



# Claims Billing Made Easier Through Integration of Disparate Systems

## Customer

Metro Health Hospital  
Wyoming, MI

## Challenge

Implement a claims management solution compatible with Epic to retain more control over claim-filing processes.

## Products

Assurance Reimbursement Management™

## Results

- Reduction in initial claim rejections
- Positive impact on A/R
- Transparent processes enable more control



**“The impact on A/R is positive because the result of getting claims right the first time is a reduction in denials.”**

**Michella Vanvuren**

Former MSO Insurance Processing Coordinator and now Systems Analyst  
Metro Health Hospital



**The Customer:**

Metro Health Hospital is located in Wyoming, Mich. and has 208 beds, more than 2,400 total employees, and nearly 500 medical staff, including 78 employed physicians. In addition to Metro Health Hospital, the system includes 12 neighborhood physician offices throughout West Michigan. It is nationally recognized for heart and vascular services as well as a cancer center developed in partnership with the University of Michigan department of radiation oncology.

**The Challenge: Reducing Claims Rejections**

Like any hospital organization implementing a new health information management system, officials at Metro Health faced numerous tough decisions in 2006. The organization had selected Epic for its management system, but the vendor did not offer a claims management product.

The hospital billing staff was pleased with the Assurance Reimbursement Management solution from Change Healthcare that it was using and wanted to maintain that relationship.

**The Solution: Reviewing Claims Simply and Accurately**

Michella Vanvuren, a former MSO insurance processing coordinator and now systems analyst at Metro Health, was among the staff who converted from the previous product to Assurance. The ability

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**Kevin Rosenau**

IT Supervisor of Business and Revenue Cycle  
Metro Health Hospital

to review claims for accuracy before submittal ultimately helps reduce days in A/R, says Vanvuren.

The integration of Change Healthcare and Epic has been nearly seamless, according to Kevin Rosenau, IT supervisor of business and revenue cycle.

“The integration is very straightforward and low maintenance,” Rosenau says. “Any code edits or updates are done behind the scenes by Change Healthcare to help keep the system running at peak efficiency.”

## The Results: An Easy-To-Use System That Boosts Efficiency

Assurance has proven superior to the product the ambulatory side of the system was using, says Vanvuren, calling it “transparent and interactive for users.” Unlike other systems that send data to the clearinghouse first and then let billing staff work to resolve rejections, Assurance gives billers the ability to see and edit the claims on the front end, helping to lower the rejection rate and speed reimbursements.

## What Can Assurance Do for You

In addition to implementing transparent processes that enable more financial control, billers appreciate the historical statistics that accompany Assurance claims data.

As information and messages move between the system and payers, the history tab collects that data so billers can quickly check on the status of any claim.



“Based on other software I’ve used, this is more user-friendly and flexible,” says Rhonda Pawlanta, who works in the professional billing office of Metro Health. “It can place specific rules around a claim, instead of just getting a claim from point A to point B.”

Billing coordinator Lisa Metzner especially appreciates the Medicare Direct Entry functionality of Assurance, which connects with the Medicare system to perform additional checks before files are transmitted. Eligibility issues – such as an inexact match of a patient’s name with Medicare records – are found most often, and learning about issues in advance means some denials are prevented because errors can be corrected before claims are transmitted.

Assurance has the ability to electronically import or submit claims data taken from Epic’s billing system, though Metro Health has chosen to perform that task manually. Through a simple export program, Assurance converts diagnosis and procedure coding into electronic claims using the ANSI 837 format. Since payers have unique requirements relative to ANSI standards, Change Healthcare has developed bridge routines to enable formatting to accommodate a wide variety of payers. Users have

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**Rhonda Pawlanta**  
Billing Office  
Metro Health Hospital

also been trained to create and make modifications to bridge routines, which can speed the process of making necessary formatting changes to help keep the cash flowing.

“From an IT standpoint, the product is web based so there is no client server to support,” Rosenau said. “We are looking for more hosted services so we don’t have to support multiple workstations.”

From a user perspective, Vanvuren says the proactive approach that Assurance takes in updating its solutions helps Metro Health receive speedy, accurate reimbursements. “It’s valuable for billers to use the product to review claims before they are submitted. The impact on A/R is positive because the result of getting claims right the first time is a reduction in denials.”



### About Change Healthcare

Change Healthcare is inspiring a better healthcare system. Working alongside our customers and partners, we leverage our software and analytics, network solutions and technology-enabled services to help them improve efficiency, reduce costs, increase cash flow, and more effectively manage complex workflows. Together, we are accelerating the journey toward improved lives and healthier communities.

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