



ADVOCATE™  
EDUCATE  
ELEVATE



# Stronger Futures

Thriving Through Revenue Cycle Management

**Virginia Community Healthcare Association Annual Membership Meeting & Conference**

**September 2025**

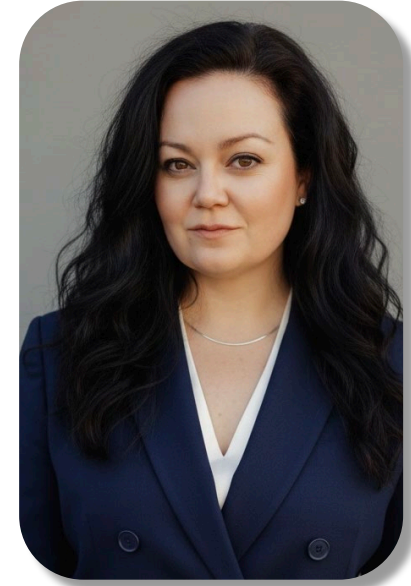
# Today's Presenters



**Shannon Lea, MPH**  
Senior Program Manager  
Primary Care Development Corporation



**Albert Brogan, CPA**  
Chief Financial Officer  
Community Health Center  
of the New River Valley



**Samantha Gooch**  
Billing Manager  
Community Health Center  
of the New River Valley



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Partnership: PCDC and CHC NRV



This Photo by Unknown Author is licensed under [CC BY-SA](#)

- **Goals:**

- Strengthen the financial resiliency and position of primary care and adjacent providers to sustain services and expand access to care.
- Improve knowledge, confidence, and skills related to financial and revenue cycle management.

- **National Hearst-Funded Learning Collaborative:**

- **Assessment:** Evaluated financial, revenue cycle, and operational performance, identified gaps in workflows and reporting, and provided recommendations for improvement.
- **Capacity Building:** Trained and coached leadership, boards, and finance/billing teams. Encouraged transparency and cross-functional collaboration across the leadership team.
- **Customized Dashboards + Tools:** Supported the implementation of KPI dashboards, formalized feedback loops, and documented reporting structures.
- **Policy and Workflow Development:** Created workflows and policies that supported the formal review of financial and revenue cycle metrics.
- **1:1 Coaching:** Coached organizations to recognize improved efficiency as a result of process improvement.



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Learning Objectives

- Define key revenue cycle concepts and identify Key Performance Indicators (KPIs) essential to revenue cycle management.
- Discuss the current healthcare landscape in the context of preparing and optimizing the revenue cycle.
- Learn emerging and best practices for sustaining revenue cycle operations from the personal experience of the Community Health Center of the New River Valley.



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Revenue Cycle Management (RCM) Foundations



# Defining the Revenue Cycle



- The revenue cycle includes all activities that lead to payment for rendered services.
- In healthcare, Revenue Cycle Management (RCM) is the financial process health centers use to manage the administrative and clinical functions associated with claims processing, payment, and revenue generation.
- Having well-defined revenue cycle management processes improves accuracy in capturing revenue, resulting in improved financial health outcomes.

Source: [Tech Target](#)

