Patient Information Management:

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Transforming communication to maximize healthcare efficiency





Automated processes lead to happier employees and patients

Streamlining the patient journey is a key driver to modernizing healthcare. Despite technological advancements, manual processes and other inefficiencies still adversely influence the care continuum — driving up costs, increasing time and resource needs, and negatively affecting patient and staff experience. Manual processes also impact:

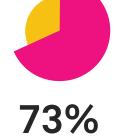
- Timely access to clinical documentation
- Auditing and compliance
- Payment collection for bills, prescriptions, and lab services
- Insurance and patient correspondence processing
- Revenue reconciliation
- Efficient release of information
- Remote and hybrid work capabilities
- Staff burnout and retention



\$16.3B

Cost of manual processes on the U.S. healthcare industry annually.¹

Manual processes have negative implications for patients and providers alike. Patient care and outcomes may be impacted by slow, inefficient, or even inaccurate service.



In a recent Harris Poll survey, nearly three quarters of recent hospital patients (73%) reported that inefficiencies in handling of billing and insurance claims can cause adverse health implications.²

Healthcare providers not only face patient satisfaction and revenue cycle performance challenges, but also an increased risk of personal health information (PHI) violations due to limited auditing and tracking capabilities.

¹ Source: "2020 CAQH Index," CAQH, March 2021. ² Source: "Hospital Billing Study," Ricoh/Harris Poll, Nov. 2022.

Introducing PIM from Ricoh: Transforming communication to reduce resolution time and improve operating margin

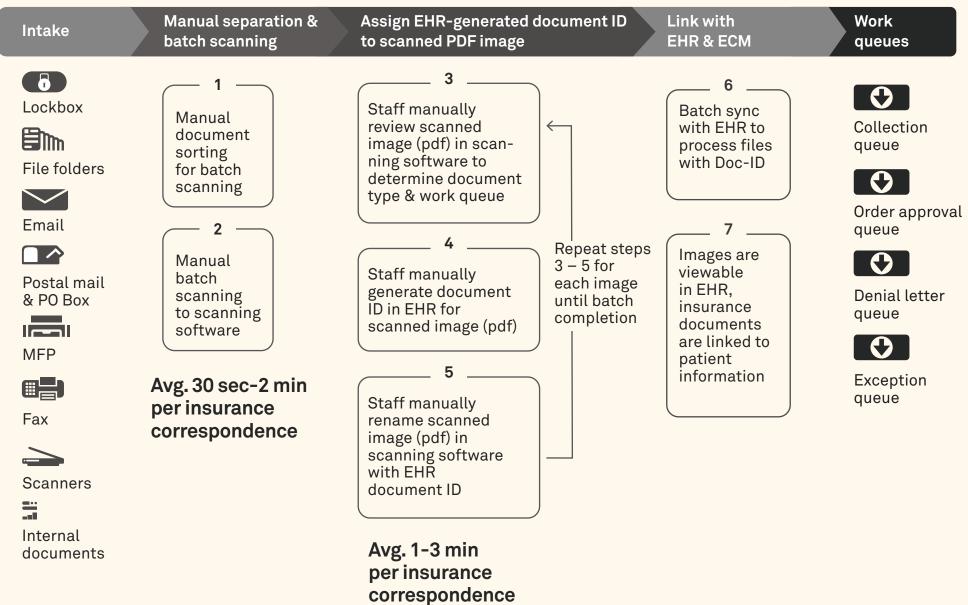
Ricoh developed Patient Information Management (PIM) to reduce the time, cost, and human error associated with manual processing of patient records, insurance correspondence, and billing. Healthcare organizations can better connect, secure, and unlock the power of critical information, streamlining communication between payer and provider.

Through automation of key financial correspondence, healthcare organizations reduce the number of underpaid or denied claims and improve reimbursement and revenue reconciliation. Most importantly, automation enables providers to spend more time on bedside care and less on administration.

