PULLING HEALTH AGENCIES
out of a
DOCUMENT PIT

StateScoop Report

Advances in automation are helping public healthcare organizations tackle mountains of backlog claims, reduce waste and protect from fraud in the process.

Since the COVID-19 pandemic hit the U.S., millions of Americans have lost their jobs along with medical benefits, prompting a surge in public healthcare demands. That's continuing to put unprecedented pressure on state and local government health services as well as claims processing.

The Coronavirus Relief Fund — or CARES Act — established a $150 billion reserve for state, local and tribal governments. This was set up in part to pay for testing and treating the uninsured, and to reimburse doctors and service providers for COVID-19 Medicaid claims. But it also created payment channels different from normal daily claims, which put a strain on existing systems.

Burdened with legacy systems, changing coding requirements, and overwhelming demand, administrative staff struggle to keep up with the backlog of claims — and organizations can't hire and train people fast enough to manage the increased workload.

"That caused Medicaid and Medicare claims to be disrupted, and to the outside world it looked like the money was not there," says Anna Twomey, Senior Solutions Advisor and Healthcare Solutions Architect for Blue Prism. That's one reason "why leaders are turning to robotic process automation — or RPA — tools."

RPA can go a long way in helping public health agencies deploy a field-ready digital worker through rapid automation of manual rules-based, back-office administrative processes.

"Right now, Blue Prism's RPA software platform is fully embedded in about 10 states, including New York, California, Georgia, and Texas," says Twomey, who describes the tool as a solution to bring agility to business operations, while lowering costs and improving accuracy.

"Everything is slower in the public sector, so where would you need speed and accuracy more than in government?" she suggests. Public health agencies stand to benefit from RPA to automate a number of repetitive tasks currently straining their organizations.

RPA augments — rather than replaces — the workforce

Twomey says the fear of the unknown and concerns about security are two common reasons leaders hesitate to move forward with automation projects.

"There is a fear of job replacement or outsourcing your work. But the reality is that RPA software augments your current workforce," says Twomey. The ability to automate the processing of thousands of claims and other documents greatly reduces the burden of redundant work from staff, she says. And it gets money back more quickly to patients, doctors, clinics and hospitals who need it.

Automation, she explains, also helps the organization find loopholes in processes to better streamline workflows.

"You see people interacting with what you thought was a well thought out process, but instead there are gaps in places that cause waste, loss or fraud. That is one area RPA can be used to mitigate risk," explains Twomey.

However, having automated work routines running in the background can raise concerns around security of data and networks for some. Twomey acknowledges leaders who are unfamiliar with more state-of-the-art tools are fearful that RPA tools could be running on other

systems they are not supposed to. She counters that security controls for Blue Prism prevent that because it runs in a contained environment.

"Automation runs without any kind of malice because bots are not going to do anything that we haven't programmed them to do — and organizations have full audit capability on them," she says. "The product itself was borne out of financial services, which has to be one of the most secure sectors. That is why Blue Prism developed stop gaps and checkpoints all through the technology."

What leaders need to see are use cases that show the advantages of automation and the ease of integrating them into their system. Twomey jokingly refers to this as a "show-and-tell" technology integration.

Improving claims processing

RPA delivers two great advantages over more traditional computerized workflows. First is the speed with which the organization can get to or disseminate information; and second, the ability to capture information accurately in order to shed light on fraudulent activity or waste.

But it also helps organizations facing high volumes of work. Unfortunately, with employees' time spread out on multiple tasks, there never seems to be enough time to process the work piling up on their desks.

"The claims management process in particular creates a lot of backlog, and Blue Prism's platform is designed to take action on work that needs to be done," explains Josh Painter, RPA Consultant with Bits In Glass, a Blue Prism partner integrator. "These backlogs can be cleared when Blue Prism's automation platform takes an action on a document to move it into a system for verification, processing or reimbursement submission. It's a simple way to make a big impact on the business."

During the pandemic, when claims started to be rejected or denied because of coding errors, backlogs quickly became unsurmountable. This prevented doctors from being compensated and required patients to pay out-of-pocket, and later submit handwritten forms to Medicaid for reimbursement.

