



Denial Management Services  
Extended Business Office  
Accounts Receivable Consulting

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Revenue Cycle Management Systems, Inc.  
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## **MISSION STATEMENT**

Revenue Cycle Management Systems was founded with the mission to produce boutique services for healthcare providers, while producing premier quality products, delivering superb solutions, and fostering successful business relationships by means of dedicated and principled superior service that exceeds our customers' expectations; to never lose sight of our purpose to contribute to improving the American healthcare system for the aged, sick, and disadvantaged citizens.

At the same time, Revenue Cycle Management Systems is committed to preserving our workforce within the United States therefore affording economic growth that provides for an enriching, fulfilling, and rewarding environment for our employees.



# COMPANY BACKGROUND

Revenue Cycle Management Systems was founded in 1999 after our Chief Executive Officer, Ms. Kara Atchison, spent over 25 years in the healthcare field developing strategies to improve revenue practices, decrease payer deficiencies and battle the complex issues faced by the ever changing Healthcare Industry. After serving as a Director of Admissions, Director of Health Information Systems (Medical Records), Director of Patient Financial Services, Administrative Director of Contract Compliance, and Executive Revenue Cycle Consultant for many healthcare providers and organizations, she utilized her experience and management skills to start-up RCMS with her brother, Keith.

Keith Atchison entered the healthcare industry in 1998 after an extensive career in the Hospitality and Hotel Resort Management while striving for and becoming a member of the Professional Golf Association (PGA). He began his career in healthcare operations as a consultant for Dingess & Associates and held various positions during his tenure.

As Project Manager for one of the largest Community Based Healthcare Systems in South Florida, Mr. Atchison was responsible for Cash Acceleration Projects, Denial Management, Debt Collections, Legal Preparation and re-engineering the revenue cycle departments. Through the processes instituted by Mr. Atchison and the efforts of his staff, collection of bad debt was increased by over 200%, facilitated settlements of lawsuits, and is responsible for RCMS Operations and Revenue Engagements that have produced over \$500 million of gross recoveries for our clients.

Together Kara and Keith recruited the talents and experiences of other experts including Kelly Dominquez with more than 30 years of Academic Billing, Collections, and Compliance expertise at the University of Miami School of Medicine and Ms. Kimberly Atchison, who earning a Master's Degree in Public Administration, specializing in Human Resources – Employee Development and working for the State of Florida Department of Transportation (DOT) and Florida International University (FIU).

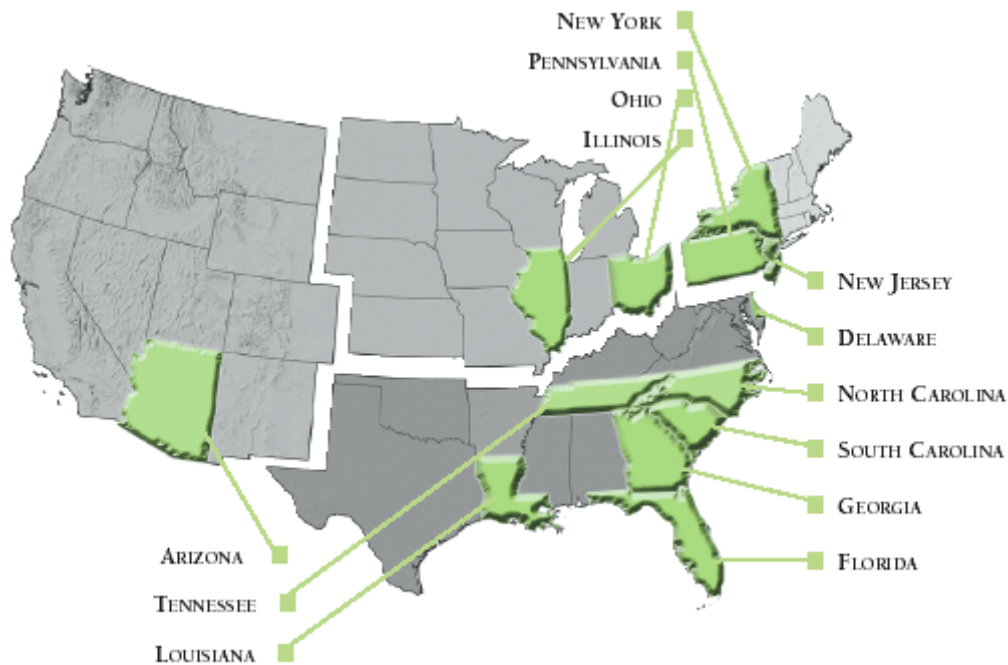
Throughout the 10 years in business RCMS has developed a comprehensive healthcare business operation and revenue recovery program. Our approach to each project is determined by the client's objectives, time frames and needs. Through our experience and resources we successfully recover revenue where claims have been denied, underpaid, or overpaid. We offer a core source of boutique services including payer contract review to ensure that the payer's payments concerns are being addressed up front, as well as, ensuring hospitals are being reimbursed appropriately from their contracted payers. RCMS provides dedicated staff for each client both on-site and off-site, whichever is the client's project and team up with the client for streamline revenue improvements.



