



**RCM Cloud®** is the complete Software-as-a-Service (SaaS) version of Stockell Healthcare Systems' longstanding **InsightCS®** revenue cycle management solution. Acute Care Hospitals, Surgical Centers, Emergency Department Hospitals and Behavioral Healthcare providers, regardless of size, are able to significantly cut IT infrastructure and support costs, close functional gaps in processes, reduce costs to collect, maximize upfront self-pay collections, and provide better, more effective patient service. Hosted on the powerful, secure Microsoft Azure Cloud® platform, **RCM Cloud®** is available on a monthly subscription to eliminate the often exorbitant upfront costs associated with a typical in-house implementation.

**RCM Cloud®** features a full menu of solution options to choose from to manage key touch points in the revenue cycle including patient engagement, registration, scheduling, billing, collections, business analytics, and reporting. Every **RCM Cloud®** deployment includes complete, end-to-end IT and system support services addressed by Stockell Healthcare Systems' own team of IT and healthcare consulting professionals.

## PATIENT ACCOUNTING AND BILLING

**RCM Cloud® Patient Accounting and Billing** is an all-encompassing, fully integrated solution featuring intrinsically interwoven modules and no dependencies on bolt-ons. The solution leverages automation, analytics, and workflow to best position your organization to manage its revenue cycle and be productive and prosperous as a result.

### Denial Tracking

Captures and processes denial codes during the Electronic Remittance Advice (ERA) process. The captured denial messages are automatically passed to the **RCM Cloud® Collections** solution where the users can address and start the resolution process in a rapid and timely fashion. Also includes reporting to analyze patterns in denial codes.

### Contract Management

Enables users to concurrently and effectively manage and maintain existing Payer contracts. Based on reimbursement rules (DRGs, APCs, Fee based, Per Diem, Stop Loss, etc.), users can create models utilizing current patient data to evaluate prospective contracts. Calculates expected net revenues, provides daily information on contract deviations, and allows contractual allowances to be taken at billing time.

### Integrated Claims

Allows healthcare providers to replace the traditional "bill in one system, correct claims in another system" approach with a single solution featuring a fully automated, workflow-driven process. Many tasks are resolved upfront with integrated, automated claims scrubbing. Payer acknowledgements are fully integrated, therefore the collections cycle doesn't begin until the claim has been received.

### Universal Billing

Complete Inpatient (UB04) and Outpatient (1500) billing. Also includes bar code charge entry, bill hold capability, interim billing, group/institutional billing; application of payments and adjustments to different billing periods as necessary; and full support of all standard ICD-9, ICD-10, and HCPCS codes.

### Patient Payment Portal

Allows the patient to make payments on multiple accounts with a single login. Patients can elect to pay now or easily schedule a payment for a date in the future. The patient has access to online statements via the portal to show current balances and previous payments made. Multiple forms of payment methods are supported (Credit, Debit, and E-Check).

### Insurance Follow-Up and Payments

Expedites the collection process, which in turn increases the payments to be collected. Users can quickly identify accounts that need follow-up, and the solution features complete Denial Tracking. Other key components include capture of detail CAS Reason codes, audit trails, user-defined collection workflows, collector activity schedules, exception reporting, and bad debt analysis and actions.

### Business Intelligence

Features a full array of leading edge dashboards, scorecards and output from catalogs of relevant reports that allow key decision makers at healthcare organizations to easily and effectively analyze and act upon crucial patient service and financial data

## PATIENT ACCESS

**RCM Cloud<sup>®</sup> Patient Access** is comprised of multiple outward facing software components that impact patient engagement. Focus on allowing the patient to participate is of utmost importance. Our goal is to empower the patient and/or patient representative. Plus, unlike the “implied” integration of bolt-on products, **RCM Cloud<sup>®</sup> Patient Access** is comprised of a set of integral software modules that improve the patient experience and keeps them fully engaged when the need arises.

### Real-Time Eligibility Checking

Provides a truly user-friendly, fully integrated solution to automate the process of verifying Payer coverage on a real-time basis at the time of patient scheduling and/or registration via the usage of e-commerce transactions. This valuable tool is paramount for organizations to validate financial accountability early in the patient information gathering process.

### Patient Bill Estimator

Calculates estimates based on multiple segments of data that includes; pricing from the charge master, payer contract rules and eligibility and/or deductible information. This excellent tool allows the provider to proactively determine a realistic estimate. This feature establishes a path to setting up the method of payment for the patient’s portion of the anticipated visit/procedure(s).

### Enterprise Registration and ADT

Accommodates all inpatient and outpatient services that your organization facilitates. The solution truly supports an Enterprise setting as it addresses multi-location requirements, is extremely scalable, and is real-time. Census Management provides for real-time statistics and bi-directional HL7 transaction processing. Registration tools are fully accessible by Enterprise Scheduling and other modules.

### Patient and Resource Scheduling

Features a unique drag-n-drop user interface and serves as the “central coordinator” for patients and resources to promote effective and timely scheduling across the enterprise. All information is shared among multiple locations including clinics, ancillary locations, and other caregiver facilities. Availability times and rules exist at the department, procedure/test, appointment, and resource levels.

### Medical Necessity Checking and ABN

Provides a “financial gatekeeper” solution that performs a real-time check during registration or scheduling for compliance of the diagnosis and procedure or test being requested by the clinician. The electronic ABN form, after signed by the patient or representative, can be stored with the patient’s account. Fully supports all applicable medical necessity rules and conflict checking.

### Point-of-Service (POS)

Includes the ability to process patient/guarantor payments via credit cards and checks real time. It is a streamlined process, complete with options for receipt generation. Additionally, patients want to know their cost of a service upfront when all possible. Having the ability to do POS contributes to maximizing upfront fee collections.

### Document Management

Includes the ability to scan documents and capture signatures and annotations on pre-defined forms. Supports the ability to import an unlimited number of documents and various types of images (driver’s license, insurance card, ID card, pictorial image) and attach to a patient’s record.

### Forms Generation

Delivers the ability to produce an electronic form and submit and/or make available to the patient or patient representative. Forms can be electronically signed and annotated as necessary and also can be attached to the patient record.

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## About Stockell Healthcare Systems

Stockell Healthcare Systems has been providing exceptional revenue cycle management software solutions and services to hospitals, behavioral healthcare providers, and healthcare delivery networks since 1984.

Today, Stockell Healthcare Systems solutions and services are in use by a wide range of clients across the United States and abroad.