



# A MESSAGE FROM OUR FOUNDER

Dear Colleagues and Friends,

In our last Synergy Post, I shared some of the ways that Six Sigma is used in health care. In July 2018 Synergy Billing introduced a processing method using Six Sigma. This expert processing method focuses on resolving claims within 30-days of initial processing. A year later I'm proud to report that Synergy has resolved 91% of claims within 30 days of processing.

But we know what you're thinking. "While 30-day claim resolution is an amazing accomplishment, what do we do with this A/R and constant stream of lost revenue to write-offs and adjustments?" It turns out you're not alone. Did you know that according to HRSA data, the average FQHC only collects 71.4% of collectable dollars and has 60% or more of their receivables aged over 120 days. The reality is, a health center can't keep its population in good health if it's financials are sick, and inappropriate adjustments are the virus that allows unacceptable denials and A/R to metastasize.

For example, did you know that if the software isn't set up properly, it can be writing balances off at the time of posting? Another common issue is balances that are transferred to patients in error. It pains me to see health centers losing money this way when it doesn't have to happen.

There is an estimated \$262 billion, or 9 percent in nationwide claims, that are initially denied.

Let's face it. It's easier for your billing staff to write off a tough balance than go chasing. Meanwhile, the mindset of a Synergist is "no dollar left behind" and we aggressively pursue every balance. "No dollar left behind" is a mantra I've passed to my team and that we strive for with each client.

If your health center is still writing off insurance balances to bad debt, you need to call Synergy Billing. We are the experts at getting all claims paid.

Sincerely,

M. Jayson Meyer Founder & CEO



Synergy Billing has officially moved into the Fountainhead Campus in Holly Hill, FL.



One June 17th, Synergy Billing Founder, Jayson Meyer took the podium in Arkansas for a training boot camp on revenue cycle.



SYNERGY BILLING

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# SYNERGY POST

SPRING/SUMMER 2019 SYNERGY BILLING NEWSLETTER

## ARE YOU LOSING MONEY TO TIMELY FILING?

Imagine if the sand on the top of an hourglass represented revenue. Once you file your insurance claims, the hourglass flips. The revenue you can collect slips away with each passing moment. Collecting revenue quickly isn't just about getting your money faster, it's about collecting the totality of what you worked hard for.

For a community health center, dollars lost could make the difference between covering all operational costs or not. Medical billers are in essence surrounded daily by dozens, if not hundreds of figurative hourglasses, each representing its own different duration of time. With so many to keep track of, it's understandable that over 200 million claims are rejected every year, leaving money lost at the bottom of the hourglass.

While placing timely filing limits on claims ensures that all claims are sent as soon as possible, making it easier in theory for health centers to

[CONTINUED ON PAGE 2](#)



## HEALTH CARE HERO- CLARENCE L. BRUMBACK, M.D., M.P.H.

Many community health centers bear the names of pioneers who devoted their lives to improving access to health care and serving our most vulnerable people. We believe that the stories behind these names are inspiring and instructive and want to share them with our friends and colleagues. This Post we honor Clarence L. Brumback, M.D., whose name graces C.L. Brumback Primary Care Clinics in Palm Beach County, Florida.

Clarence L. Brumback, M.D. helped to identify 56 health problems and the resources to address them between 1950 to 1986 as the first

[CONTINUED ON PAGE 2](#)



## IN THIS ISSUE:



p3 SYNERGY CORNER  
Meet Erin McGuire, Director of Integration



p4 FOUNDER'S MESSAGE  
A message for the FQHC Community



HAVE FEEDBACK OR IDEAS? Let us know what you think, we'd love to hear from you! Reach out to us with your ideas and suggestions for future issues at: [newsletter@synergybilling.com](mailto:newsletter@synergybilling.com)

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receive their money, it's important to keep in mind that timely filing limits vary from insurance company to insurance company. This means that the timely filing limit for insurance company A might be 12 months, whereas the timely filing limit for insurance company B may be 6 months.

With strict guidelines at the state, federal and local payer level coupled with a multitude of insurances and timely filing dates, community health centers risk writing off and losing earned revenue forever due to missing filing limits. The cost of reworking each appeal for missing the timely filing limit on average cost health centers roughly \$118 per claim.

As time passes, how much money are you losing? How much is slipping through to the bottom of your hourglass, lost forever?

Contact the experts at Synergy Billing at 386.675.4709 to find out how you can recover at-risk dollars and avoid losing money.

Sources: [www.beckershospitalreview.com](http://www.beckershospitalreview.com); [www.mb-guide.org](http://www.mb-guide.org)

CONTINUED FROM "HEALTH CARE HERO"

director of public health in Palm Beach County. Solutions to problems such as polio, which was an epidemic, came through Dr. Brumback's creativity and ability to partner with organizations of all kinds.