Our systematic approach, in addition to our unparalleled software, makes RCMS one of the leaders in Revenue Recovery and Denial Management. RCMSs' enterprising and experienced team of quality healthcare professionals and consultants strive for solid results in recovering and resolving disputed claims.

Through a broad spectrum of solutions and careful strategic planning based upon the current trends in legislation, regulatory changes and industry developments, we are designed to meet our client's business and financial goals. RCMS clients benefit tremendously from our IT technical ability, Medical and Clinical direction, robust Health Information Management support, and Revenue Cycle consulting experts, Certified Coding Specialist, Certified Patient Account Technicians and vigorous In-house Legal Department.

The implementation of our specialized programs is well organized and managed hands-on by the highest level executives of our organization. We ensure our clients personal attention and an all-inclusive implementation plan.



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*Customized  
Programs to meet  
each Client's unique  
requirements*

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## **RCMS PRODUCT LINES AND SERVICES**

RCMS is a boutique vendor, which provides specific lines of business and designs their contracts uniquely for each client. Listed below are the full services offered by RCMS:

### **Patient Account Management**

Management of Day to Day A/R Department

Payment Posting and Remit Analysis

Payor compliance and adjustment audit

Recovery of Non-governmental receivables placed at various age

Follow-up and document all communication within the guidelines established

Provide comment documentation to client via file transfer on a daily basis

Status accounts and identify specific reasons to close or return accounts

Communicate directly with the Third Party Payer

Establish cash acceleration projects with specific payers

Identify claims for resubmission and/or correct claims as necessary

Obtain information from the fiscal intermediary when required for secondary payment

Obtain information from patient when required for coordination of benefits

Close and return claims where the balance has been identified as a patient liability

Provide payer specific reports by aging criteria

Report and monitor recovery rates by placement date

### **Software Lease**

Web-based Denial Management, Appeals, Accounts Receivable Follow-up, Payment Posting, Insurance Verification and Authorization software for all payers

SwiftAppeals™

SwiftCollect™

SwiftAuth™

### **Contract Analysis and Overview**

RCMS Contract Compliance Unit will review contracts for deficiencies in language and provide recommendations.

Payment auditing services in retrospective reviews of closed accounts, where a contract defines reimbursement, to discover underpaid accounts

Provide claims pricing or prospective reviews, so that the contractual adjustments are calculated prior to receipt of payment.



## Identification and Recovery of Denials and Underpayments

Retrospective and Concurrent Review

On-site Liaison between Client and RCMS Corporate Office

Manual review of hard-copy remittance and correspondence

Direct upload of 835 transaction file

Upload all zero payment transactions from Client file

Automated review of accounts uploaded and sorted by denials/underpayments into a “Major Denial/Underpayment Reason”

Specialized Appeals Representative dedicated to the recovery of claims

Clinical Appeals prepared by Registered Nurses and oversight by Medical Director.

Legal reviews and/or debt collections processing performed by In-house Council.

Automated workflow queues thru **SwiftAppeals™**

Payer specific grievance forms built in **SwiftAppeals™**

Executive Level participation in Denial Task Force

Web enabled Denial Management Software 24/7/365

## Audit and Recovery of Underpayments and Overpayments

Audit of all payments specified by client either on a retrospective or concurrent manner by uploading claims data into the contract modeling system, **MCON<sup>®</sup>**.

Collects data, analyze payment methodology whether DRG, Per Diem, Outlier, or Fee based and ensure client is correctly calculating based on clinical documentation.

Report findings provided to Client in a concise report by overpayment and underpayment reason, with recoupment determination.

Executive Summary Report of its findings of trends of fraud and abuse.

Specialized Appeals Representative dedicated to the recovery of debt.

