



End-to-End Revenue Cycle Outsourcing 2023

Pursuing Financial and Staffing Stability



Table of Contents

- 2** Executive Insights
- 11** Expanded Insights
- 14** Client Interview Details



Executive Insights

End-to-End Revenue Cycle Outsourcing 2023

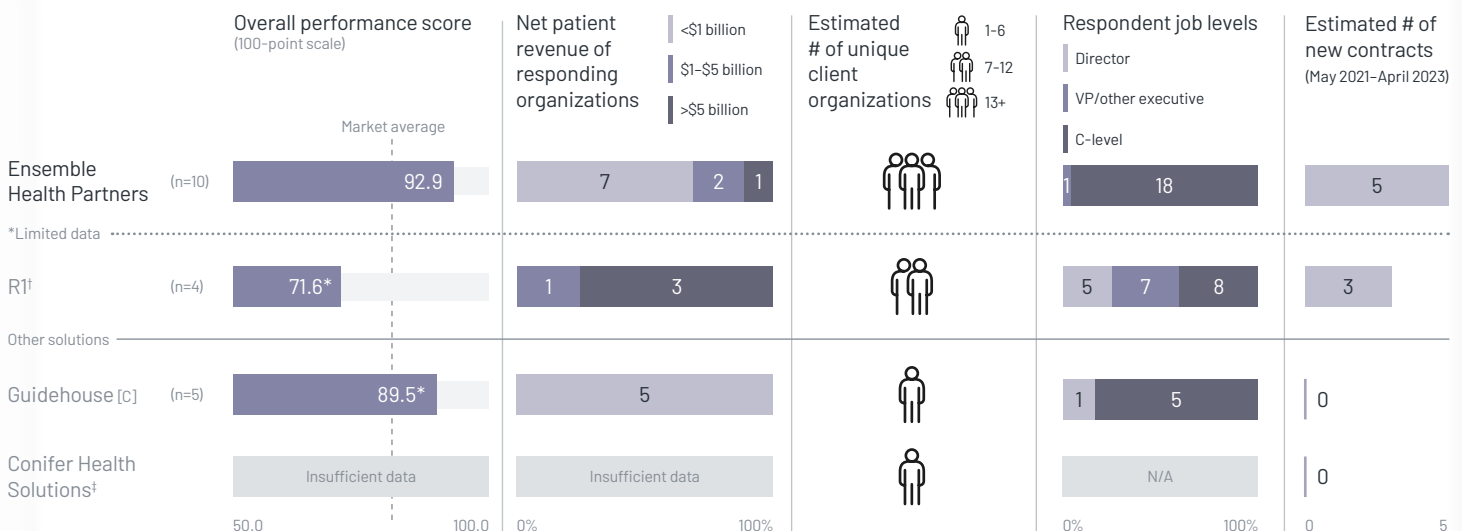
Pursuing Financial and Staffing Stability

This report includes insights from two data sources: (1) interviews with 19 organizations regarding satisfaction with their end-to-end RCO firm over the last 12 months and (2) in-depth conversations with 8 provider executives whose organizations have announced partnerships with large end-to-end RCO firms in the past 24 months.

Aftershocks of the COVID-19 pandemic have made it difficult for hospitals and health systems to control costs and find and retain the right staff. In an effort to achieve stability, healthcare executives are looking to external partners for help, including end-to-end revenue cycle outsourcing (RCO) firms. Though organizations have similar motivations for partnering with an RCO firm, not all firms take the same approach to meeting clients' needs. This report examines the performance of end-to-end RCO firms, reasons provider organizations outsource their revenue cycle, why they chose the firms they did, and the models and approaches of these firms.

Performance Insights

Overall Performance and Client Base



Component [C]: Firms for which KLAS has not validated three or more unique outsourced clients with a net patient revenue of >\$1 billion are designated as component [C] in this market segment.

† RTs sample size in this report represents a temporary dip, as some previously interviewed clients' scope of work with the firm no longer qualifies for inclusion. RT is expected to return to fully rated status as new clients are interviewed.

‡ For this research, KLAS was able to interview two Conifer Health Solutions clients, identified through KLAS' independent research efforts as the firm declined to share an updated client list. As the sample size does not meet KLAS' required thresholds for sharing performance data, the firm is excluded from the charts below.

