value="Blue Cross Blue Shield"/>
Days Since Last Filed	<input type="text" value="31"/> <input type="button" value="x"/>
Visit Insurance Balance	From <input type="text" value="45"/> To <input type="text"/>

## My Tasks (27 tasks)

### Queues

- Aetna 30+ days \$35 (40 tasks)
- BCBS 31+ days \$45 ROM (9 tasks)
- Medicaid (2 tasks)
- medicaid ob codes (0 tasks)
- Remittance Reject ROM (1 tasks)
- Self Pay (57 tasks)



# Workload Balancing

## View Task assignments by queue

Task List

ID	Task Status	Assigned	Task Age	User	Ticket #	Visit Description	Ins Balance
347	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000043		\$72.00
348	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000062		\$440.00
349	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000063		\$56.00
350	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000065		\$0.00
351	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000113		\$492.80
353	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000167		\$440.00
354	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000168		\$56.00
355	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000169		\$125.00
357	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000192		\$36.00
358	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000195		\$385.00
359	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000196		\$40.00
360	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000197		\$60.00
364	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000261		\$103.00
362	Task Assigned	4/4/2013 1:40:19 PM	91	Wojcik, Matt	000199		\$300.00
363	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000240		\$1,308.00
365	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000281		\$1,107.00
366	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000282		\$2,108.00
361	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000198		\$765.00
356	Task Follow Up	3/7/2013 3:54:57 PM	91	Scott, Hilari A	000170	Spoke to ins	\$440.00
352	Task Complete	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000165		\$2,072.00
370	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000328		\$1,198.40
374	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000333	Clone of visit 000328	\$1,198.40
378	Task Assigned	1/3/2013 11:57:56 AM	91	Scott, Hilari A	000338		\$1,299.00

# Prioritize Work

Prioritize work base on balance, stats, age, etc.

## Task List

ID	Task Status	Assigned	Task Age	Visit Descr	Ins Balano ▼	Pt Balance	Patient	Queue
366	Task Assigned	1/3/2013...	91		\$2,108.00	\$10.00	DeLaMono, Ju...	Aetna 30+ days \$35
491	Task Assigned	2/6/2013...	57		\$2,108.00	\$10.00	Duff, Karri L	UHC \$30 20+ days
363	Task Assigned	1/3/2013...	91		\$1,308.00	\$0.00	Chamberlain,...	Aetna 30+ days \$35
378	Task Assigned	1/3/2013...	91		\$1,299.00	\$10.00	DeLaMono, Ju...	Aetna 30+ days \$35
370	Task Assigned	1/3/2013...	91		\$1,198.40	\$299.60	Huff, William T	Aetna 30+ days \$35
374	Task Assigned	1/3/2013...	91	Payment...	\$1,198.40	\$299.60	Huff, William T	Aetna 30+ days \$35
365	Task Assigned	1/3/2013...	91		\$1,107.00	\$10.00	Tiron, Julia S	Aetna 30+ days \$35
361	Task Assigned	1/3/2013...	91		\$765.00	\$0.00	Benson, Robert	Aetna 30+ days \$35
486	Task Assigned	2/6/2013...	57		\$580.00	\$10.00	Wiseman, Keith	UHC \$30 20+ days
485	Task Assigned	2/6/2013...	57		\$575.00	\$15.00	Nguyen, Theri	UHC \$30 20+ days
487	Task Assigned	2/6/2013...	57		\$520.00	\$0.00	Barton, Dana S	UHC \$30 20+ days
356	Task Follow...	3/7/2013...	91	Spoke to...	\$440.00	\$10.00	Paranada, Mir...	Aetna 30+ days \$35
490	Task Assigned	2/6/2013...	57		\$389.00	\$15.00	Nguyen, Theri	UHC \$30 20+ days