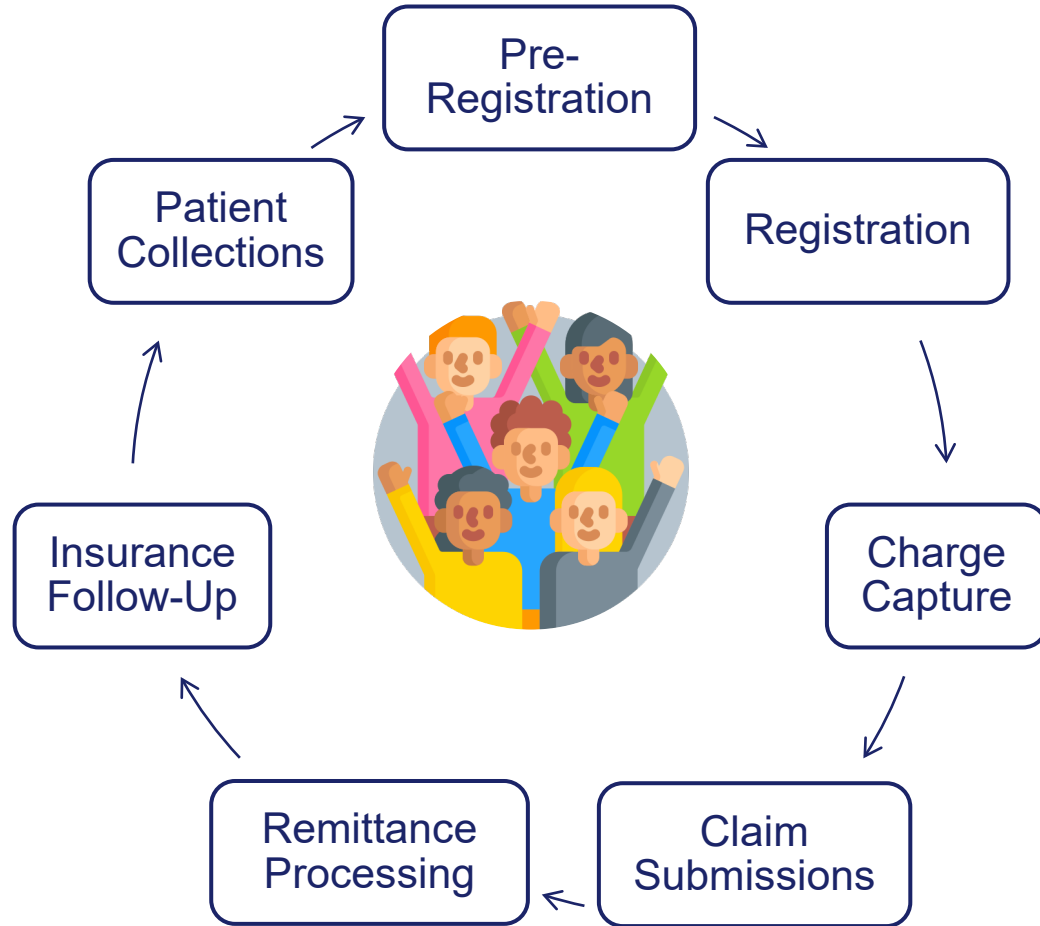


ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Critical Components and a Team Approach



- Front Office
- Clinical Operations
- Providers
- Coders
- Billers
- Clinical Documentation Improvement
- Health Information Management
- Credentialing
- Compliance

# Revenue Cycle Key Performance Indicators

Ratio	Formula	Description
Net Collections Rate	$\frac{\text{Collections} - \text{Refunds}}{\text{Gross Charges} - \text{Contractual Adjustments}} \times 100$	Identifies how effective your organization is at collecting <b>reimbursement for rendered services</b>
Time of Service (TOS) Collection Rate	$\frac{\text{Collections on DOS}}{\text{Patient Balances Owed at DOS}} \times 100$	Provides insight into collections at the <b>time of service</b> or when a patient is in the health center
Denial Rate	$\frac{\text{Total Dollar Amount of Claims Denied}}{\text{Total Dollar Amount of Claims Submitted}} \times 100$	Identifies the <b>percentage of denied claims</b> out of all <b>claim submissions</b> *Can also use claim count.
Days in Accounts Receivable	$\frac{\text{Total Accounts Receivable}}{\text{Average Daily Gross Charges}}$	Identifies how much <b>time</b> a bill spends in Accounts Receivable (DAR)
AR > 120 Days	$\frac{\text{AR} > 120 \text{ Days}}{\text{Total Accounts Receivable}} \times 100$	Identifies <b>significantly aged AR</b>



# How is Revenue Cycle Information Used?

## Analyzing revenue cycle metrics:



- Provides meaningful and actionable data
- Identifies opportunities for improvement and informs the development of action plans for correction



- Identifies trends
- Aids in the recognition of risks
- Increases depth of understanding of your patient population



- Drives workflow + policy evaluation and optimization
- Creates a pathway for sustainability

