

Customer Spotlight

Navigating enrollment requirements of a group merger



About the Customer

Tennessee Orthopaedic Clinics offers comprehensive medical and surgical treatment of bone, joint and soft tissue disorders. Operating in 32 locations between three organizations with 350 total providers.



Overview

Tennessee Orthopaedic Clinics (TOC), a division of the Tennessee Orthopaedic Alliance, offers comprehensive medical and surgical treatments of bone, joint and soft tissue disorders. With over 20 years of service, they are committed to providing compassionate, specialized, and prompt treatment to all they serve.

Before TOC merged and became a part of the Tennessee Orthopaedic Alliance, the organization had nine locations serving Knoxville, Lenoir City, Oak Ridge, Sevierville, and surrounding communities and credentialed 80 Physical Therapy, MRI & CT, and Quick Care Ortho providers.

TOC was looking to partner with like-minded organizations to foster better patient care. The desire was to share best practices, technological improvements, and clinical outcome data. After rigorous research, TOC merged with two other organizations, Tennessee Orthopaedic Alliance and Mid-Tennessee Bone & Joint Clinic (MTB&J). The partnership increased their area of service tremendously.



Key Challenges

The three merging organizations needed to find a way to get all their providers loaded onto the same contracts, under the same Tax ID, without interfering with patient care.

Non-Centralized Credentialing

Once merged, all three organizations had their own scheduling, pre-certification, Verification of Identity (VOI), credentialing, billing, and accounts receivable departments. Although they were merged and working together, they had three different stories for every facet of business.

Mismatched Processes

While TOC had been utilizing an electronic platform for credentialing since 2014, one practice they merged with was on a different platform, and the other was still using a paper process. They needed to converge.

Troublesome Claims

Because contract loads were all in varying levels of completion, this meant some claims went through, others were held, and the rest were denied. In other cases, payers kept requesting that claims be resubmitted again and again. This inefficiency needed to be tackled.

“We were drawn to a solution like CredentialMyDoc because we wanted to avoid unnecessary errors, inefficient communication, and wasted time. We wanted a system that gave all three divisions access to the same information in real-time.”

Kristy Parker, Senior Director of Communications and Business Development, Tennessee Orthopaedic Clinics



Solution Selection Process

TOC knew that for all three divisions to work seamlessly together, they needed a platform that would empower them to work better as a team. Six months into the merger, the three divisions decided to centralize their processes. They chose CredentialMyDoc™ for its:

Centralized Data and Documents

Store, protect, and share information and documents for providers, locations, and Tax IDs.

Electronic Onboarding App and Provider Portal

Interface with providers through a secure provider portal to exchange information and forms with DocuSign technology.

Auto-Populate Forms and Applications

Rapidly complete applications utilizing a library of 7,000+ preformatted payer and facility applications.

Workflow Tools

Use pre-defined tasks to create repeatable templates for workflow, email responses, and other standardized content to reduce manual entry.

Expirables Management

Receive weekly reminders to track expirations in a timely fashion.

Custom and Canned Reports

Utilize dozens of pre-built and custom reports.



Implementation Tips

Centralizing all three divisions onto CredentialMyDoc was a large undertaking itself, and through the process, TOC gathered some takeaways and advice to give others who may be going through a similar undertaking.



Major Takeaways

- Build a team committed to the implementation.
- Start early and gather all information in one place to facilitate and expedite data transfer.
- Build and/or review every provider so that files are complete for implementation.
- Define who is handling what aspect of the process, to ensure accountability during all steps of the implementation.
- Have a system in place to receive and keep up with requests to prevent any errors down the line.



Results

Single Source of Truth

Once all three organizations were on CredentialMyDoc, they were all finally speaking the same language. One credentialing department was in charge of all their credentialing needs, eliminating duplicative work, communication barriers, and inefficiencies.

Building Rosters

Faster, cleaner, accurate, and streamlined rosters.



Pre-Populated Forms

Pre-populated applications expedite the enrollment process by reducing errors, eliminating duplicate data entry, and lessening the time spent searching for information.

Faster Processing

With CredentialMyDoc in place, TOC spent less time on data entry, data management, and manually retrieving verifications.

“We’ve got a great team here at TOC, a dedicated team who works hard every day. CredentialMyDoc is an excellent companion to their exceptional efforts.”

Kristy Parker; *Senior Director of Communications and Business Development, Tennessee Orthopaedic Clinics*



Looking Ahead

With a centralized system in place, TOC can focus on continuing to grow without negatively impacting the level of care they provide.

Get Started Today!

healthstream.com/contact | 615.301.3100



HealthStream®

S-20142-0723