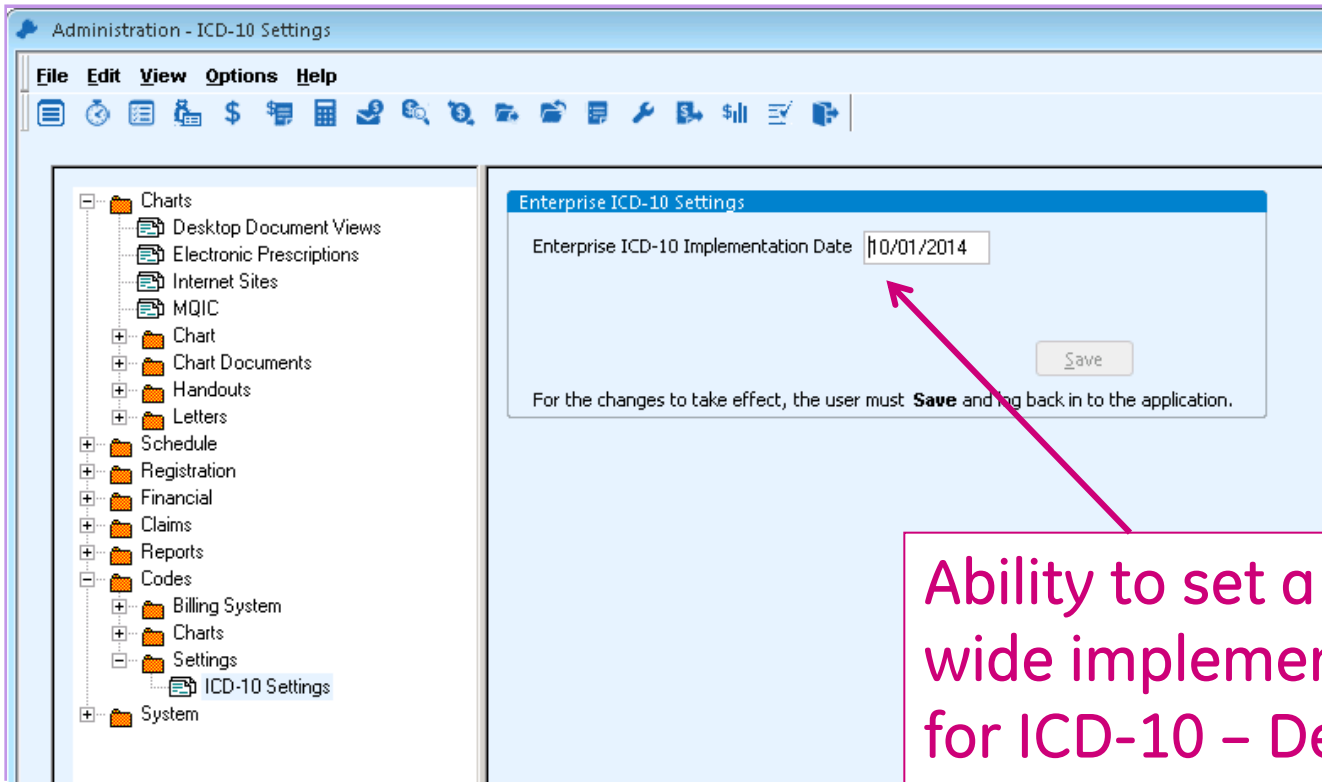


# Centricity Practice Solution 11

# CPS 11 RCM Features

1. System & Payer ICD 10 Transition Date Setting
2. ICD Mapping tools for both clinical and business workflows
3. Account Summary
4. Secured Billing Notes

# System date will drive code requirement by Visit DOS for Visits



Ability to set a system-wide implementation date for ICD-10 – Defaults to 10/01/2014

# ICD 10 Diagnosis will map back to ICD 9 for payers who are not ready for ICD 10

Diagnosis Entry (1) 000412 Boyd, Brad(67) (01/01/2015)

Search: E08.00

Code: E08.00

Description: Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)

ICD Code: E08.00

POA Indicator:

Related ICD-9 Codes: 249.20, 250.10, 250.13

< Prev   Next >   OK   Cancel

# Payers will allow for flexible transition date

This date will determine whether ICD 9 or ICD 10 is billed for Visits with DOS after System Date

Find Insurance Carrier

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z Search

List Name Address Clear

Group City Zip

Show Inactive Insurance Carriers

List Name	ID	ICD-10 Impl	Address	City
AARP	44	10/01/2014	P O Box 13999	Philad
Acme Insurance Co.	135	10/01/2014	3330 Keller Springs #210	Carrollt
Acordia	30	10/01/2014	P O Box 3262	Charle
Adminastar Federal	11	10/01/2014	Linn Station Road	Louisv
Administar Federal	33	10/01/2014	8115 Knue Road	Indian
Administar Federal DME Carri	89	10/01/2014	P O Box 240	Indian
Aetna Life and Casualty	1	10/01/2014	P O Box 1458	Carrollt
Aetna US Healthcare	48	10/01/2014	P O B - 18848	Carrollt
Aetna USHC -CAP PLAN	52	10/01/2014		
Aig Claim Services, Inc.	126	10/01/2014		
Aig Claim Services, Inc.	127	10/01/2014		
Allmerica Financial	77	10/01/2014		
Alternative Health Insurance	106	10/01/2014		
American Community Mutual I	31	10/01/2014		
American Medical Security	80	10/01/2014		

New... Edit... Delete... Merge

Provides the ability to designate payers that are not yet ready for ICD-10 codes

Edit Insurance Carrier

Information Service EDI Identification Orders

Inactive

Carrier ICD-10 Implementation Date 01/01/2015

Name Adminastar Federal Carrier Type Group Health Plan

List Name Adminastar Federal Financial Class Commercial

ID 11 Allocation Set 80/20

# Documentation and Training

- Training Portal

[www.cpstraining-gehc.com/joomla](http://www.cpstraining-gehc.com/joomla)

- Release Notes

[http://centricitypractice.gehealthcare.com/downloads/cps\\_11/cps\\_release\\_notes.pdf](http://centricitypractice.gehealthcare.com/downloads/cps_11/cps_release_notes.pdf)

- What's New

[http://centricitypractice.gehealthcare.com/downloads/cps\\_11/whats\\_new.pdf](http://centricitypractice.gehealthcare.com/downloads/cps_11/whats_new.pdf)



# What is Account Summary?

A tool to support Financial Counselors in a practice by providing a centralized place to review account information and troubleshoot guarantor account status.



GE imagination at work

# Hilari A Scott

6860 N Dallas Pkwy  
Plano, TX 75024

Work: (972) 295-7546

Phone:

Email: [hilari.brown@med.ge.com](mailto:hilari.brown@med.ge.com)

Contact by: E-mail

Guarantor ID: 416

Sex: Female

DOB: 10/19/1975

SSN: xxx-xx-5545

Alerts: Payment Plan

Collections

Patients:

- Scott, Dlayni
- Scott, Jami
- Scott, Chelsea
- Scott, Hilari

[Go to Registration](#)

Aetna USHC -CAP PLAN

Phone: (800) 225-5154

Insured ID: 775475919

Policy Group:

Group Name:

## Financial Summary

Total Balance	Insurance	Patient	Deposit
\$6,958.89	\$4,852.49	\$2,106.40	\$200.00

Last Pt Payment: \$200.00      01/22/2013

Ticket#000466      Scott, Hilari

Aging	0-30	31-60	61-90	91-120	120+
Patient	\$20.00	\$0.00	\$20.00	\$175.00	\$2,091.40
Insurance	\$150.00	\$0.00	\$105.00	\$280.89	\$4,316.60