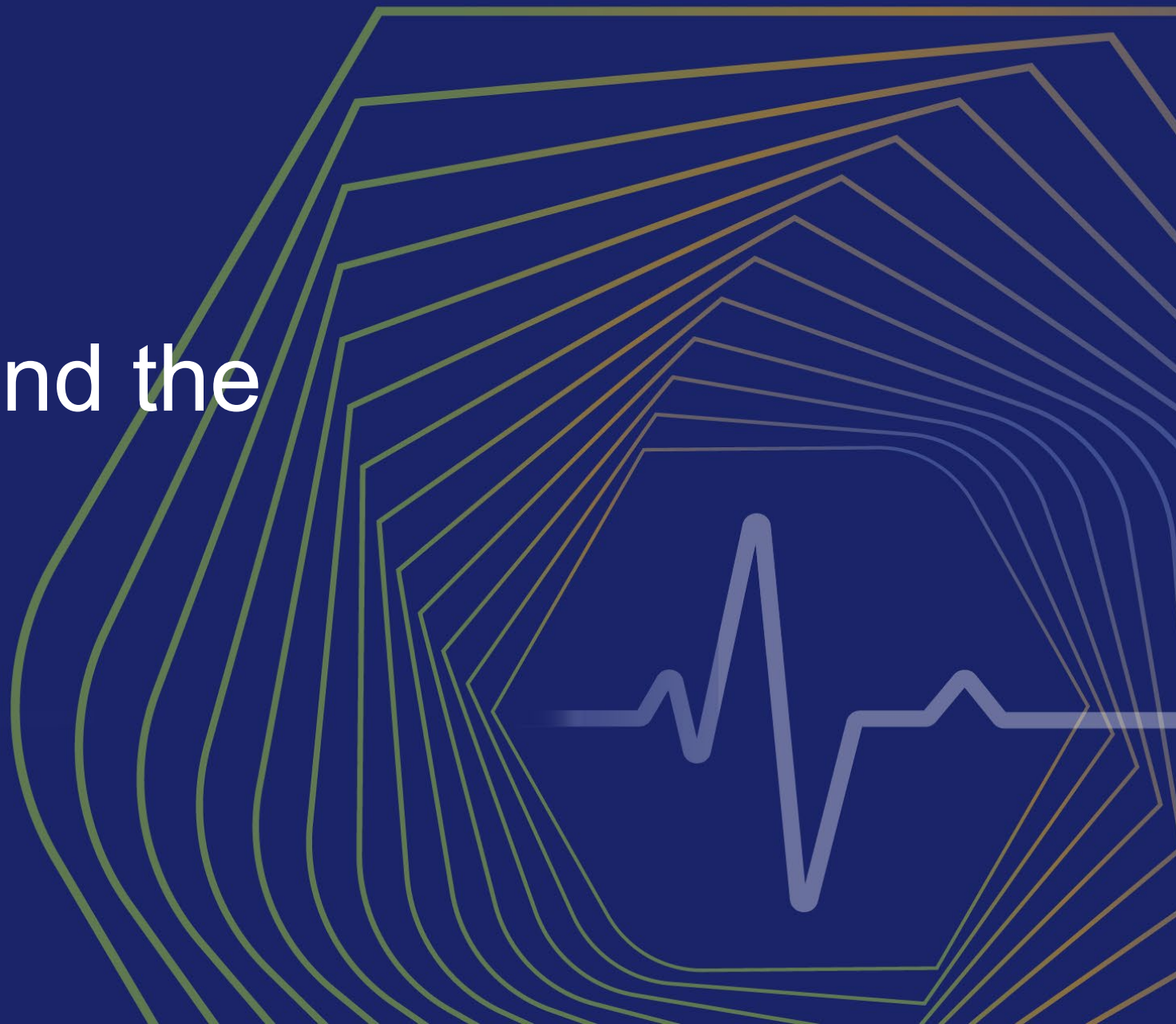


ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Revenue Cycle and the Current Moment



# Why You? Why Now?

## Work Requirements

January 1, 2027

### Proposed Qualifying Activities and Exemptions

Qualifying Activities	Mandatory Exemptions	Optional Hardship Exceptions
<ul style="list-style-type: none"><li>• 80 hours per month of work, community service, and/or "work program" participation</li><li>• Enrolled in education at least half time</li><li>• Any combination of the above totaling 80 hours per month</li><li>• Monthly income of minimum wage multiplied by 80 hours</li><li>• Seasonal workers with an average monthly income over 6 months of minimum wage multiplied by 80 hours</li></ul>	<ul style="list-style-type: none"><li>• Parent/guardian/caretakers of dependent children under age 13 or disabled individuals</li><li>• Pregnant or receiving postpartum coverage</li><li>• Foster youth/former foster youth under age 26</li><li>• Medically frail</li><li>• Participating in SUD program</li><li>• Meeting SNAP/TANF work requirements</li><li>• American Indians and Alaska Natives</li><li>• Disabled veterans</li><li>• Incarcerated or released from incarceration within 90 days</li><li>• Entitled to Medicare Part A/enrolled in Medicare Part B</li></ul>	<p>State option to allow short-term hardship exceptions, for an individual who...</p> <ul style="list-style-type: none"><li>• was in an inpatient hospital, nursing facility, intermediate care facility, or inpatient psychiatric hospital</li><li>• resided in a county with a federally-declared emergency or disaster</li><li>• resided in a county with a high unemployment rate (above 8% or 1.5x the national unemployment rate), subject to a request from the state to the Secretary</li><li>• traveled outside of the individual's community for an extended period for medical care for themselves or for their dependent</li></ul>

Source: [KFF](#)



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Why You? Why Now?