A Note about Optum

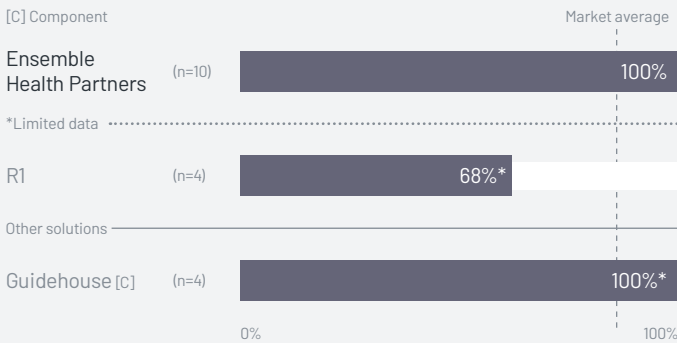
Optum's RCO contracts are often part of larger organizational decisions that also involve technology and services outside of RCO. As a result, Optum RCO clients have difficulty separating their specific revenue cycle experience from their broader Optum outsourcing experience. Optum is therefore excluded from the performance insights section of this report.

Ensemble Health Partners Drives Client Loyalty by Going Beyond Meeting Standard RCM KPIs

Most clients are highly satisfied with **Ensemble Health Partners’** RCO services, noting that Ensemble performs day-to-day operational work well. Clients appreciate the firm’s professional, methodical approach to managing and improving revenue cycle. Additionally, respondents report that Ensemble’s executives are actively engaged in providing critical guidance to help clients solve problems upstream; the leadership is responsive to concerns and follows up with quick communication and resolution. Respondents feel that Ensemble positively impacts not only their organization’s bottom line but also their internal culture. Among the three clients who don’t feel that Ensemble exceeds their expectations, top concerns are errors on patient statements, slower-than-anticipated improvements to A/R days, and challenges with Ensemble’s communication structure. Despite these concerns, all interviewed organizations would purchase Ensemble’s services again.

Would You Buy Again?

Percentage of respondents who answered yes



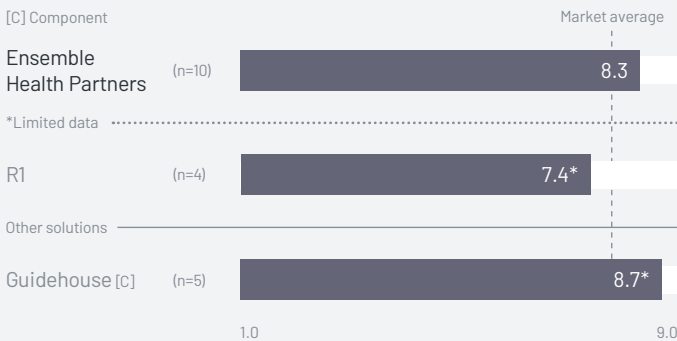
Note: Percentages are calculated based on individual respondent counts, not unique organizations

“Ensemble Health Partners gives us an outstanding partnership. They have unbelievable responsiveness and service, and they offer cutting-edge support technology and solutions. They do more than any other revenue cycle company I have ever worked with in terms of helping us solve problems upstream. They are not just doing their job on the back end; they are really trying to work collaboratively with our operators to understand and address issues that are outside of their realm because of how well they understand the business. I can’t say enough good things about the firm. They have my full endorsement.” —CEO

Guidehouse (Limited Data) Delivers Beyond Scope to Drive Outcomes for Clients

Guidehouse customers (limited data) are typically smaller organizations (less than \$1B net patient revenue), and most respondents report being satisfied with the firm. Clients highlight strong partnership, saying that the Guidehouse staff treats client organizations as part of their own team. Guidehouse goes above and beyond to solve problems and to ensure clients realize tangible outcomes; multiple respondents have had experiences where Guidehouse performed out-of-scope work or absorbed extra costs. Some clients express concerns about the time needed to onboard new staff amid turnover, and one respondent reported a loss of partnership and executive involvement due to recent leadership changes.

