

CASE STUDY

# DIAGNOSTIC LAB



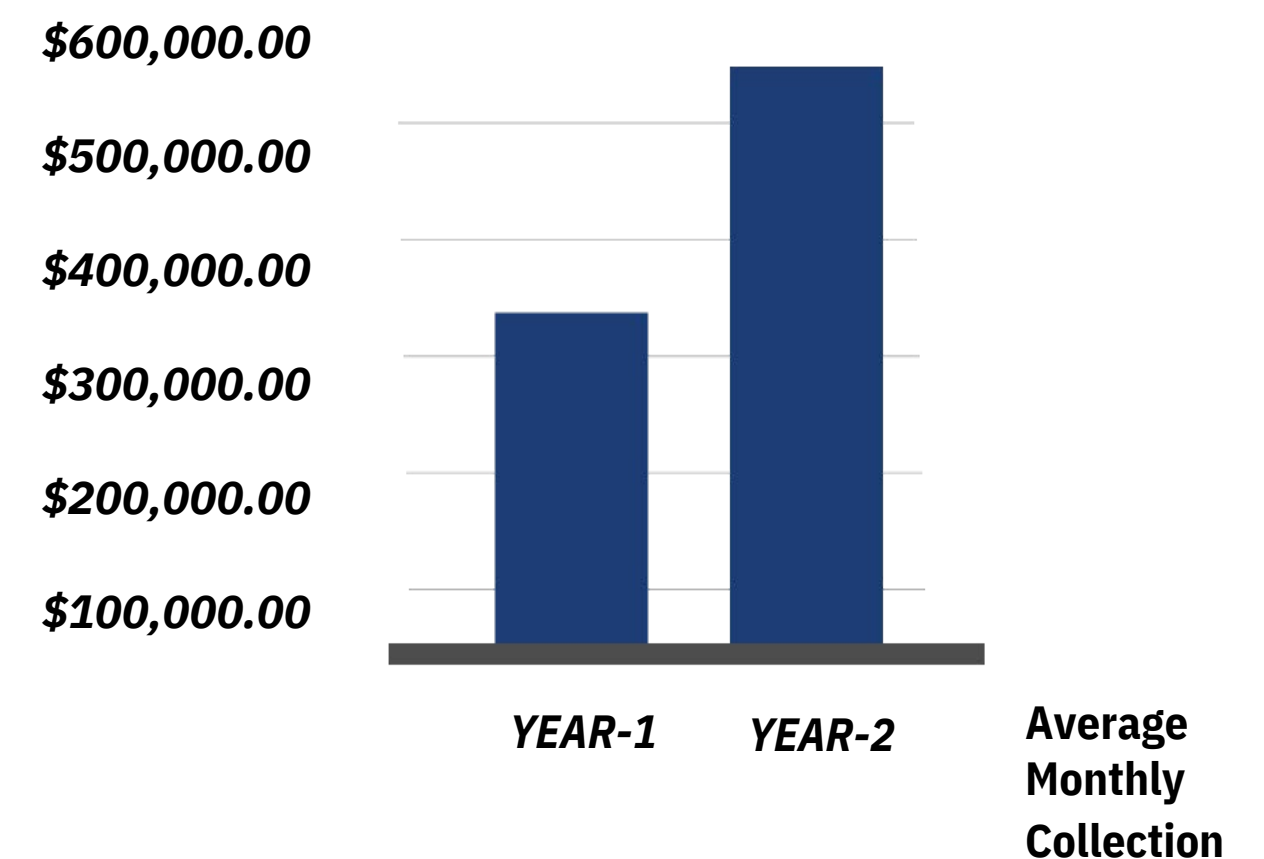
# A Synapse Diagnostic Lab Client

Below are the year-end increases from a Synapse diagnostic laboratory client, in which there was a 60% increase in average payments and a 52% increase in average charges.

AVERAGE MONTHLY COLLECTION		AVERAGE MONTHLY CHARGES	
YEAR 1	YEAR 2	YEAR 1	YEAR 2
\$353,739.09	\$566,426.97	\$480,530.64	\$734,421.00

## LABORATORY CLIENT

A Graphical Representation of the monthly average collections from year 1 to year 2



## How does Synapse achieve successful Lab Billing?

Claims are thoroughly checked for covered diagnosis. Since majority of the claims have multiple diagnoses and procedures, billers make sure that they match the procedures with the covered diagnosis. Given that Synapse billers have medical backgrounds, it is easier for them to match the procedures to the diagnosis.

For claims that do not have covered diagnosis, a request is sent to the laboratory for one, in order to avoid denials.

Synapse also has collectors that respond to insurance requests. With laboratory claims, it is very important that insurances receive necessary information in a timely manner.

## PRACTICE ANALYSIS

- 60% Increase in the average payment from year 1 to year 2
- Average monthly collections significantly increased when Synapse took over the billing
- Average Charges increase by 52% from year 1, average number of procedures also increased from 12,630 to 14,573, a 15% increase from the previous year
- Charge to collection ration is consistent: Year 1 was at 74% and slightly increase in Year 2 at 77%