Automated workflow work flow and letter submission based on clients requirements thru **SwiftAppeals™**

Client custom grievance forms built directly into **SwiftAppeals™**

On-site Liaison between Client and RCMS Corporate Office

Web enabled Denial Management Software 24/7/365



## Denial and Underpayment Prevention

RCMS Account Executives will submit a month end Denial/Underpayment report for each facility, as well as a corporate overview report.

Each Facility will receive a detailed month end report summarizing denials and underpayments by reason, payer, hospital service, patient type, and core source.

RCMS will prepare and submit an Executive Summary report of findings for each facility, as well as Company-wide. This report will be concise and provide information necessary for the Client to focus quickly on prevention.

RCMS Account Executive will serve on the Company-wide Denial/Underpayment Task Force Team and develop a company wide Action Plan for process improvement and Prevention.

## System conversion receivables collection

Recovery of receivables remaining after system conversion

Purchase of receivables based on evaluation factors

## Revenue Cycle Consulting Services

Onsite Review of all aspects of the Revenue Cycle

Report of findings compared to "Best Practice" and Industry Standards

Recommendations for Improved Processes

Interim Director Patient Financial Services or Management level

## Authorization Unit

Onsite or Offsite staff assigned to facilities to obtain and verify authorizations for Inpatient and Outpatient visits.

**SwiftAuth™** software utilized to track authorizations and document Client/Payer communication

## Pre-Registration Unit

Onsite or Offsite staff assigned to facilities to obtain patient information and enter pre-registration account in Client's Patient Access System.

Unit works directly on Clients system via VPN



### Insurance Verification Unit

Onsite or Offsite staff assigned to facilities to obtain and verify insurance and benefits.

Unit utilizes various systems to obtain verification when available, and handles all manual insurance verification calls to payer.

Unit works directly on Clients system via VPN

### Claims Coding Review

Capture and analyze coding to ensure billing compliance

Coding and Health Information Consulting Services

Interim Coding staff

Backlogged Coding projects

### Implement In-house Appeals Unit

Establish Appeals Unit with facility or CBO

Recruit and Train Staff

Implement Software

Train Management Team

Develop Policies and Procedures

Develop and Implement Denial Management Task Force

Establish monthly reporting standards and trending reports

Quarterly follow-up and claims review



# QUALIFICATIONS

## Company Qualifications and Experience

RCMS has been awarded GSA Federal Supply Schedule Contract, Small Business - April 2008 (GS-23F-0031U) SIN 520-4 awarded under solicitation FCXB-F4-02002-B

- RCMS was awarded the Third Party Collections and Denial Management Contract for VISN 18, and lease of SwiftCollect and SwiftAppeals to manage their Receivables.
- RCMS handles approximately (28,000-35,000) accounts monthly. This number represents all services provided for our extended business office, appeal departments and debt recovery Departments Company wide.
- Established Units for Insurance Verification, Pre-Registrations and Authorizations.
- RCMS average number of accounts per Collection Specialist (<1,000 accounts)
- Projects and Client work have assigned and dedicated staff and Program Manager.
- Average Balance of accounts assigned to RCMS is \$3,450.51
- Average Age of Accounts assigned to RCMS is 132 days from discharge
- Dedicated Units, Program Manager, staff and Database per Client
- RCMS is a certified minority owned corporation for the state of Florida
- Self Certified Small Business
- Woman Owned Business Certified
- Average Annual Revenue is \$3.4 million
- Average Annual Client Receivable of \$30-\$40 million placed with RCMS
- More than \$500 million in recoveries
- Medical Director is Professor at University of Miami School of Medicine
- Legal Staff includes Florida Bar Attorneys and Magistrate, Certified Mediators and Arbitrators
- RCMS average number of claims per Appeals Specialist (<500 accounts in inventory)



# EXPERIENCE AND EXPERTISE

## Officers and Management Staff Experience

### **Kara Atchison** CHIEF EXECUTIVE OFFICER AND FOUNDER

Kara Atchison is the founder and C.E.O. of *Revenue Cycle Management Systems*. She established RCMS as a result of her 25 years of healthcare financial services background. Throughout her career she has held many administrative positions in the hospital setting and has drawn from her experiences to create a total solution for managed care financial practices.

Ms. Atchison was responsible for the start-up and the development of an Authorization Unit and Appeals Unit at Memorial Healthcare System and several other multi-facility hospitals nationwide. She fully understands all aspects of the hospital financial processes, and has had the experience in re-engineering Admissions, Registrations, Central Scheduling, Bed Control, Financial Counseling, Billing and Collections.

