



What Revenue Integrity Is and What It Is NOT!

To many "revenue integrity" is new, its catchy, it's what is hot in healthcare revenue cycle, audit and compliance. "I WANT IT! But what is it?" Really it can depend on who and when you ask.

Revenue integrity has been around and likely you have some piece of it in your organization. You may not have a formal program, department or initiative, but it's there - somewhere. Culture, values, scope and volume of services, available resources and even technology are all considerations in defining what revenue integrity is in your organization. The answers are not found in a book, a software program or a handout from a presentation.

What I can tell you is that revenue integrity is the focus on processes to prevent revenue loss and/or scrutiny from external sources (think OIG - Yikes!). So how do you achieve revenue integrity?

You define what, how and when you will measure, who will oversee and where the results will be reported. It must be meaningful to your organization. It's great to report data, but what do you do with it? And that is where I see many fall short.

What revenue integrity IS NOT is having someone work the same issues every day or analyzing and benchmarking issues without a direction to improve. This is not a time to be reactive, but proactive. Revenue integrity

should be structured, informative and affect change.

There is not a best practice, but what I call "better practices" out there. Those better practices have formal programs, led by dedicated management, have dedicated staff, have a formal annual work plan, maintain flexibility from the work plan to address unforeseen issues, report in some means to the Board and interact regularly with stakeholders within the revenue cycle from Registration through to Denials Management.

Revenue integrity becomes part of the organization's culture, it (the Program) and its staff are visible and accessible, and your management can sleep better at night.