## Transaction History

Show Paid Visits

Ticket Info	Visit	Patient	Provider	Facility	Company	Primary Ins	Current Ins	Last Filed	Deposit	Ins Balance	Pat Balance	Visit Ba
<b>000265</b> Visit Status: Batched Case: None	11/29/2005	Scott, Jami	Bailey MD, William	River Oaks Mi	Medical Clinic	Aetna USHC -CAP	Aetna USHC -CAP	03/20/2004	\$0.00	\$0.00 Ins Pay: \$0.00 Ins Adj: \$40.00	\$0.00 Pat Pay: \$20.00 Pat Adj: \$0.00	Visit Fee:
<b>000266</b> Visit Status: Batched Case: None	12/12/2005	Scott, Jami	Bailey MD, William	River Oaks Mi	Medical Clinic	Aetna USHC -CAP	Aetna USHC -CAP	03/20/2004	\$0.00	\$0.00 Ins Pay: \$0.00 Ins Adj: \$617.00	\$0.00 Pat Pay: \$20.00 Pat Adj: \$0.00	Visit Fee: \$
<b>000267</b> Visit Status: Batched Case: None	01/01/2006	Scott, Jami	Bailey MD, William	River Oaks Mi	Medical Clinic	Aetna USHC -CAP	Aetna USHC -CAP	03/20/2004	\$0.00	\$0.00 Ins Pay: \$0.00 Ins Adj: \$136.00	\$0.00 Pat Pay: \$20.00 Pat Adj: \$0.00	Visit Fee: \$
<b>000268</b> Visit Status: Approved Case: None	01/12/2006	Scott, Chelsea	Bailey MD, William	River Oaks Mi	Medical Clinic	Medicare Part B	Aetna USHC -CAP	03/24/2004	\$0.00	(\$215.00) Ins Pay: \$0.00 Ins Adj: \$1,693.00	\$0.00 Pat Pay: \$20.00 Pat Adj: \$0.00	(\$21 Vi --
<b>000262</b> Visit Status: Batched Case: None	01/17/2006	Scott, Dlayni	Bailey MD, William	River Oaks Mi	Medical Clinic	Aetna USHC -CAP	Aetna USHC -CAP	03/20/2004	\$0.00	\$0.00 Ins Pay: \$0.00 Ins Adj: \$1,693.00	\$0.00 Pat Pay: \$20.00 Pat Adj: \$0.00	Vi --
<b>000270</b>	01/28/2006	Scott, Chelsea	Bailey MD, William	River Oaks Mi	Medical Clinic	Aetna USHC -CAP	Aetna USHC -CAP		\$0.00	\$0.00	\$20.00	\$

# Billing Notes Security

Date time Stamps

Security Enabled

Audit capabilities to track users and changes

Ability to archive



# New Billing Notes

- Financial Tab in Registration
- Charges Tab of Billing visit

Visit - 000035 - Chamberlain, Lisa S - 661 (06/29/2005)

File Edit View Options Help

Resp. Provider: Casey MD, Ben G | Visit Description: | Status: In Progress - Tertiary

Visit Info. | Filing (1) | **Notes** | Charges | Trans. | Corr. | Claims

Charge Set: | Case Set: Standard Fee Schedule | Case: |

Diagnosis View List

	ICD Code	Code	Description
1	600	600	BPH
2			

New... Modify... Delete...

Procedures View List

	Code	Description	Diagnosi	M1	M2	M3	M4	DOS From	DOS To	Quantit	Fee	Co-Pay	Allo
1	99214	Office Visit Level IV	1					06/29/2005	06/29/2005	1.00	90.00	0.00	
2													

New... Modify... Delete...

Auto Adjustment: Tax 0.00 Total 90.00

Close

Patient	Guarantor	Additional	Insurance	Cont	
Total: 12,576.00 Insurance: 12,051.00 Patient: 525.00 Deposit: 0.00					
Balance:					
<b>Aging</b>					
Calculate	0-30	31-60	61-90	91-120	120+
Patient:					
Insurance:					
<b>Billing Notes</b>					
+ ✎ ✕ ↶ <input type="checkbox"/> Display inactive billing notes					
Date	Note Subject	Note Text	Created By	M	
9/21/2012 12:50 PM	Default Billing N...	this is a note	hwinston	9.	