Along with her extensive financial background, Ms. Atchison, has also been influential in the information systems aspect of managed care billing and collections. She designed the Trauma Cases Database and Denials System for the University of Miami. Due to her persistence and constant innovative ideas, RCMS has proven itself as a great success in the managed care industry.

Ms. Atchison served on the subcommittee for Managed Care Plan Authorization and Clean Claim Definition for the Prompt Payment Task Force for the State of Florida, representing all non-for-profit hospitals, which effectively changed managed care claims processing as of October 1, 2000.

### **Keith Atchison** PRESIDENT

Keith Atchison entered the healthcare industry in 1998 after an extensive career in the Hospitality/ Hotel Resort Management. He started as a healthcare operations consultant for Dingess & Associates and held various positions during his 3 1/2 year tenure.

As Project Manager, Mr. Atchison was responsible for A/R Cash Acceleration Projects, Denial Management & the re-engineering of collection departments for large multi-hospital systems. Though the processes instituted by Mr. Atchison and the efforts of his staff, collection of bad debt was increased by over 200%.



As Recovery Services Manager, he was a liaison between managed care organizations and hospital systems to facilitate settlements prior to entering into lawsuits. One example of success at the South Broward Hospital District was the lowering of the institutions denial rate from 18% to 3% in a three-year timeframe.

Mr. Atchison has held three positions since joining *Revenue Cycle Management Systems*. As Director of Operations and Chief Operations Officer, the RCMS Appeals Unit has grown 80% and average recovery on denied claims has increased to an annual average of 70%.

Mr. Atchison now holds the position of President of *Revenue Cycle Management Systems* and is responsible for all our RCMS Operations and Revenue Engagements that have produced over \$250 million gross dollars in the past four years to our clients. Mr. Atchison is also an active member of the South Florida Hospital Association and presently a member of the SFHA Finance Committee.

#### **Kelly Dominguez** VICE PRESIDENT, COMPLIANCE

Kelly Dominguez has been working within the health care financial services for over thirty years. Ms. Dominguez worked for over 10 years with the University of Miami School of Medicine directing the registration and billing department for more than 50 multi-divisional physician groups within the Department of Medicine. Ms. Dominguez has worked as a healthcare consultant over the past 7 years working with several clients in the implementation and management of centralized appeals, centralized authorization/verification, and financial counseling.

Ms. Dominguez joined the RCMS team in December 2000 as Regional Administrator, and later became Vice President of Operations directing the activities of the appeals staff and working directly with the clients in Denial Task Force groups, Revenue Cycle Committees, and subcommittees. Ms. Dominguez now holds the position of Vice President of Compliance and is responsible for the development and implementation of policies and procedures, monitoring and auditing, employee education and training of all the compliance requirements of the organization. Ms. Dominguez is currently an active member of the Health Care Compliance Association.



## **ADMINISTRATIVE STAFF**

**Keith Atchison** PRESIDENT (Program Director)

**Kelly Dominguez** VICE PRESIDENT, COMPLIANCE AND ADMINISTRATION

**Franciso Tejada, M.D.** MEDICAL DIRECTOR, ADVISOR

**Jeong-Won Hwang**, RHIA (Consultant and Program Oversight)

**Kimberly A. Atchison** DIRECTOR OF HUMAN RESOURCES/EDUCATION

**Charlene Maxion** CHIEF FINANCIAL OFFICER

**Kelly Featherston RN** CLINICAL NURSE AUDITOR

**Kim Gerhardt, RHIT** HEALTH INFORMATION TECHNICIAN

**Brenda Di Ioia, Esq** GENERAL COUNCEL

**Raphael Baruch, MBA** INFORMATION SYSTEMS ADMINISTRATOR



# PAST PERFORMANCE

## Contract Experience

RCMS has helped many clients throughout the United States in Florida, Georgia, Alabama, North Carolina, Louisiana, Texas, New York, Delaware, New Jersey, Arizona and Pennsylvania

## Project Title:

**Denial Management**  
**Third Party Collections and Revenue Recovery**  
**Underpayment and Overpayment Audit and Review**

RCMS established an Appeals Unit which is located off-site and managed by RCMS Executives. RCMS provides Appeal Specialist to research, investigate, calculate, and file recovery request to the Third Party Payors where it is determined that the payor has either denied, underpaid, or overpaid a claim. Since 2004, RCMS has recovered over \$4 million dollars in denied and underpaid claims, at a recovery rate of 70% of net placements. RCMS has assisted the facility identifying internal and external problems that if resolved could reduce the denial rate. In fact, the denial rate which was initially reported to be 27% in December 2004, was subsequently decreased to less than 9%.