## Anticipated Changes to Payer Mix

- Medicaid and ACA Plan pools will likely decrease
  - 5.2M adults may lose coverage by 2034
  - Those who lose or are denied Medicaid coverage due to work requirements are ineligible for premium tax credits to purchase marketplace plans
- Diversify and expand contracts with employer-sponsored plans

Source: [KFF](#)



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Why You? Why Now?

## Telehealth Policy Cliff

September 30, 2025

- Medicare's pre-pandemic **geographic, originating site, and modality** restrictions will return for most telehealth services.
  - Audio-only will no longer be broadly covered, except when the patient is in their home and the distant provider has the capability to use live video, but the patient cannot or does not wish to use it.
- Home as the originating site **will only remain for:**
  - Treatment of substance use disorder and co-occurring mental health conditions
  - Mental/behavioral health services (if all in-person visit requirements are met)
  - End-stage renal disease (ESRD) home dialysis services
  - All other telehealth visits must take place at eligible facilities in approved geographic locations

Source: [Telehealth Resource Center](#)

Source: [Center for Connected Health Policy](#)



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Why You? Why Now?

## Telehealth Policy Cliff

**December 31, 2025** (without Congressional action)

- FQHCs and RHCs **lose their status as eligible distant site telehealth providers for medical visits.**
  - CMS extended FQHC/RHC authority to provide these services using the G2025 billing code.
  - This provides parity with the Physician Fee Schedule (PFS) rate through December 31, 2025. In the 2026 PFS, CMS has proposed another one-year extension (through 2026), but this has not yet been finalized.
- Under CMS's permanent definition, FQHCs and RHCs may continue to provide mental health visits via live video or audio only.
  - Reimbursement would be at the PPS/AIR rate.
  - Beginning **January 1, 2026**, FQHCs and RHCs must meet the prior and subsequent in-person visit requirements for home-based mental health visits, unless the patient and provider document that the risks outweigh the benefits.

Source: [Telehealth Resource Center](#)

Source: [Center for Connected Health Policy](#)



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Why You? Why Now?

## Artificial Intelligence is Here

- AI in RCM
  - Task automation
  - Claim denial prediction and prevention
  - Coding and billing optimization
  - Eligibility verification
  - Data-analytics
- More people are leaning into Artificial Intelligence
- AI can be viewed as a partner, not just an enhanced search feature
- Formal frameworks and policies are critical as team members are likely using AI in their personal lives
- AI will not replace human touch



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Why is it Important for ALL Leaders to have a Foundation Revenue Cycle?



No margin no mission

- Foster dialogue, collaboration, and understanding with a common language
- Answer critical operational and strategic questions that drive business decisions:
  - How will changes to Medicaid eligibility impact our bottom line?
- Help meet benchmarks or assess department performance
- Assist with health center compliance responsibilities



Every decision has a financial impact



Measure performance



Compliance and stewardship of federal funds

Community Health Center  
of the New River Valley





“I changed career paths and didn’t have insurance for a little while. I changed from the provider I had to go to here because the cost was so much more effective. Ultimately, I did get insurance, and it helped out, but if it wasn’t for the health center, I probably would not have gotten the treatment I needed.”

- Provide medical, dental, and behavioral health services.
- Locations in Montgomery, Pulaski, and Giles Counties.
- Served > 6,000 individuals in 2024.