Automatically capture, consolidate, classify, and transfer patient information	Eliminate backlog, delays, and missed deadlines	Reduce errors with automatic data extraction and indexing	Integrate with payers' backend systems
Improve compliance and transparency with auditing, reporting, and tracking	Access actionable revenue and workflow insights	Increase and protect revenue	Improve workload- to-resource ratio

Without Patient Information Management from Ricoh:

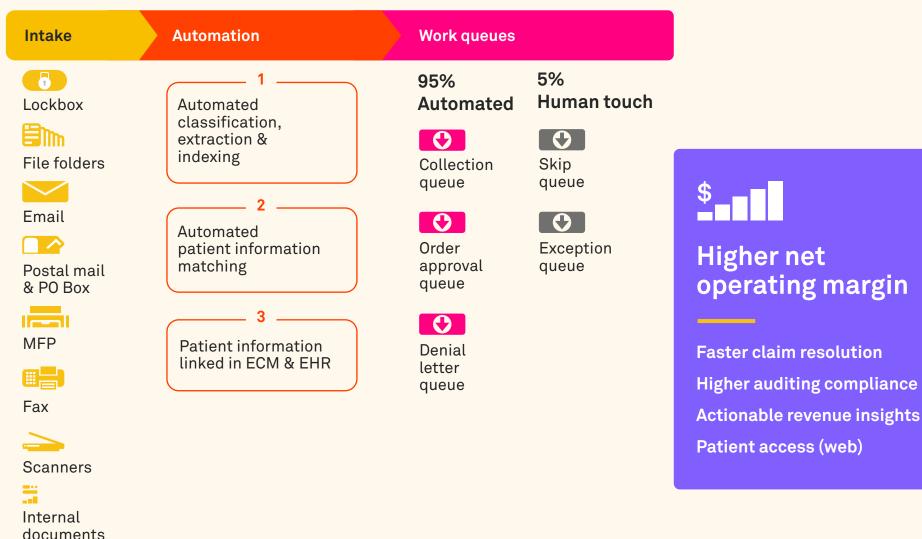
Without Patient Information Management, the typical correspondence handling process is highly manual. It can take up to 3 weeks to sort and scan boxes of important documents. This is often followed by additional stages of manual review. **The result is a backlog of 2+ weeks and a high percentage of denied authorizations and payments.**



With Patient Information Management from Ricoh:

With Patient Information Management implemented, the process for correspondence handling is automated and transformed. Five manual, paper-heavy steps are now 3 digital steps — resulting in a 90% reduction in local scanning.

2 Weeks \rightarrow 2 Days



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Free staff and patients to focus on care

The transition from paper-based, manual processes to automated financial correspondence streamlines the patient journey, enabling patients and staff to focus on patient recovery instead of administrative tasks.

- Efficiently and accurately release information to enable continuity of care
- Decrease response times from providers at the point of care
- Reduce wait times for discharge or prescriptions
- Improve handling of insurance claims, appeals, and denials
- Provide peace of mind that patient health information is processed securely and efficiently



When patient health information is trapped in disparate systems, healthcare providers are challenged to uncover insights that improve operational efficiency.

80%

Automation and interoperability ensure that patient health information securely and efficiently arrives at the correct destination at the right time, reducing bottlenecks that delay patient care and affect revenue cycle management.

4 out of 5 recent hospital patients agree

that hospitals need to modernize and automate their billing and claims processes so employees can focus more on patient care.*

Benefits of digitizing and automating insurance and billing correspondence

- Increase operational efficiency and system-agnostic interoperability
- Reduce resource requirements and costs
- Enhance business continuity through remote working
- Improve auditing, reporting, and tracking capabilities
- Reduce risk of PHI violations
- Transform static, unstructured content into actionable information



of insurance denials are due to incorrect patient identification numbers.*

* Source: "Improving Provider Interoperability Congruently Increasing Patient Record Error Rates," Black Book Survey, April 2018.

3 factors contributing to healthcare's shift to digital workflows



Compliance

Digital workflows ensure that patients and staff receive the right information at the right time so there are fewer delays in care and inaccurate service. Dashboards allow for accurate auditing and tracking for compliance.

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Security

Digital workflows provide enhanced visibility and proactive notifications to providers of potential PHI violations. Early detection can greatly reduce the cost and risks that come from violations and help maintain system-wide security.