Strength of Partnership (1-9 scale)



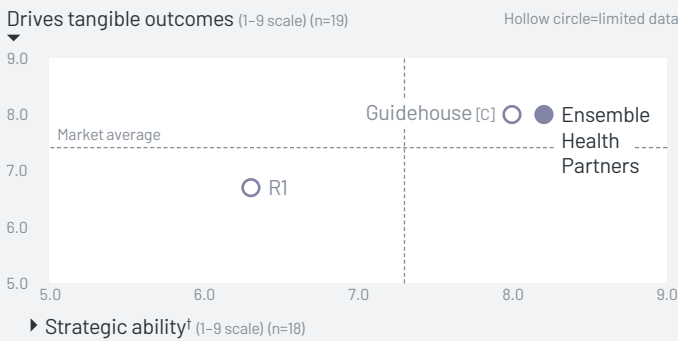
“From a relationship standpoint, things are going great. When it comes to our revenue cycle, Guidehouse is part of the team, and that is how people see it internally and externally. I am very satisfied with the firm. When I was in a crunch, Guidehouse brought certain resources on board, and I didn’t have to pay an additional cost to set that up. So we have a true partnership with Guidehouse. They go above and beyond. We are also able to bounce ideas off of our contact from the firm, and even if what we need is outside of the revenue cycle, this person listens and will put us in touch with the right people at Guidehouse.” —CFO

R1's (Limited Data) Largest Clients Are Most Satisfied; Others Mention Lack of Expertise and Outcomes

due to their knowledge and expertise, and nearly all respondents say the site leaders and executives are responsive and genuine in their efforts to foster strong partnerships; respondents also feel R1 generally does well with day-to-day RCM operational work. However, clients report varied experiences with the application of the vendor's expertise and with the consistency in the quality of supervisors and frontline staff, and several respondents are looking for more proactive guidance in driving strategic improvements. Clients say R1 feels like a siloed organization, noting that communication between departments doesn't always flow well. Additionally, respondents report inconsistent outcomes; R1's promises of technology and expertise being employed to drive down costs and improve collections haven't panned out for all clients, and several organizations report that R1 struggles to achieve baseline KPIs within the anticipated timeline.

Experiences with R1 (limited data) vary widely between client organizations, especially depending on the respondent's organization size and/or job level—those in the C-suite as well as those from larger organizations typically report higher satisfaction with R1's services. Interviewed clients often report choosing R1

Drives Tangible Outcomes vs. Strategic Ability



† Strategic ability refers to knowledge that goes beyond what the client knows and how well that knowledge is tailored to benefit the client.

“R1's end-to-end work has been a little clunky. The handoffs aren't always as good as they should be for their different functions within R1. . . . Things are missed and aren't thought about critically. . . . When it comes to R1's bread and butter, such as registering, coding, billing, and collecting, things are fine. The issue is when we get into nuances. R1 isn't looking for other things that could potentially go amiss. Sometimes they don't have the education to do relatively complex things. . . . There is a communication gap. R1 needs to educate their customers more on the challenges and impediments the firm faces that keep them from billing and collecting promptly. The firm needs to tell us more about what we are doing wrong. That is very important.” —CFO

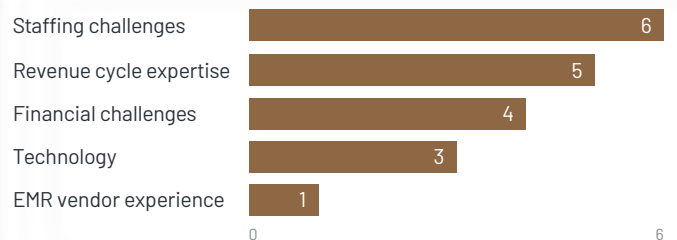
RCO Market Energy

The insights in this section are from in-depth interviews with provider executives at eight organizations that have announced net-new partnerships with Ensemble Health Partners, Optum, and R1 between May 2021 and April 2023. These interviews represent the majority of decisions that have occurred in this time frame. Of the eight organizations represented, three selected Ensemble, three selected Optum, and two selected R1. Insight around Guidehouse and Conifer Health Solutions is limited in this section, as no new end-to-end partnerships were announced within the time frame.

Few Options for Internal Revenue Cycle Talent Drives Hospitals and Health Systems to Outsource

As a direct result of the COVID-19 pandemic, many health systems are looking to their RCO partners to help them achieve financial stability and manage the acquisition and retention of qualified talent. This is especially prevalent in geographic areas where the talent pool is limited. Looking beyond their immediate pandemic-related needs, organizations also feel that RCO firms allow them to tap into strong revenue cycle expertise to optimize their revenue cycle beyond what can be done internally. Some organizations also see outsourcing as a way to access technology they wouldn't be able to acquire on their own.

Top Reasons Organizations Partner with an RCO Firm (n=8)



Note: Respondents could provide more than one answer.

Reasons Firms Were Selected or Not Selected

Note: Respondents could provide more than one reason.

