

CDM standardization provides defensible charge practices and revenue neutrality during a multi-facility system conversion.

Challenge

IDN client with \$15B+ NPR needed to transition 88 facilities with disparate chargemasters to Epic, a radically different structure, over a three-year time frame.

Solution

1

Identified categories requiring restructure for each facility

- Converted à la carte charges to bundled charges for labor and delivery
- New time-based charging intervals for surgery and anesthesia
- Converted tiered charges to resource utilization for PACU, endoscopy and pain management

2

Designed and prepared model

- Analyzed revenue and usage reports
- Identified charge-based items on managed care contracts
- Built a revenue-neutral base model broken out by IP/OP and department

3

Analyzed financial impact

- Assigned revised pricing to all Epic CDM lines
- Determined pharmacy and supply markup factor and reallocated gross/net revenue variance
- Developed service line restructuring models to assign defensible new charge amounts

For more in-depth information about CDM Services and all our Revenue Cycle Management solutions, please visit SavistaRCM.com



Results

Consistent pricing standards supported regional/hospital specific charging.

Defensibility of charges across the system.

A base model provided revenue neutrality by region/hospital allowing **endless reiterations of charge and revenue modeling.**

About Savista

Over 30 years of Revenue Cycle Management Experience

More than 300 clients across 770+ facilities

Workforce with an average 7.5 years experience, and 20+ certifications including Epic