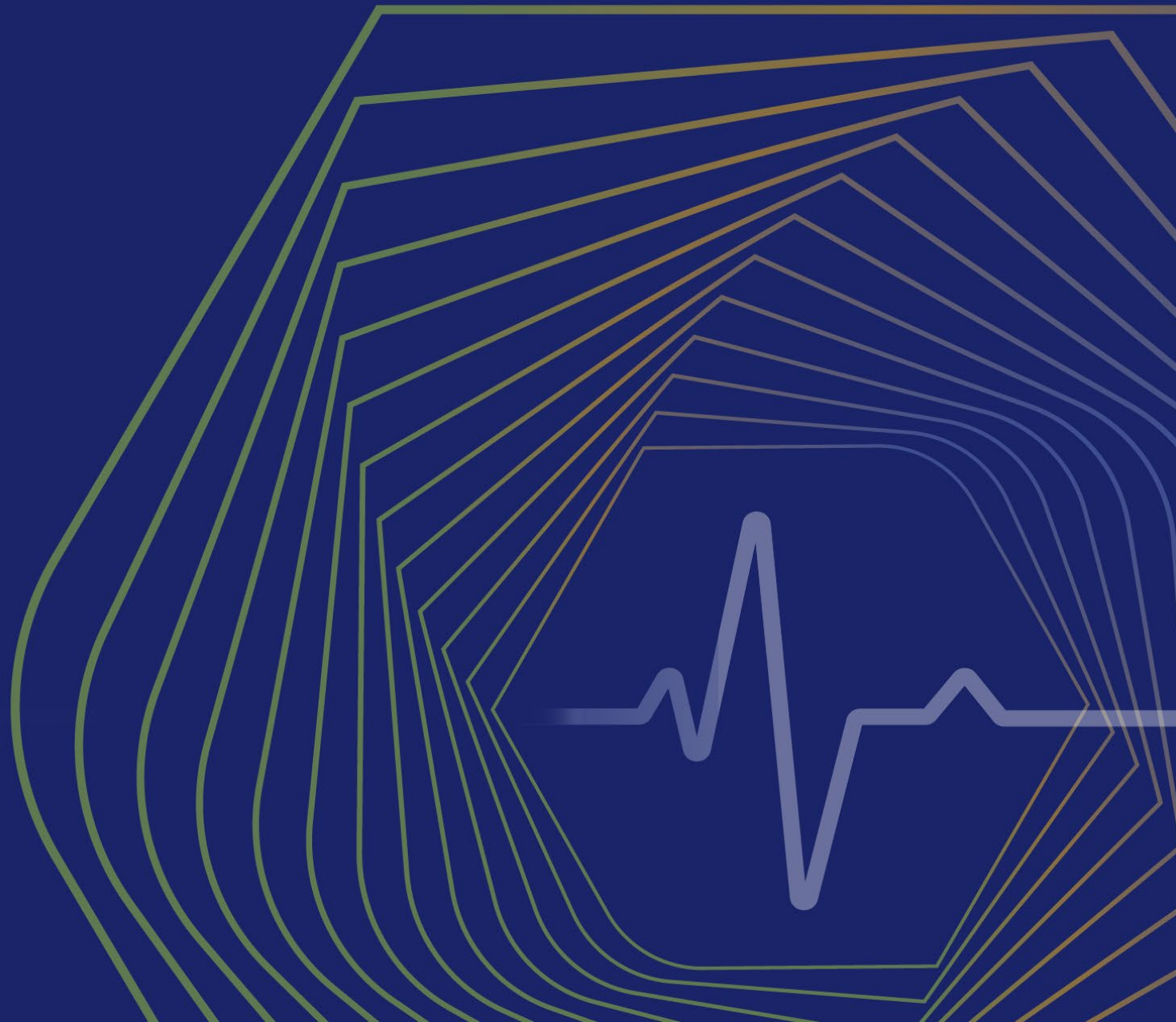
Source: [CHCNRV](#)

Source: [WSLS](#)