Agility

Digital workflows simplify staying compliant with ever-shifting regulatory requirements, facilitating remote and hybrid staff, and making data-driven decisions in ways that manual processing can't match.

Case Study

A major U.S. medical center was heavily dependent on manual processes for insurance claims and correspondence. This was negatively affecting its efficiency, staffing, and bottom line.

Challenge

The medical center used a major bank's lockbox for financial matters related to claims and other correspondence. However, these were often misrouted to the wrong lockbox address. Those that did arrive correctly were boxed and physically shipped from the bank to the medical center.

Staff devoted significant time to manually processing more than 1,000 claims correspondence per day, with no remote working capabilities. Not only was this time-consuming and burdensome, but the ensuing backlog also delayed revenue.

The center was at risk of missing critical deadlines, resulting in more denied authorizations and payments.

Solution

Ricoh implemented Patient Information Management (PIM) for the medical center to enable the transfer of images and documents via HL7 integration to the center's electronic health record (EHR) system. Now, this information is captured automatically from various sources — the bank lockbox, electronic data, and scans from the bank, email, fax, etc.

Information is indexed and automatically matched to the patient's EHR with machine-learning accuracy for more timely response to document submissions and insurance follow-up. Automation empowered medical center staff to triple the number of correspondence documents resolved per day, improving accuracy, collection rates, and cash yield.

Results



Slashed average processing time by 75% from 20 min. to 5 min. per document

Cut backlog from 2 weeks to 2 days, enhancing revenue cycle management



Increased efficiency, resolving 3x the number of correspondence documents per day



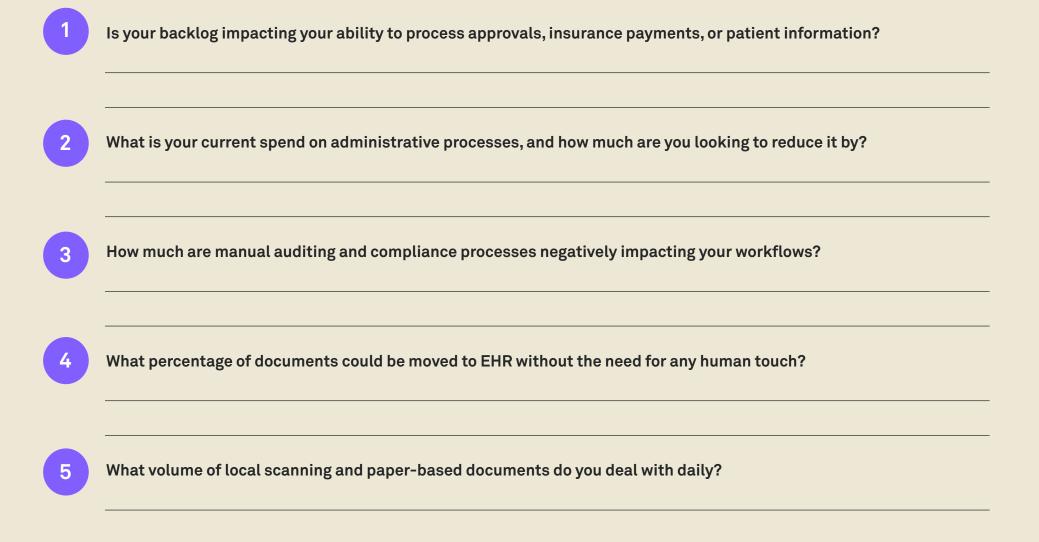
Reduced over 200 document types to 22, simplifying document management



Decreased local scanning and paper consuption by 90%

Worksheet - Taking the next step

Beginning the process of digitizing your organization requires an understanding of your own manual process challenges. For example, try to assess and answer the following:



Why Ricoh?

Ricoh connects, secures, and unlocks the power of healthcare information from end to end, so you can create exceptional patient, provider, and employee experiences with the speed and efficiency your organization requires. At Ricoh, there's no such thing as too much information.

RICOH imagine. change.



Ricoh named a Major Player in the IDC MarketScape: U.S. RCM Service Solutions 2022-2023 Vendor Assessment

For further information, please visit ricoh-usa.com

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