Vendors ordered alphabetically

✓ # of respondents who cited reason for selection ✗ # of respondents who cited reason for not selecting

[C] Component	Model alignment	Prior experience	Contract terms/price	Experience with EMR vendor	Additional details about why firm was selected	Additional details about why firm was not selected
	Expertise	Partnership in sales process	RFP performance	Scale of clients		
Conifer Health Solutions (n=0) (n=1)				✗	<ul style="list-style-type: none"> N/A (no recent wins validated by KLAS) 	<ul style="list-style-type: none"> Decided on another firm after Conifer Health Solutions' sales presentation
Ensemble Health Partners (n=3) (n=3)	✓✓✓ ✗	✓	✓		<ul style="list-style-type: none"> Simple outsourcing model Familiarity and expertise with EMR Strong historic performance 	<ul style="list-style-type: none"> Pricing model and guaranteed outcomes weren't aligned with client needs Another firm had a more advantageous package Unsatisfactory RFP response
Guidehouse [C] (n=0) (n=2)	✗			✗	<ul style="list-style-type: none"> N/A (no recent wins validated by KLAS) 	<ul style="list-style-type: none"> Another firm had a more appealing package Unsatisfactory RFP response
Optum (n=3) (n=3)	✓✓✓ ✗✗	✗		✗	<ul style="list-style-type: none"> Broad outsourcing approach not limited to RCM 	<ul style="list-style-type: none"> Broad outsourcing approach with not enough focus on RCM Complicated model
R1 (n=2) (n=1)	✓✓ ✗	✓	✓		<ul style="list-style-type: none"> Strong focus on reducing expenses through technology Strong proposal, including additional benefits, such as ownership stake in R1 	<ul style="list-style-type: none"> Concerns about offshoring

Comparing Management Models

Client Descriptions of Management Models

Ensemble Health Partners

- Rebadges the whole revenue cycle department up to but not including the executive-level leaders (e.g., CFO)
- Organizes and trains staff so that they specialize in specific parts of the revenue cycle (front, middle, or back); in some cases, that requires a large transition from how client staff were previously organized
- Provides additional leadership and account representatives to oversee the work and bring revenue cycle expertise
- Holds regular meetings with committees made up of operational and strategic leaders to align on outcomes being driven relative to contract terms

Optum

- Often extends beyond revenue cycle to include services such as supply chain, analytics, care transformation, and IT
- Has a formal governance model that spans from frontline employees to the C-level, with operational staff being rebadged and high-level leadership being retained
- Details from one client: Optum establishes leadership to communicate and co-manage operational work with provider leadership; both groups meet regularly to address operational or performance issues. Firm also sets up councils by delivery area and job level to allow provider and Optum leaders to discuss partnership metrics, risks, and strategic developments

R1

- Manages departments directly after rebadging
- Provider leadership provides guidance and oversight on what to work on; R1 manages the day-to-day operational work
- Brings a holistic approach, focusing on people, processes, and technology without overemphasizing any individual element
- Details from one client: Transition was accomplished in waves—managers and supervisors transitioned as a "champion group," and everyone else transitioned later to handle day-to-day operations

Advice from Providers Who Have Transitioned to End-to-End RCO within the Past Two Years

Firm selection

Be open and transparent with potential firms about what is important to your organization, and take sufficient time to evaluate the cultural fit while also staying open to opportunities for improvement. While cost is important, it shouldn't be the deciding factor.

“I would tell others not to rush things. . . . Just like with recruiting providers, you really need to look for fit. You need to look for people that are going to match up well with your organization and its mission, vision, and values. People should look at cost because there was a vast difference in cost between the various companies. It wasn't that the cheapest was necessarily going to be the best, but the most expensive wasn't the best either.” —COO

Contracting

Do not underestimate the amount of time and attention that needs to be devoted to due diligence, negotiation, and gaining a crystal-clear understanding of contract terms. Take time to understand how the firm calculates their impact (e.g., revenue lift, cost savings) and compensation, and play out specific scenarios and examples to ensure alignment. Consider other vendor partners who may be impacted by the decision, and require involvement early on to avoid upstream delays (e.g., avoiding problems by involving an EMR vendor in conversations around access and data governance).

