BRUNDAGE GROUP
CONCURRENT ANALYTICS

POWERED BY CERTUS BEACON

Brundage Group
EXCELLENCE IN REVENUE CYCLE

PHYSICIAN ADVISOR

UTILIZATION

DENIALS

QUALITY

CDI

PHYSICIAN ADVISOR PROGRAMS

DATA-DRIVEN DECISIONS

Our Physician Advisor dashboard gives a real-time snapshot of active cases to identify areas for improvement and opportunities for targeted physician education. Our analytics provide a benchmark to hold physician advisor programs as well as clinical physicians accountable to key performance indicators (KPI).

- Active length of stay of inpatient and observation patients
- Observation to inpatient conversion rates by physician and payor
- Observation length of stay in hourly increments, by payor, physician and diagnosis
- Case mix index (CMI) details by provider, payor class and type

PHYSICIAN-LED SERVICES

Our physician advisors break down departmental silos and enforce clinical documentation integrity across the organization in quality, utilization, denials and CDI.

- Customizable programs to meet your hospital's needs with on-site, remote or hybrid models
- Buy-in from physician peers to create immediate workflow improvements
- Thrive in a value-based care environment to achieve:
  - o Compliance
  - o Fiscal health
  - o Positive public perception

CLIENT SUCCESSES

11% NET INCREASE IN GLOBAL INPATIENT RATIO
THROUGH COMPLIANT LEVEL OF CARE ASSIGNMENT WITH PROPER MEDICAL NECESSITY DOCUMENTATION

$1.5 MILLION MONTHLY
IN NET REVENUE CONTRIBUTION

Learn more about our Physician Advisor programs.

UTILIZATION

DATA-DRIVEN DECISIONS

Use our data-driven metrics to identify and assign compliant level of care and prevent denials before they occur. Certus Beacon provides in-depth analysis and reporting including:
- Physician benchmarking among peers by admits, revenue, length of stay and other KPI metrics
- Level of care breakdown by diagnosis, physician, physician group and payor

PHYSICIAN-LED SERVICES

Our physician advisors act as liaisons between your case management department and attending physicians to render medically sound opinions on utilization of resources.
- Medical necessity and documentation education with every level of care determination
- Gap coverage on nights and weekends with a 60-minute average turnaround
- Concurrent, retrospective and extended stay reviews

CLIENT SUCCESSES

OVERALL REDUCTION OF OBSERVATION HOURS BY 36%

Learn more about our Utilization services.

DENIALS

DATA-DRIVEN DECISIONS

Flag potential payor denials and alert physician advisors to compliance issues in real time thus preventing denials before they occur.
- Identify compliance issues in real time to optimize intervention strategies
- Monitor payor denial patterns and formulate mitigation strategies
- View denials by diagnosis, payor and provider

PHYSICIAN-LED SERVICES

Whether you need full outsourcing or as-needed assistance, we partner with you to fight the toughest medical necessity and clinical validation (DRG) denials.
- Experts in denials resolution and payor contract negotiations
- Recoup reimbursement through peer-to-peer and commercial insurance denials appeals support

CLIENT SUCCESSES

85% REVERSAL RATE
ON PEER TO PEER REVIEWS

$9 RETURNED FOR EVERY $1 SPENT
WITH PHYSICIAN SUPPORTED APPEALS

Learn more about our Denials services.

QUALITY

DATA-DRIVEN DECISIONS

Use data-driven benchmarking to optimize risk profiles and identify potential complications prior to final bill submission.

- HAC and PSI clinically supported exclusions captured through physician advisor support
- Data analysis to identify and target opportunities with greatest impact on quality scores

PHYSICIAN-LED SERVICES

Each year hospitals face up to a 6% penalty and a 2% bonus from CMS quality programs. Optimize quality metrics and positively impact revenue through physician education to support documentation showing the quality of care provided. Data-driven analysis is augmented by targeted education that includes:

- Patient Safety Indicators (PSI)
- Hospital Acquired Conditions (HAC)
- Severity of Illness (SOI) capture
- Risk of Mortality (ROM) capture
- Observed to Expected (O/E) risk optimization

Get credit for the high-quality care you provide!

CLIENT SUCCESSES

OPTIMIZED MORTALITY O/E FROM
1.6 to 0.6
OVER A ONE-YEAR CLIENT ENGAGEMENT

Learn more about our Quality services.