# What should practices be doing?

- ✓ Determine when your practice can adopt an ICD 10 compatible version of the product
- ✓ Confirm you are hardware ready
- ✓ Make sure you have a plan to train internal staff on ICD 10 this could include but is not limited to:
  - ✓ Understanding internal process changes
  - ✓ Identifying current common ICD-9 usage that will need more specificity in ICD-10
  - ✓ Tracking payer adoption of ICD-10 via CEDI Gateway



# What versions are compliant for which regulatory requirements?

Version CPS	Version EMR	GA	Regulation	Certification
9.5	9.5	10/2010	Meaningful Use Stage 1	CCHIT2011 Meaningful Use 2010 (3 year cert)
10		10/2011	5010	
11		1/2013	ICD 10	
12	9.8	ETA 2013	ICD 10 Meaningful Use Stage 2	Meaningful Use 2014 (3 year cert)

Descriptions of future functionality reflect current product direction, are for informational purposes only and do not constitute a commitment to provide specific functionality. Timing and availability remain at GEHC's description and are subject to change and applicable regulatory approvals.

# Confirm you are hardware ready

You can upgrade to CPS 11 From (PM04, CPS 2006, CPSv9.5, CPSv10)

If upgrading from CPS 10 client machines must be running **Windows 7 at a minimum**, which also implies that **Internet Explorer 9** is the minimum version for the web browser

Versions Prior to 10 refer to the CPS 11 Systems planning guide:

[http://centricitypractice.gehealthcare.com/downloads/cps\\_11/system\\_planning\\_requirements.pdf](http://centricitypractice.gehealthcare.com/downloads/cps_11/system_planning_requirements.pdf)

GE Healthcare's Practice Management Health Check is a results-driven process designed to assess and improve your Revenue Cycle performance. A consultant will remotely sign in to your Centricity Practice Management system and use your data to analyze your performance.

### Areas reviewed

- Administrative Table Setup
- Patient Demographic Data
- Billing and EDI Process
- Claim Rejections/Denials
- A/R Follow and Collection

### Solution highlights

- Identifies workflow inefficiencies, unrecognized revenue, and process gaps that may be costing you time and money.
- Establishes your current baseline performance that we compare against industry benchmarks.
- Following our analysis, a comprehensive report will be delivered to you, along with our recommendations for process and/or system improvements. This report will be discussed during a WebEx meeting.

- **Results-driven**
- **Reasonably priced**
- **On-site and Remote options available**

For details, pricing information or to schedule a Health Check, email [RevenueCycleConsulting@ge.com](mailto:RevenueCycleConsulting@ge.com).

Have you balanced your practice lately?





# Centricity EDI Services



Centricity EDI Services is a proven all-payer clearinghouse solution and proactive services offering that is currently helping over 1900 Centricity revenue cycle management customers reduce costs, reduce A/R days and optimize profitability

## Key business benefits:

- Optimize financial performance and profitability
- Reduce costs and improve billing efficiency
- Insight for improving revenue cycle performance

# Hosted ClaimsManager

One of the best ways to reduce rejections & denials is to prevent them before they occur!

Hosted ClaimsManager is a pre-claim, clinical editing solution and proactive claim analysis service that identifies and resolves posting errors that would later result in a rejection or a denial.

- Reduce clinical rejections and denials before they negatively impact financial performance
- Reduce costs associated with addressing rejected or denial claims
- Support regulatory compliance by evaluating claims against specified coding rules while detecting Medicare Correct Coding Initiative edits
- Support regulatory compliance by comparing claims to local payer coding regulations and guidelines

# GE Healthcare is committed to the transitions



Helping our customers achieve regulatory and standard business needs



# Thank you for joining us.

## Questions



GE imagination at work



imagination at work