“I would warn others to be very cognizant of the contract terms. An aha moment for me is based on the way the language was written in the contract. . . . Moving forward, clients need to identify who is the culprit for causing that lift because they could easily overlook a couple of things, then correct it and claim it as a lift. Lastly, clients need to calculate the incentive structure because charges of \$1 million might equate to 0 cents financially. You have to make sure the cash is in the door before you start paying them their ROI. Know what you've been paid and what you were supposed to be paid for the services you've provided.” —CFO

Announcing

Be transparent to your own employees about the current financial state of your organization and the challenges you are facing to make sure everyone is well informed and prepared.

“Transparency is probably the best approach. In a deal, there is a lot of contracting that happens, and it is not made public within the organization for a period of time. One of the things that helped us in this process was to be very transparent about the financial state of the organization so that folks were not surprised when a partnership was announced.” —VP

Rollout and onboarding

Recognize the impact of the transition on employees and the amount of HR work required. One organization reported that employees took the announcement and rollout as a sign they weren't doing their jobs well enough, and there were resulting challenges managing perceptions. Another organization highlighted the immense lift to go through the operational and administrative process of rebadging. The chosen firm may have a playbook for rollout and onboarding, but the provider organization needs to adapt it to the local needs and constraints of their community and workforce.

“Even to this day, we are learning new things about our firm that didn't impact the ultimate decision to do the deal, but we didn't even know this when we were going to this deal. The amount of HR time that is necessary to do this well is something that we underestimated a little bit or didn't understand well enough, and that was a challenge. We had to figure out how do we do all that HR work when there is so much HR work happening in the industry right now. That is a massive deal.” —VP

Impact on KPIs

One provider warned that switching revenue cycle firms can cause temporary delays in A/R and denials. Be prepared to ensure a diligent focus in those areas through the transition, and don't be surprised if there is a step backward in performance before expected outcomes begin to be realized.

“Our auditors warned us that pretty much every time you change vendors for revenue cycle, you will have some A/R and denials creep. Be ready to ensure that those areas are being focused on as diligently as they had before, and be prepared for a little step backwards before you move forward.” —CFO

Notably, hospitals and health systems that involved third-party legal and consulting firms in their assessment, firm selection, and contracting felt that the provided expertise was well worth the money spent, resulting in a better decision than they could have made on their own. (View [KLAS' website](#) for more insights on advisory services.)

“We used a consulting firm to help us, and they broke down the contract and pricing information so that we could understand it. I can't imagine going through the process without that consulting firm. I am sure the relationship and contract between the parties would not be as good. The outsourcing firm is very expensive, and without those consultants, our agreement wouldn't be as strong. We probably would have given up more than we should have.” —CFO

Report Information

Share your experience with peers.

Take a [short survey](#) about your revenue cycle outsourcing firm.



About This Report

The data in this report comes from two sources: (1) KLAS' standard quantitative evaluation for healthcare services from June 2022 to June 2023 and (2) a supplemental evaluation taken by organizations who made net-new end-to-end RCO partnerships over the past 24 months.

Each year, KLAS interviews thousands of healthcare professionals about the IT solutions and services their organizations use. For this report, interviews were conducted from June 2022 to June 2023 using KLAS' **standard quantitative evaluation** for healthcare services, which is composed of 9 numeric ratings questions and 3 yes/no questions, all weighted equally. Combined, the ratings for these questions make up the overall performance score, which is measured on a 100-point scale. The questions are organized into five customer experience pillars—loyalty, operations, relationship, services, and value.

Customer Experience Pillars

Category

Loyalty



Operations



Relationship



Services



Value



Standard services evaluation metrics

Likely to recommend
Overall satisfaction
Would you buy again

Engagement execution

Executive involvement
Strength of partnership

Quality of staff/consultants
Strategic expertise

Avoids charging for every little thing
Drives tangible outcomes
Exceeds expectations
Money's worth

To supplement the customer satisfaction data gathered with the standard evaluation, KLAS also created a **supplemental evaluation** to delve deeper into several questions specifically related to the energy of the end-to-end revenue cycle outsourcing market. This evaluation asked respondents the following:

1. What parts of the revenue cycle have you outsourced to your firm?
2. What EMR does your organization use?
3. Are you rebadging employees? If yes, to what extent?
4. Briefly describe your firm's management model.
5. What specific challenges were you trying to address by outsourcing your revenue cycle?
6. Why was now the right time for our organization to fully outsource?
7. What pitfalls would you warn others about as they make the decision to outsource?