Dr. Brumback (1914-2012) was born in Colorado and raised in Kansas, where he completed medical school at the University of Kansas. During World War II Dr. Brumback served in the U.S. Army Medical Corps. After the war, Dr. Brumback earned his masters degree and worked for the U.S. Atomic Energy Commission. Palm Beach County hired Dr. Brumback as its first director of public health in 1950, a position he held until 1986.

The racial segregation of the times complicated many health issues. After talking with the African American community, Dr. Brumback made changes that increased the quality and accessibility of care. Dr. Brumback found that the problems of schoolchildren were not limited to physical health. He worked with the Mental Health Association to open a child guidance center at what became the 45th Street Mental Health Center, then Oakwood Center.

Migrant farm workers had almost no access to health care in 1950. Dr. Brumback worked with Congressman Paul Rogers to pass the national Migrant Health Act of 1962.

To maintain a source of appropriately trained doctors, Dr. Brumback created the Residency Program in

Preventive Medicine/Public Health with the University of Miami. He remained coordinator of the program long after retirement.

In June of 2013, the Health Care District of Palm Beach County began providing primary health care services to adults and children at the C. L. Brumback Primary Care Clinics. Through a grant awarded to the Health Care District in December 2012 by the United States Health Resources and Services Administration (HRSA), the District is managing and operating the C. L. Brumback Primary Care Clinics as Federally Qualified Health Centers.

Dr. Brumback also introduced many other initiatives, such as Healthy Mothers, Healthy Babies, establishing prenatal care for all pregnant women. The pen that President Johnson used to sign The Migrant Farmworker Health Act into federal law was given to Dr. Brumback in honor of his strenuous patient advocacy.

Today Dr. Brumback's legacy is carried on by Belma Andrić, MD, the Chief Medical Officer, VP and Executive Director of Clinic Services for the Health Care District of Palm Beach County; which includes leadership of the C.L. Brumback Primary Care Clinics. We salute Dr. Belma Andrić and the staff and volunteers who continue to keep Dr. Brumback's vision alive. Well done!

Sources: [www.pbhistoryonline.org](http://www.pbhistoryonline.org); [www.hcdpb.org](http://www.hcdpb.org)

## SYNERGY CORNER



Meet Erin McGuire,  
Director of Integration

**Thanks so much for taking time for this interview, Erin. Could you tell us a little bit about what you did before you joined Synergy Billing?**

Most recently, before joining Synergy, I opened, branded and was the Practice Manager for a Psychiatric clinic specializing in forensic psychiatry and addiction medicine. I had been in the medical office and medical billing field for over 10 years before Synergy, performing all types of functions at hospitals and private practices including front-desk supervision, claim processing, medical records associate functions, E.R. registration, hospitalist satisfaction coordinator, and I ran my own credentialing business.

**How has that prepared you for your role as Director of Integration?**

With my involvement in almost every aspect of the medical billing field, I am able to understand and provide resolution to a variety of different issues that may arise during initial assessments. The functions I performed with opening and managing a private practice has provided me with invaluable insight into the complexity of integrating new clients within Synergy.

**What motivated you to join Synergy Billing? What do you like best about working for Synergy?**

I saw an ad to join Synergy and was immediately drawn in by the culture. I wanted to belong to a company with big ideas. My favorite part about Synergy is the ability to bring ideas and suggestions to the table regardless of hierarchy.

**Share a bit about your department and what your department does. What is your vision for the Integration Department?**

Integration and Re-Integration is really going to be brand-new and fresh! The department will focus on standardizing the onboarding process for new clients and ensuring their continued success outside of Integration. Re-Integration will be focused on identifying any opportunities for improvement with already seasoned Synergy clients to ensure that they continue to meet standards and client expectations. My vision is to execute a flawless, and continuous cycle of new and existing clients that perform well above Synergy and client expectations.

## MISSION MOMENTS

In May Jayson Meyer and wife, Misty attended Variety Care's first annual "Pulling it Together" for Oklahoma luncheon. Pictured with them are Tim Reddout, Executive Vice President & CFO of Variety Care and Lou Carmichael, CEO of Variety Care. This luncheon fundraiser was put on by the Variety Care Foundation. Proceeds from the foundation help to support the thousands served by Variety Care.



Synergy sponsored the luncheon, and we were fortunate to have the opportunity to sit and listen to stories first-hand from Variety Care patients who have benefitted from the many critical services that Variety Care provides. It was so incredibly powerful to think how many of those patients were likely also touched by the work we do at Synergy Billing. How fantastic to see these patients in person, and how in partnership with our clients, our work in revenue cycle management makes a true difference.

Variety Care developed in 2014 when Oklahoma Community Health Center and Variety Health Center merged to become a FQHC serving the needs of the community, and in 2018 they had over 239,000 visits.