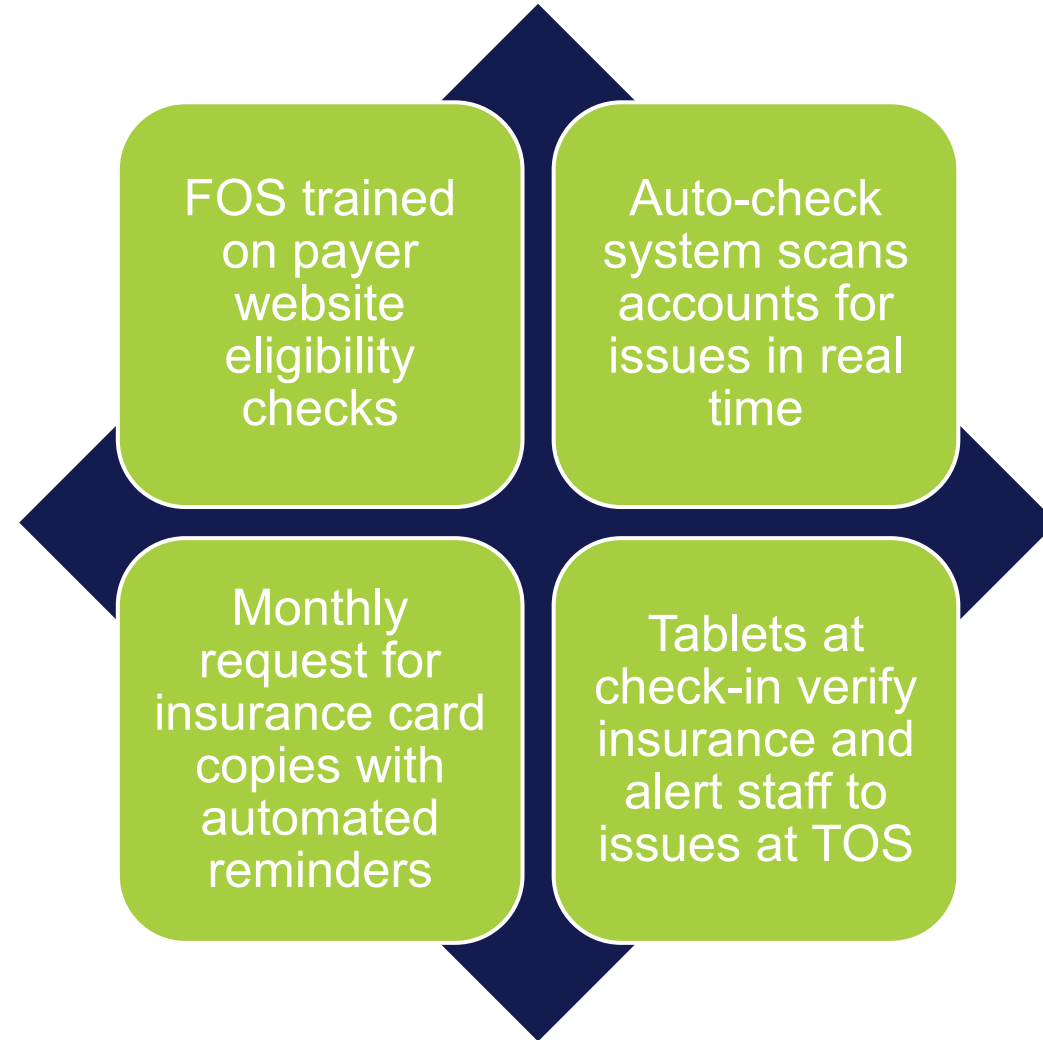


# Front Office and Billing Process Improvements

Improving Eligibility, Collections,  
and Patient Experience



# Eligibility Verification



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



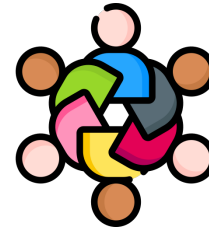
# Financial Assistance and Sliding Scale



Sliding scale applied for patients below 200% poverty line



Real-time calculation of patient responsibility



Departments outside FOS assist with financial counseling



Payment plans available as low as \$5 per month



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Collections and Payment Improvements



Launched text-to-pay campaign for convenient mobile payments



Increased patient collections by 15%



Reduced bad debt and captured balances at risk



Text reminders notify patients to bring prior balances



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Education & Communication

Ongoing one-on-one education for patients and staff

Identify patient needs and address barriers

Open chat channels between FOS and billing for real-time support



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Objectives and Challenges



## Objectives

- Identify spreadsheet inputs feeding KPI dashboards
- Ensure accurate data flow from input to visualization
- Organize month-end close procedures
- Provide tools for transparent stakeholder communication

## Challenges

- Manual data consolidation is prone to errors
- Unclear linkage between inputs and KPIs
- Time-consuming month-end close process
- Difficulty conveying results to diverse stakeholders