Sample Sizes

Unless otherwise noted, sample sizes displayed throughout this report (e.g., n=16) represent the total number of *unique client organizations* interviewed for a given firm or service. However, it should be noted that to allow for the representation of differing perspectives within any one client organization, samples may include surveys from different individuals at the same organization. The table below shows the total number of unique organizations interviewed for each firm or service as well as the total number of individual respondents.

Some respondents choose not to answer particular questions, meaning the sample size for any given firm or service can change from question to question. When the number of *unique organization* responses for a particular question is less than 6, the score for that question is marked with an asterisk (*) or otherwise designated as "limited data." If the sample size is less than 3, no score is shown. Note that when a firm has a low number of reporting sites, the possibility exists for KLAS scores to change significantly as new surveys are collected.

Note: Some organizations may have rated more than one service.

[C] Component

	Standard Evaluations		Estimated Client Base for Measured Service
	# of unique organizations	# of individual respondents	# of unique organizations
Ensemble Health Partners	10	19	13+
Guidehouse [C]	5	6	1-6
R1	4	20	7-12
Other validated vendors			
Conifer Health Solutions	-	-	1-6

Product Designations Used in This Report

- Component [C]: Firms for which KLAS has not validated three or more unique outsourced clients with a net patient revenue of >\$1 billion are designated as component [C] in this market segment.

Reader Responsibility

KLAS data and reports are a compilation of research gathered from websites, healthcare industry reports, interviews with healthcare, payer, and employer organization executives and managers, and interviews with vendor and consultant organizations. Data gathered from these sources includes strong opinions (which should not be interpreted as actual facts) reflecting the emotion of exceptional success and, at times, failure. The information is intended solely as a catalyst for a more meaningful and effective investigation on your organization's part and is not intended, nor should it be used, to replace your organization's due diligence.

KLAS data and reports represent the combined candid opinions of actual people from healthcare, payer, and employer organizations regarding how their vendors, products, and/or services perform against their organization's objectives and expectations. The findings presented are not meant to be conclusive data for an entire client base. Significant variables—including a respondent's role within their organization as well as the organization's type (rural, teaching, specialty, etc.), size, objectives, depth/breadth of software use, software version, and system infrastructure/network—impact opinions and preclude an exact apples-to-apples comparison or a finely tuned statistical analysis.

KLAS makes significant effort to identify all organizations within a vendor's customer base so that KLAS scores are based on a representative random sample. However, since not all vendors share complete customer lists and some customers decline to participate, KLAS cannot claim a random representative sample for each solution. Therefore, while KLAS scores should be interpreted as KLAS' best effort to quantify the customer experience for each solution measured, they may contain both quantifiable and unidentifiable variation.

We encourage our clients, friends, and partners using KLAS research data to take into account these variables as they include KLAS data with their own due diligence. For frequently asked questions about KLAS methodology, please refer to [klasresearch.com/faq](https://www.klasresearch.com/faq).

Copyright Infringement Warning

This report and its contents are copyright-protected works and are intended solely for your organization. Any other organization, consultant, investment company, or vendor enabling or obtaining unauthorized access to this report will be liable for all damages associated with copyright infringement, which may include the full price of the report and/or attorney fees. For information regarding your specific obligations, please refer to [klasresearch.com/data-use-policy](https://www.klasresearch.com/data-use-policy).

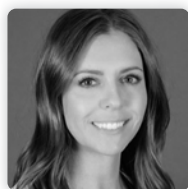
Note

Performance scores may change significantly when additional organizations are interviewed, especially when the existing sample size is limited, as in an emerging market with a small number of live clients.



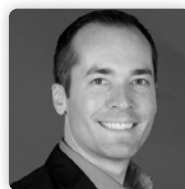
CO-AUTHOR
Sam Eaquinto

sam.eaquinto@KLASresearch.com



CO-AUTHOR
Mollie Hunt

mollie.hunt@KLASresearch.com



CO-AUTHOR
Shawn Howell

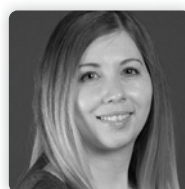
shawn.howell@KLASresearch.com



WRITER
Carlisa Cramer



DESIGNER
Breanne Hunter



PROJECT MANAGER
Ally Dove



Our Mission

Improving the world's healthcare through collaboration, insights, and transparency.