However, a digital worker can assist human staff in a number of ways, such as flagging improperly coded claims, verifying patient enrollment status and benefits, or scanning forms and submitting claims to proper payment channels.

To ensure RPA operates seamlessly within the system, Blue Prism and Bits In Glass partnered with Red Hat — a leading provider of open source software.

Red Hat produced a connected health solution which completes the data transformation for reliable and automated reimbursement. This further ensures interoperability of RPA tools, helps decrease submission errors and extends the reach of RPA workers.

The solution was built upon Red Hat's OpenShift, a powerful integration tool for near real-time data streaming, API management and enterprise integration patterns — and follows the final rules of the Centers for Medicare and Medicaid and the Office of the National Coordinator for Health Information.

Cutting down on no shows and reducing waste

Beyond the urgency of today's crisis, other problems of waste continue to plague the healthcare industry. Appointment no-shows, for instance, costs the U.S. healthcare industry $150 billion annually, according to one study.

Reducing missed appointments becomes critical to streamlining costs. Doctors need to ensure they are meeting a certain level of care, and every appointment time is valuable. If one patient is unable to come, another patient can take that spot. Hospitals and clinics have begun using RPA for tasks like notifying patients they are confirmed for appointments, sending appointment confirmation, or reminders about insurance information and copay. All these tasks are within the realm of an RPA digital worker.

According to Twomey, "when Blue Prism implemented this tool at one NHS hospital in the United Kingdom, they brought down no-shows to under 2% — which is almost never heard of in the healthcare industry. They were able to save well over $1.5 million in the first year of implementation."

She adds that it's not just about patient care; rather it's also about optimizing the healthcare lifecycle as a whole.

Preventative care and predictive modeling

Harnessing data, automation, and AI together can go a long way to ensure the health of patients with preventative care to treat illnesses early. Twomey shares an example from the U.K. in breast cancer research, where one facility developed an automated tool to help physicians predict whether or not a patient needed to be tested or to have extra services provided at an early stage of the cancer.
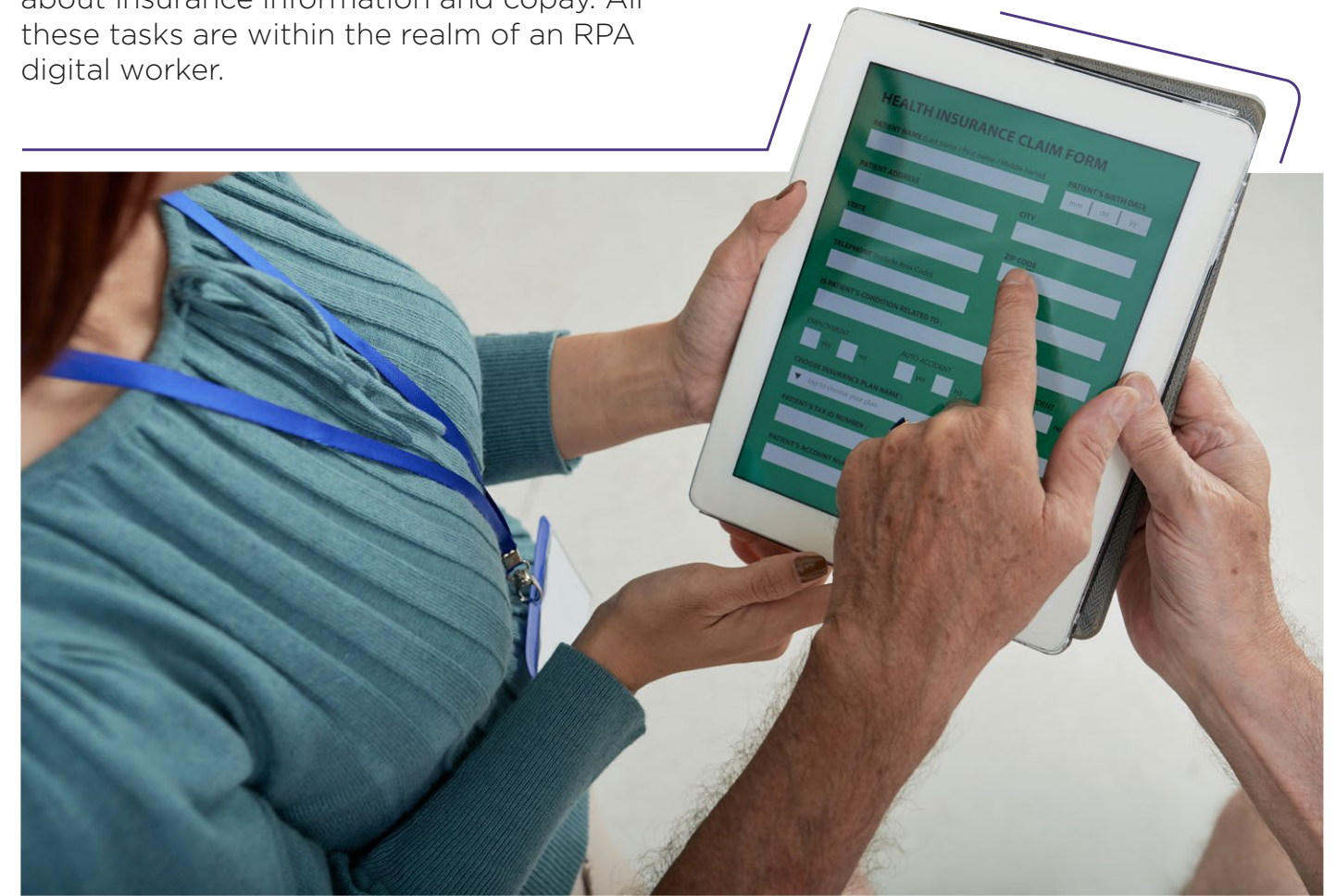
"Digital workers can look at images and 'see' 100 times faster and better than the human eye. After scanning through so many different visualizations, they can quickly pinpoint anomalies and alert healthcare providers," she explains.

