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T. T. Mitchell Consulting

Changing Attitudes and Perceptions for Unlimited Growth

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Issue 15

I am pleased to announce the availability of **The Mitchell Management Training Program**, a 5-part training course for new managers or managers looking to improve their skills in working with others. You can see more information on the training program by clicking on [this link](#). It can be purchased as a complete package or as a course.

Ten Things To Kick Start the New Year

It's a new year, and it's time to look at all the "clutter" that's patient accounting and clean some of it up. Though these are the types of thing that should probably occur throughout the year, most people either don't have the time or the reason for making some steps towards changing for positive results. The beginning of a new year is a great time to consider making some changes, or sharpening some things, in order to be more effective and efficient as time goes on. Below are ten things to look at to begin the new year.

1. A true look at receivables. If you're a typical patient accounting director, office manager, or whatever your title is, you probably look at the total receivables and days in receivables on a regular basis. That's not such a bad thing. However, every once in awhile you have to decide to take a look at more than that. You need to break some numbers down, concentrate on specific areas, and come up with ways to try to either increase your cash, reduce your overall AR, or make sure to maintain your current levels.

First step is to look at your receivables by age. If you have more than 30% of your receivables aged more than 90 days, you have some great opportunities to either increase cash or reduce your receivables. Look at the aging categories, as well as the number of accounts in those categories. Is it only a few accounts you need someone to take a look at, or is it a lot of accounts that need some serious attention? If it's inpatient accounts, a high dollar

amount can skew everything negatively; high dollar accounts should always be attended to often.

Second step is to look at the aged categories by insurance. There are some things that are pretty standard; if you're looking at your 0 to 60 days, the overwhelming majority of your balances are primary accounts. But near the end of that 60 days, and heading into other categories, are you sure that all accounts that are ready to be billed secondary have had their financial classes changed? Have all allowances been properly posted to reflect correct account amounts? When you look at older accounts individually, do you see a lot of similar amounts which could indicate co-pays, which means accounts haven't changed to self pay status? In your over 360 days accounts, are there maybe one or two accounts that are not only old, but of low dollar amount, that you could decide aren't worth anyone wasting time on anymore?

2. Reevaluate the work load. The new year is as good a time as any to take a step back to look at whether your workload is evenly distributed. Do your Medicare people have too much work to do, if you're under a team concept? If you're alpha-split, are the numbers still relatively even for each billing person? On this second one, if you've been tracking each individual person and one has either outdone everyone else or one is bringing down the entire team, you may need to keep that in mind when reviewing the figures. But the idea that you're punishing a good worker by giving them more work than someone else gets thrown out the window if your main concern is equality and balance; it also means you need to determine whether your slow person needs to learn more on how to do their work or if their consistency and accuracy determines that they just may always need help with the volume of their accounts.

3. Set your department goals for the year. Although any time is a good time, the new year is a great time to look at where you are, determine where you want to be, and how you hope to get there. Do you want to reduce receivables by 10%; reduce days by 10; increase cash by \$1 million? Do you want to reduce the number of overall accounts? Do you want to set training schedules for your billing and, if they report to you, registration departments?

4. Have a state of the department meeting. This kind of thing works for presidents, governors, and CEOs of major corporations; why not adopt the same thing? Set up either one big meeting, or a couple of major meetings if you need to, and tell everyone what's going on within the department. Information is always the key to better performance, and if your staff doesn't know what the ultimate goals are, then they don't know whether they're contributing or not.

5. Do a quick review of your allowance, adjustment, and contractual codes in the computer system. If you have an active IS department, or whether you're working on a personal PC within a smaller system, there are always changes within a computer system that you don't know about. I remember a situation some time ago when I was still working in a hospital where I looked at a report and wondered why my self pay balances and the contractual codes that showed the amount that was being changed to self pay from other insurance types weren't close to matching up. A review of this issue discovered that the accounting department had made a change early in the year on the general ledger, and had inadvertently changed the reporting department to one that didn't exist. Literally, amounts were being lost. Little things like that could impair your ability to make decisions and explain issues.