RCMS received all claims that are identified by a zero payment or CMS ANSI code, as denied for a variety of reasons and uploads the account into our proprietary software, SwiftAppeals. The accounts are uploaded daily and assigned to an Appeals Specialist located at the RCMS Corporate Headquarters in Hollywood, Florida. Claims are evaluated by the Specialist to determine the appropriate account balance, audit the payment methodology, validate claims calculations and prepare the account for appeal. RCMS software, SwiftAppeals, has Third Party Payor Grievance Forms preloaded to expedite the appeals process. All appeals and grievance are filed by certified mail and the Specialist follow-up on the claims to ensure payment by the payor.

RCMS reviews and analyzes specific accounts identified by client as underpayment and overpayments to determine the appropriate reimbursement methodology is being utilized by client staff. RCMS staff access medical records and providers bills are compared to the actual record. Clinical documentation is reviewed by our coding staff and must be authorized by our Clinical Manager or Medical Director.



Once account has been reviewed and debt is determined RCMS loads the account into their system and files claim to provider until payment is received.

**Brad Curry, VISN 18 Implementation Manager**  
**Veterans Administration**  
Phoenix, Arizona  
(602) 212-2127  
[Bradley.curry@va.gov](mailto:Bradley.curry@va.gov)

Contracting Officer: **Pat Amidon**  
VISN 18  
650 E Indian School Road  
Phoenix, AZ 85012  
Telephone: 602-212-2163  
Fax: 602-212-2155 [Pat.Amidon@med.va.gov](mailto:Pat.Amidon@med.va.gov)

<u>Company/Agency Name</u>	Carl T. Hayden Veterans Administration
Address	650 E. Indian School Road, Phoenix, AZ 85012
Phone Number	602-212-2127
Fax Number	602-222-2686
Point of Contact for the Project	Brad Curry
Email Address of the Point of Contact	<a href="mailto:Bradley.curry@va.gov">Bradley.curry@va.gov</a>
Project Performance Period	October 2004 to Sept 2007 And Current Contract awarded 2008
Dollar Value of the Entire Project	\$4,000,000 (\$1 million annually)
Dollar Value of SIN-Relevant Work*	\$4,000,000



**Project Title:**

**Denial and Underpayment Management  
And Third Party Revenue Recovery  
Insurance Verification/Authorizations  
Pre-Registration**

**Linda Wilford, SVP & CFO**

**Holy Cross Hospital and Health Ministries**

4725 North Federal Highway  
Ft. Lauderdale, Florida 33308  
(954) 776-3012  
(954) 492-5741 fax  
[Linda.Wilford@holy-cross.com](mailto:Linda.Wilford@holy-cross.com)

Company/Agency Name	Holy Cross Hospital
Address	4725 N. Federal Highway Fort Lauderdale, FL 33308
Phone Number	954-776-3012
Fax Number	954-492-5741
Point of Contact for the Project	Linda Wilford
Email Address of the Point of Contact	<a href="mailto:Linda.wilford@holy-cross.com">Linda.wilford@holy-cross.com</a>
Project Performance Period	Oct 2000 to present
Dollar Value of the Entire Project	\$17,000,000 annually
Dollar Value of fees	\$900,000 annually fees

RCMS has been working with Holy Cross Hospital since 1999. Throughout our engagement RCMS has had a remarkable recovery rate of greater than 80% of net placements. Because of our expertise, Holy Cross Hospital has continued to renew our contract year after year and allow RCMS the opportunity to assist in many projects including payment analysis, contract adjustments, EOB analysis, Denial Management, Underpayment Recovery, Third Party Payor Collections and Front-End Patient Access Processes.



## **Other Engagements with Healthcare Facilities with similar focus and/or volume**

### **South Broward Hospital District**

Hollywood, Florida (5 hospitals, over 1,000 beds),

Annual revenue in excess of \$1 billion in Inpatient, Outpatient, and Primary care clinics

Initial Denial Ratio (1997): 18% of net managed care revenue

Recovered in excess of \$250 million over 5 years

*RCMS provided Appeals Unit (20 FTE's), Authorizations Unit (10-12 FTE's), Bad Debt Recovery Unit (10 FTE's), and Contract Compliance Director (1 Consultant)*

**Best Practice Denial Ratio (2001): 2.8% of net managed care revenue**

**John Benz, Chief Business Officer**

**Memorial Health Systems**

3501 Johnson Street

Hollywood, Florida 33021

(954) 987-2020 ext. 5027

[jbenz@mhs.net](mailto:jbenz@mhs.net)

