

Maximize Reimbursement, Minimize Risk

## with End-to-End RCM Assessment & Optimization for FOHCs

CPa Medical Billing (A GeBBS Healthcare Company) offers a tailored Revenue Cycle Optimization engagement designed to improve the financial and operational health of Federally Qualified Health Centers (FQHCs). In just 4-6 weeks, our experts deliver a comprehensive assessment of your end-to-end RCM ecosystem—identifying key opportunities to enhance revenue, reduce denials, and align with FQHC-specific compliance and reimbursement models.



## **Our Deep-Dive Assessment Covers Seven Critical RCM Areas:**

- Patient Access & Front-End Processes: Eligibility verification, insurance capture, sliding fee scale application, scheduling and registration workflows
- Charge Capture & Documentation: Provider audits, EMR charge integrity, encounter form evaluation
- Coding & Billing: CPT/HCPCS/ICD-10 coding accuracy, coding turnaround time, and denial trends
- Claims & AR Management: Submission timeliness, clearinghouse issues, primary/secondary claims follow-up

Collections & Self-Pay: A/R aging analysis, self-pay and sliding fee collections, and third-party payer efficiency

Denials & Compliance: Root cause denial analysis, underpayment tracking, HRSA/CMS/UDS compliance

**Technology Optimization:** System utilization (eClinicalWorks, Epic, NextGen, Athena, etc.), EDI and clearinghouse, KPI dashboards and workflow automation

## **Deliverables You Can Act On:**

- Comprehensive RCM Assessment Report Key findings, financial benchmarks, and leakage diagnostics
- Opportunities for Improvement Plan Strategic short- and long-term fixes with ROI projections
- Optional Phase II Support Execution of recommended changes, project management, or interim leadership
- Prioritized Roadmap Step-by-step implementation plan for workflows, tech, and training







