

Gordian Health Management Group

Managed Care Clearinghouse

Services

Case Study



The **Managed Care Clearinghouse** is a physician office service which processes referrals and precertifications for all managed care contracts in one location. This one-stop service eliminates the hurdles associated with meeting the complicated rules of all managed care contracts. Gordian staff has expertise as industry insiders to obtain the timely, accurate referral and preauthorization responses you need.

Key outcomes for physicians:

Revenue Enhancement - Accurately obtaining approvals improves reimbursement and reduces appeals and denials

Improved Office Efficiency - Decreasing office staff workload and staff burden for learning health plan requirements improves office efficiency

Courteous Service - Gordian staff provide efficient, effective quality service, promptly.

Quick Turnaround - Our goal is to provide a completed request within two working days from receipt of information.

Pricing is determined based on the size of physician group or the number of expected referral or precertification requests per month.

<http://www.gordianhealth.com/>

The Challenge:

Practice Associates is a group of primary care physicians and specialists in the Southwest. Difficulty interpreting managed care rules and regulations resulted in rescheduling appointments, cancelled procedures and delays in patient care. The office staff felt an ever increasing burden. Hiring and training staff who could uniformly administer the various rules and regulations of multiple plans proved to be difficult. Problems with timely claims payment from denials and appeals affected cash flow and revenue.

The Solution:

Gordian began providing assistance to process all referral and precertifications. The office staff now use one form and send authorization requests to one consistent location. Gordian staff provide ongoing support to train new staff or answer questions as they arise. Authorizations are carefully screened for accuracy and completeness. The review helps assure health plan requirements and managed care contract obligations are met before submitted. Approved authorizations are promptly sent to both the requesting PCP and the specialist.

The Benefits:

Gordian produced results quickly. Office productivity improved as a result of decreased staff workload for processing authorizations and keeping up with health plan requirements. Denials and appeals were reduced. Turnaround times now average 2 working days. In addition, office morale and retention improved dramatically as a result of a more efficient and streamlined process of handling referrals and precertifications.

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