6. Look at your "infrastructure" and determine if anything needs to move or be stored differently. How do you store your insurance vouchers? How does your filing system work, if you're not paperless? Is the copier in an area that's not only easily accessible by everyone who might need to use it, but where the noise doesn't disturb others? Have you set your phone system up so that the proper people are getting the calls they're supposed to get? Are all the desks set up for proper comfort, and have they been ergonomically evaluated to reduce stress on your employees physical state? Does everyone have easy access to cash receipts and mail? Everyone already has something in place; is it in place because it's the most efficient way things should be, or is it there because it's always been there, and no one has wanted to take the time to make some changes?

7. If you're running the team concept, do you have the proper people working with each other, on the correct insurance types? Sometimes people need new challenges, or may need to be moved to help solve other problems. You don't move people just for the sake of moving them, but maybe you have a need. For instance, if you have someone who's a very fast and efficient worker, maybe they need to be on a team that, by its nature, has more claims to work on. Maybe you have someone who seems to be a great communicator that you want to put on the team that has to deal with the most patient calls.

8. Take a look at your policies and procedures manuals. I don't just mean the ones that describe how people are supposed to do things within the department, but all of them. Do you have all of your procedure manuals together, and if not why not? Does every person in your department know where the disaster drill manual is? Does everyone know where hospital policy manuals are? Are there any departmental policies that are outdated, either by regulation or a change in computer systems? If you're near the border of another country, have you updated the currency rates? Are there any new procedures that you've forgotten to address?

9. Think about whether you need to have training for any of your staff during the year, what type, and how you might accomplish it. This is one of two things that most people who do what we do don't think of all that often, but they should. Just like every other profession, nothing stays stagnant forever. Each year there is at least one change in every insurance type of some kind. Whether you've got a department full of veterans or one full of relatively new personnel, training should always be taken into account and planned for. It's better to over teach someone than rely on their just knowing it.

10. Think about ways to motivate your employees to give their best during the coming year. This is the second thing most people don't think of. Everyone needs motivation. Some people are good at motivating themselves, whereas others need constant outside impetus. There's never anything wrong with priming the pump of positive thinking. People who contribute, people who feel as though they're making a difference, people who feel as though their work is appreciated, always work better. What will you do this year? Could the change be as simple as learning how to compliment people on good work, whether that work is consistent or not? Could the change be rewards for targeted goals? Could the change be more elaborate, such as scheduled monthly, bi-monthly, or quarterly departmental events during working hours? It could be almost anything; it needs to be something.

Of course, after you're done looking at my list, you may come up with other things you may want to add. That's a good thing. This list isn't supposed to be the only things you need to do. It's a good start; I hope I've inspired you to look at ways to be creative when it comes to doing the job you do. No one succeeds quite as much as an innovator; this is your chance to start anew.

I am pleased to announce the availability of my first book on management and leadership, titled **The Mitchell Principles of Management**. It is a must for those managers who are looking for direct guidance in working with today's employees and co-workers, written in a conversational manner. You can see more information on the book by clicking on [this link](#). It can be purchased as an ebook directly off the page or arrangements can be made to receive a hard copy of the book in a spiral bound format by contacting me from the same page listed above.

T. T. Mitchell Consulting is dedicated to helping healthcare entities improve their financial base as it concerns receivables and revenue issues, including registration, billing, collections. Efforts are concentrated on the entire revenue process. T. T. Mitchell Consulting is also dedicated to helping facilities produce more effective employees. Concentration there is management and leadership, diversity and harassment issues, employee relations and customer service education, and group or individual coaching and counseling sessions are available. Offered are short term and long term programs, as well as group or individual coaching/mentoring programs to help all employees of an organization learn to work better with each other in an ever changing and diverse world. If you would like to view services provided by T. T. Mitchell Consulting please go to the website for more information: <http://www.ttmitchellconsulting.com>.

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