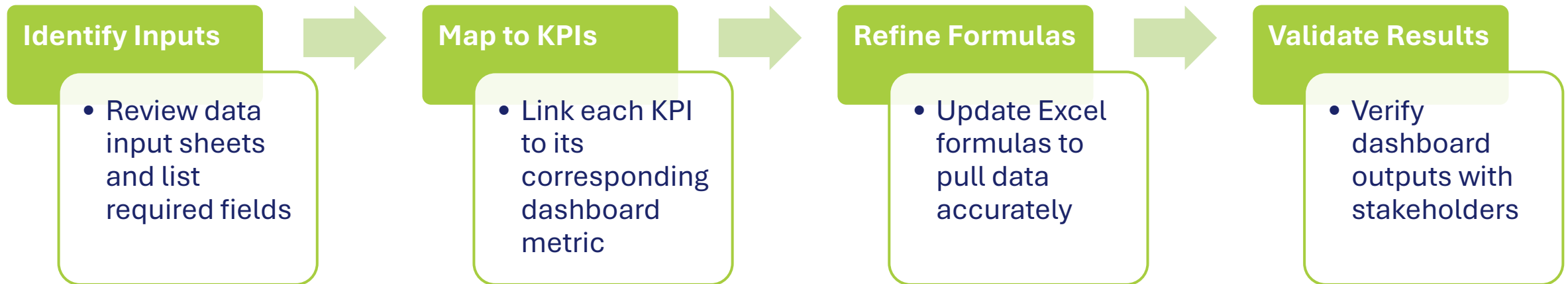


ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Methodology and Data Mapping



# Required Data Inputs

Input	Data Source	Units
Operating Revenue	Financial records	Dollars
Operating Expense	Financial records	Dollars
Non-Cash Expense	Financial records	Dollars
Charges	EHR/PM	Dollars
Payments	EHR/PM	Dollars
Adjustments	EHR/PM	Dollars



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Month-End Close: Before vs. After

Domain	Before	After
Data Consolidation	Manual gathering from multiple sources	Automated mapping of inputs
Process Speed	Slow, labour intensive	Faster close cycle
Data Accuracy	Prone to transcription errors	Improved accuracy through linked formulas
Transparency	Limited visibility	Real-time dashboards



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Enhanced Stakeholder Communication



## Clarity

Dashboards present consistent KPIs for leadership



## Alignment

Teams share a single source of truth across departments

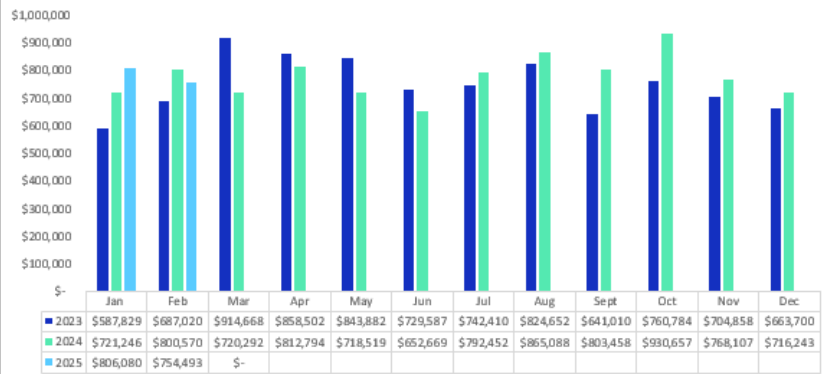


## Actionable Insights

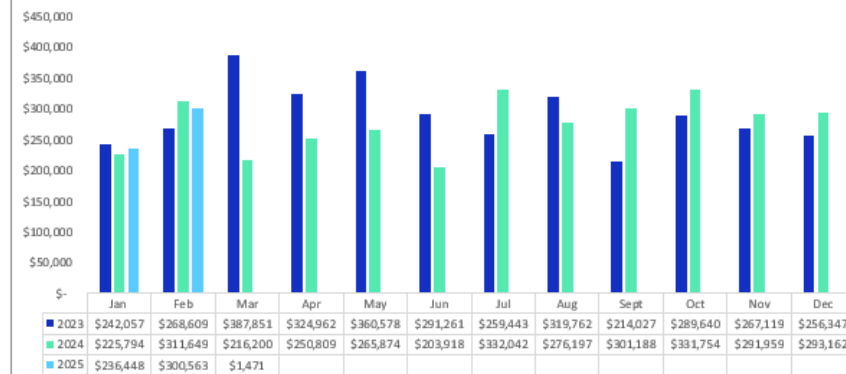
Stakeholders can quickly identify trends and opportunities.