### **St. Clares Hospital**

Schenectady, NY

Initial Program Date: 2005 thru present

*RCMS provided Interim Management of Revenue Cycle Director, Appeals Unit (5 FTE's), Bad Debt Recovery Unit (10 FTE's) and is now managing their entire AR inventory of \$20 million.*

**Best Practice Denial Ratio (2001): 2.8% of net managed care revenue**

**Ed Gasparovic, CFO**

**St. Clare's Hospital**

650 McCellon St.

Schenectady, NY 12304

[egasparovic@stclares.org](mailto:egasparovic@stclares.org)

[GasparovicE@EllisHospital.org](mailto:GasparovicE@EllisHospital.org)





## St. Peter's Health Care Services

2000 to current

Denial Management and Revenue Recovery of underpayments and denials.

**Linda Berner, Director of Patient Financial Services**

**St. Peter's Health Care Services**

315 South Manning Boulevard

Albany, New York 12208

(518) 525-1359

[lberner@stpetershealthcare.org](mailto:lberner@stpetershealthcare.org)

## St. Francis Hospital

2007 to current

Outsourced Appeals and Software Lease

**Doyle Spears, Director of Patient Financial Services**

**St. Francis Hospital**

2122 Manchester Expressway

Columbus, GA 31904

(706) 596-4132

[spearsD@sfhga.com](mailto:spearsD@sfhga.com)

## Naval Hospital Portsmouth

2009 to current

Outsourced Third Party Collections and Insurance Verification

**Marion E. Goodrich**

**DRM, Division Head Third Party Collections**

620 John Paul Jones Circle

Portsmouth VA 23708

Phone: (757) 953-5297

Fax: (757) 953-5489

[Marion.Goodrich@med.navy.mil](mailto:Marion.Goodrich@med.navy.mil)



# QUALITY ASSURANCE

RCMS' Compliance and Quality Assurance programs are managed and directed by Ms. Kelly Dominguez with oversight from Jeung-Won Hwang, RHIA and our Medical Director, Dr. Tejada. Ms. Dominguez is an active member of the Health Care Compliance Association, and is a certified HIPAA Professional.

All RCMS employees receive an employee handbook and are required to attend the following in-services:

- RCMS Code of Conduct
- Compliance and HIPAA Training
- Conflict Resolution
- Workplace Harassment
- Peak Performance

HIPAA/Security Training includes the following requirements in which our employees are required to attend on their initial employment, and required to attend on an annual basis:

- HIPAA's Portability Requirements
- HIPAA's Privacy Standards,
- HIPAA's Security Standards,
- Business Associates.

Our project managers, who head up individual client teams, are responsible for providing staff education and continue best practice auditing. Auditing practices include but are not limited to, documentation, coding, necessity, authorization, fraud and abuse.

In addition, each project manager is responsible to review daily imports and data exchange files to ensure that all information transmitted from our system to the clients host system and vice versa has successfully transmitted. Any errors are immediately corrected and/or reported to our information technology department.



# TECHNICAL CAPABILITY

## INFORMATIONS SYSTEMS, DATA SEGMENTATION AND WORK FLOW

RCMS software is currently uploading data from most mainframe systems and is currently receiving data from RCMS software on a daily basis.

RCMS utilizes two main programs to ensure all requirements and standards of the contract are met.

Our IT Department provides comprehensive technology services that include programming, software development, and server maintenance and systems security.

Each client is provided an individual database to secure and maintain the integrity of the information. This information is stored in our proprietary software components, namely "Swift Appeals, SwiftCollect, and SwiftAuth." Each user (Client and RCMS Employee) is required to sign a confidentiality form to ensure compliance. Remote access to each database is provided to our clients and offsite staff through a secured website with dual security log-in's. All transmittals from Client Host System to RCMS' System and from RCMS' System to its Client Host System are secured through the use of VPN – Virtual Private Network, and secured FTP.

RCMS' servers, routers and firewalls use a high encryption password to protect the integrity of our data and our clients' data. Protection measures are taken on our hardware through the use of antivirus software on all servers and computers. Our email exchange servers (Inbound and Outbound Email) are protected from many viruses and have spam filters for all incoming junk mail. All outbound email with attachments and potential patient information is automatically zipped and password protected through the use of security software.

RCMS utilizes a VPN connection with each of our clients to access their Accounts Receivable System, Contract Management System, and/or Document Imaging System when made available.

