

FQHC CASE STUDY

THE CLIENT

With a \$68 million operating budget and 117 providers, our client serves more than 75,000 residents and completes more than 263,000 patient-care visits each year.

THE CHALLENGE

The organization needed a solution to help them reduce their AR days, which were at an all-time high of 115. This would involve multiple challenges: ensuring proper payment and managing complex contracts generating 12,000 claims monthly, improving collections of growing self-pay accounts, and monitoring frequent payer policy changes.

THE RESOLUTION

Altruis' team of forensic investigators worked previously denied claims while simultaneously verifying contractually allowed claim amounts to identify and recover underpayments. They also focused on initial billing of claims in order to reduce days in receivable and increase cash collections.

THE RESULTS

- 68% reduction in AR Days from 115 to 37
- Medicaid AR Days at an all-time low of 22
- Overall AR Days below national standard of 45
- Reduction from 48% of AR over 90 Days to 20% of AR over 90 Days
- 36.2% increase in Cash Collection — up \$2.54M from the prior year
- 97.3% Overall Cash Collection
- 98.3% Managed Care collection rate
- 97.1% Medicaid collection rate
- 13.9% increase per claim payment



“ We have used the services of Altruis and were very satisfied with their results. We have found them to be efficient, accurate, and trustworthy. Having confidence in their services took a huge weight off of our shoulders. They not only file fast and accurately, but they never give up on a claim and work it for every dollar they can get. I would highly recommend their services to any medical professional or practice. ”

Dave Gerwig, CFO
Park Duvalle Community Health Center