[Insert Health Center Name]

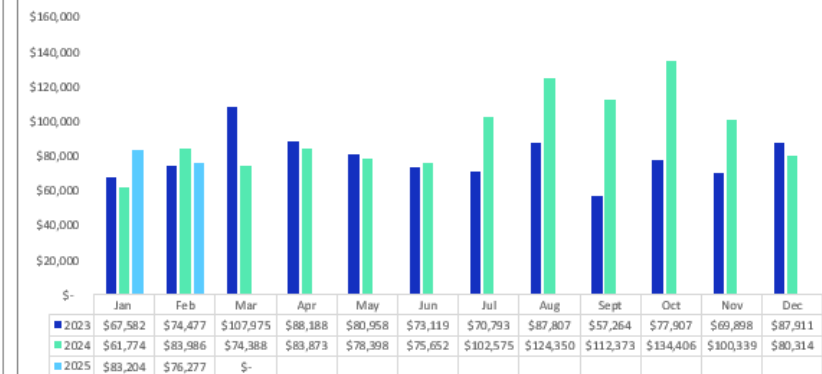
Charges



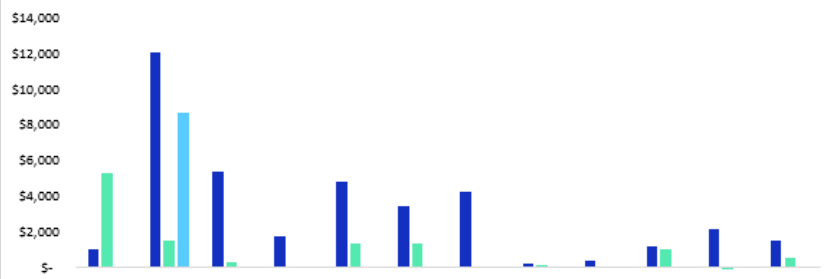
Payments



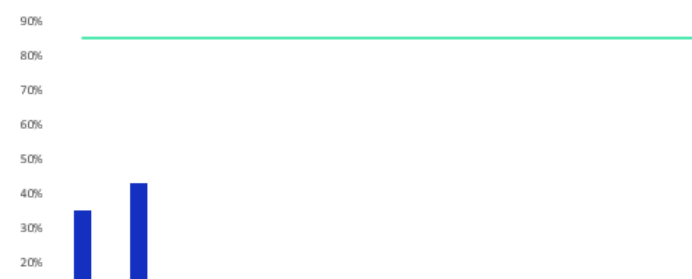
Adjustments



Refunds



Net Collections Rate



Denial Rate



# Contact Us



**Shannon Lea, MPH**  
Senior Program Manager  
Primary Care Development Corporation  
[slea@pcdc.org](mailto:slea@pcdc.org)



**Albert Brogan, CPA**  
Chief Financial Officer  
Community Health Center  
of the New River Valley  
[abrogan@chcnrv.org](mailto:abrogan@chcnrv.org)



**Samantha Gooch**  
Billing Manager  
Community Health Center  
of the New River Valley  
[sgooch@chcnrv.org](mailto:sgooch@chcnrv.org)



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# References

- (2025, July 30). *A Closer Look at the Work Requirement Provisions in the 2025 Federal Budget Reconciliation Law*. KFF. <https://www.kff.org/medicaid/a-closer-look-at-the-work-requirement-provisions-in-the-2025-federal-budget-reconciliation-law/>
- (2025, August 19). *Eligible Providers...What the FQHC?* Center for Connected Health Policy. <https://mailchi.mp/cchpca/eligible-providers-what-the-fqhc>
- (2025, September 15). *The Telehealth Policy Cliff: Preparing for October 1, 2025*. National Consortium of Telehealth Resource Centers. <https://telehealthresourcecenter.org/resources/the-telehealth-policy-cliff-preparing-for-october-1-2025/>
- Awati, R., & Delvechhio, A. (2024, February 21). *Revenue Cycle Management (RCM)*. TechTarget. <https://www.techtarget.com/searchhealthit/definition/revenue-cycle-management-RCM>
- Lynn, K. (2025, May 22). *New River Valley Health Center expands, promises affordable care for more patients*. WSLS. <https://www.wsls.com/news/local/2025/05/22/new-river-valley-health-center-expands-promises-affordable-care-for-more-patients/>



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



# Questions



ADVOCATE  
EDUCATE  
ELEVATE

Virginia Community Healthcare Association Annual Conference  
September 24-26 • Roanoke, VA