According to Twomey, this same technology is being adopted and tested by Health and Human Services. They are studying imaging of the heart and lungs to understand the possible side effects of the COVID-19 virus and find any anomalies that may affect patients moving forward.

Recommendations to get started

Twomey and Painter say that leaders who want to move forward with tools — but have questions or doubts — should request a demonstration. During a demo, Blue Prism and Red Hat can show the value of automation on a specific problem in terms of number of work hours saved and errors solved.

Demonstration pilots go a long way in showing the potential return on investment of RPA and help build awareness that carry over to other projects, Painter says. Then, from an implementation standpoint, it's up to the client to guide how to deploy it. The tool is customizable and can be deployed on any cloud, hybrid, or on-premise environment.

"Blue Prism even has a SaaS model called Blue Prism Cloud which is the whole system as-a-service. So, agencies can choose to have Blue Prism set up the automation in the cloud and manage it, but the organization ultimately comes up with processes and solutions," Painter says.

The platform is equipped with AI that runs algorithms along with the automation. This allows the tool to associate gaps in care or process and suggest solutions to mitigate those gaps.

"What will happen is that as the organization runs the RPA tool the first few times, they will see some initial errors," explains Twomey. "Then in a short time the process smooths out because it will start to figure out the behavior of how it should operate and what it should expect. I'm impressed with the AI capabilities of the application itself in that it has been instrumental to finding particular areas of loss."

Blue Prism and Red Hat solutions are product-ready in less than five business days with unlimited scalability, unmatched security and an audit trail for full compliance, according to Twomey.

Working with a system integrator

Fully integrating a secure, automated workflow solution ultimately helps health agencies work faster and more efficiently. But focusing on where to start automating and streamlining processes may initially be a challenge. That is why Twomey and Painter recommend working with a system integrator to focus on process rules unique to the organization.

Bits In Glass works with organizations to customize RPA tools, implement them appropriately, and be able to use the software as efficiently as possible, Painter says.

"Having an implementation partner is key to get those first wins and help the rest of the organization envision how to use RPA in other workflow areas. We also train internal staff to ensure the organization has the skills they need to make the tool a success," he says.

Learn more about the fully integrated, secure and automated claims processing solution to help patients and providers execute faster claims.

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> *Josh Painter, Bits In Glass*

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