

### ***The Client:***

The client is a leading billing services and clearing house with multiple offices in the US and headquartered in California. One of their key differentiators was to advise providers who subscribe to their clearing house services on improving their bottom lines through cleaner claims. They also provided an in-depth financial analysis of their providers' practices to show them areas in the billing cycle that needed improvement as against the industry benchmark. This created a very successful strategy in creating value for providers by pin pointing specific processes that had to be optimized and also proposed a solution that will guarantee improvement.

### ***The Challenge:***

The client needed a sales tool that could be used to convincingly deliver their value proposition to their clients (the providers). Our client wanted to tap physicians who made about \$ 1 million a year. The providers willingly agreed to take the test with our client and were eager to know what was going wrong with their billing process. The challenge emerged when our client wanted to prepare an in-depth analysis from the past 12-24 months of data. There were multiple Practice Management Systems (PMS), technology platforms, databases and the providers had very limited knowledge on where the data resided.

### ***The Solution:***

Crossdomain readily took on the challenge and formed a core team that had an analytics consultant, a healthcare SME and a technical specialist. The team worked very closely with the client and evolved a strategy where we could extract all possible data from the providers' PMS. Being a HIPAA compliant organization, we understand the importance of data security and privacy and the first thing we did was to have a strict non-disclosure agreement in place along with a BAA. Since we were talking about at least 4 providers' data to be analyzed every week, we had to work with diverse practice management systems. Some were advanced but many of them were what you could call "legacy" systems. On successfully extracting the raw data from the PMS or by interfacing with the provider databases, our analytics team crunched the numbers and came out with a variety of reports including Actual Collection %, Unbilled Levels, Aging Analysis, Bad Debt Analysis, Denial Levels, Cost to Collect etc. These reports were presented through high impact visual and graphic representations. We had all the data to prove that the providers' practices weren't running at their best and our client easily made the point on why the providers needed to subscribe to our clients' services. These reports painted a picture of the providers' present business health at a macro level and delved into micro levels like being able to tell the provider about each and every rejected code or modifiers that were being incorrectly used.

### ***The Value:***

Crossdomain's health data analysts went on to create an ROI matrix and this turned out to be a ready and highly-effective business proposal to the provider. Our client significantly improved their sales conversion and now signs up 4 in every 10 providers that they speak to.