

200-Bed Community Hospital Recovers \$1.9M in 60 Days

Case Study
Cost Reports Manager

Business issue

The reimbursement team identified and submitted Medicare Bad Debt (MBD) claims using internal processes. However, verifying eligibility and tracking payments for over 15,500 inpatients per year proved to be complex. Additionally, compiling audit documentation was a time-consuming and onerous task.

Before FinThrive

- Complex, manual process for verifying eligibility and tracking payments
- Incomplete information collected at admission
- Time-consuming audit documentation process

Solution highlights

- Screens every patient account to identify bad debt reimbursement opportunities
- Compares data feeds to the hospital's patient transaction and demographic information
- Identifies eligible charity, crossover and self-pay bad debt accounts

FinThrive value

\$1.9M

Customer recovered **\$1.9 million** in Medicare Bad Debt reimbursement

<60 days

Project lasted **less than 60 days**

100%

Reconciled **100%** of account balances that should have been written off as MBD



Customer overview

200 beds

Serves 15,500 patients annually

Break the cycle of inefficiency. Email: solutions@finthrive.com



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