CDI

DATA-DRIVEN DECISIONS

Powerful analytical insights enable you to survive and thrive in the pay-for-performance era.
- View activity by system, facility and provider level
- Optimize risk adjustment and ensure appropriate reimbursement
- Identify opportunities for targeted CDI education

PHYSICIAN-LED SERVICES

Brundage Group developed the unique industry approach to provide comprehensive clinical documentation education that spans the entire revenue cycle.
- Quality
- Utilization
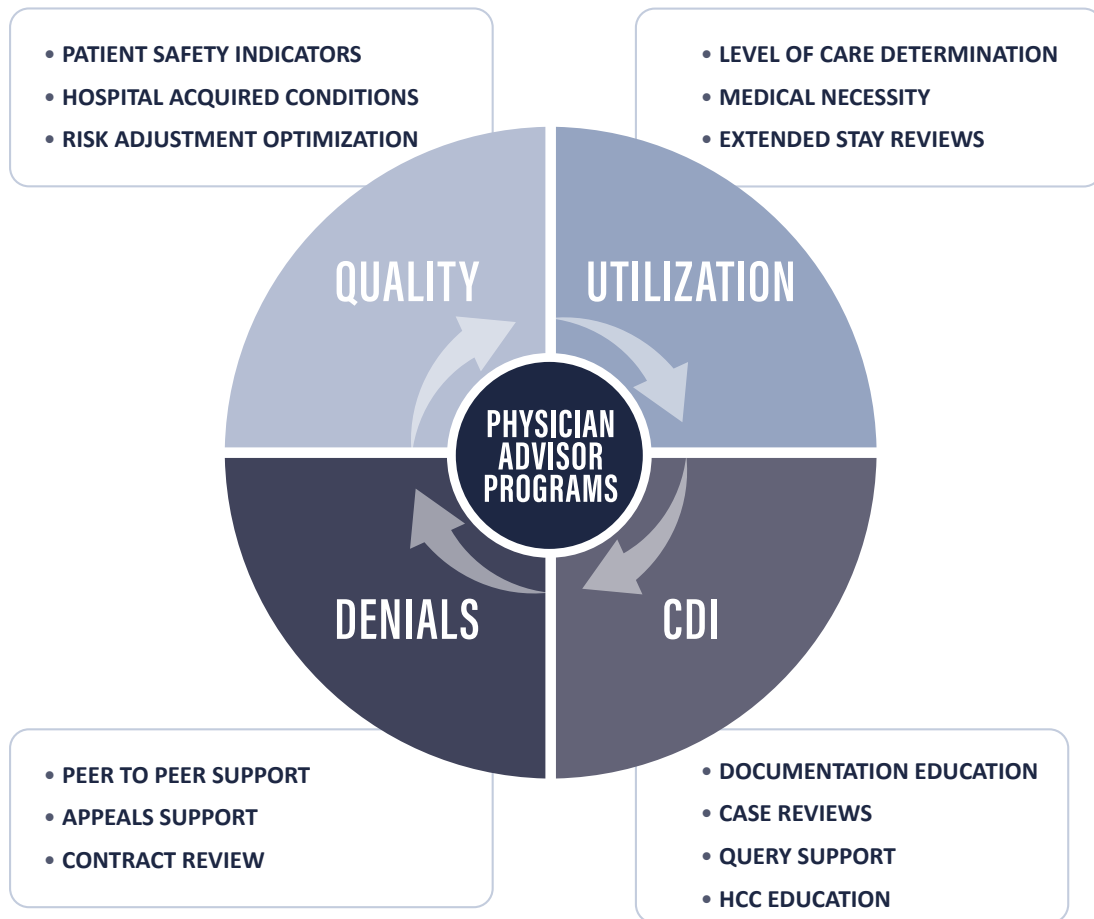- Denials
- CDI

CLIENT SUCCESSES

INCREASED CMI BY 0.1-0.2

INCREASED CC/MCC CAPTURE BY 10%

2 OUT OF 3 UNANSWERED QUERIES RESPONDED TO
WITH PHYSICIAN ADVISOR INTERVENTION

BREAKING DOWN SILOS

REVENUE CYCLE MANAGEMENT SERVICES

- PATIENT SAFETY INDICATORS
- HOSPITAL ACQUIRED CONDITIONS
- RISK ADJUSTMENT OPTIMIZATION

- LEVEL OF CARE DETERMINATION
- MEDICAL NECESSITY
- EXTENDED STAY REVIEWS

QUALITY

UTILIZATION

PHYSICIAN ADVISOR PROGRAMS

DENIALS

CDI

- PEER TO PEER SUPPORT
- APPEALS SUPPORT
- CONTRACT REVIEW

- DOCUMENTATION EDUCATION
- CASE REVIEWS
- QUERY SUPPORT
- HCC EDUCATION

UNIFICATION OF CLINICAL DOCUMENTATION

Brundage Group
EXCELLENCE IN REVENUE CYCLE

BRUNDAGEGROUP.COM | 727.256.3907 | INFO@BRUNDAGEGROUP.COM
Learn more about our Physician Advisor programs.

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