365 S. Garden Grove Lane, Suite 300
Pleasant Grove, UT 84062

Ph: (800) 920-4109

For more information about KLAS, please visit our website:
www.klasresearch.com

Cover image:

© wichayada / Adobe Stock



Expanded Insights

Ensemble Health Partners

Figure 1 **Ensemble Health Partners—Standard Numeric Indicators**
(1-9 scale)

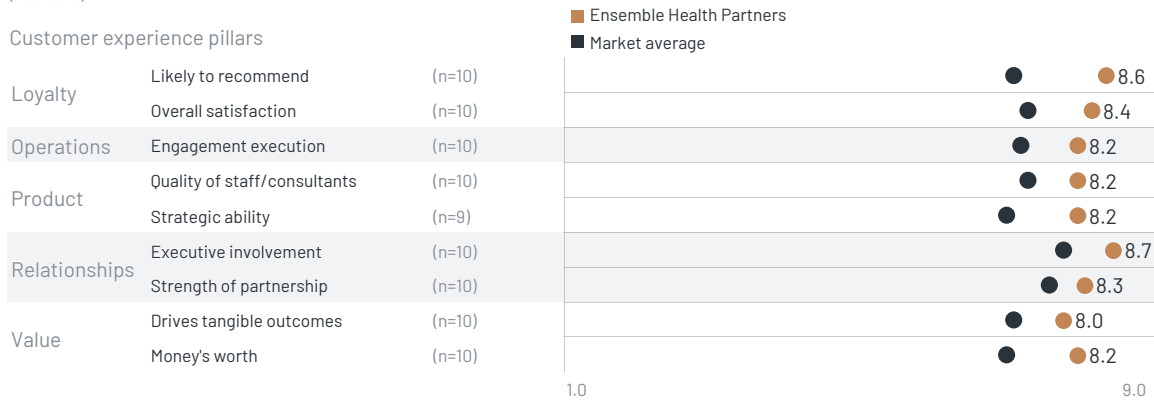
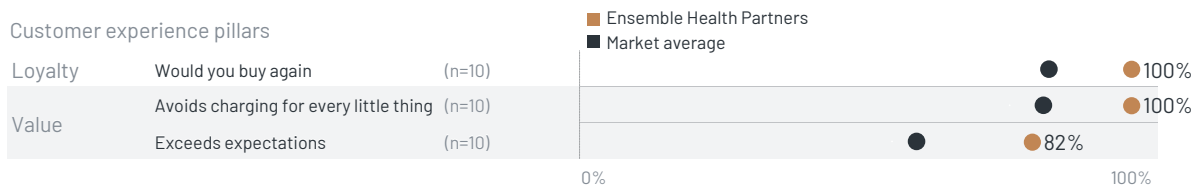


Figure 2 **Ensemble Health Partners—Standard Yes/No Indicators**
Percentage of respondents who answered yes; percentages are calculated based on individual respondent counts, not unique organizations



Guidehouse

Figure 3 **Guidehouse [C]—Standard Numeric Indicators**
(1-9 scale)

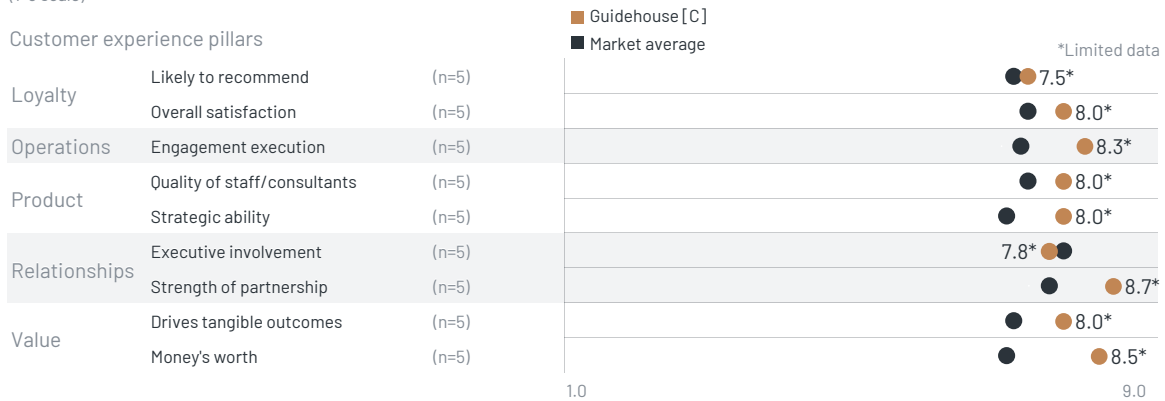
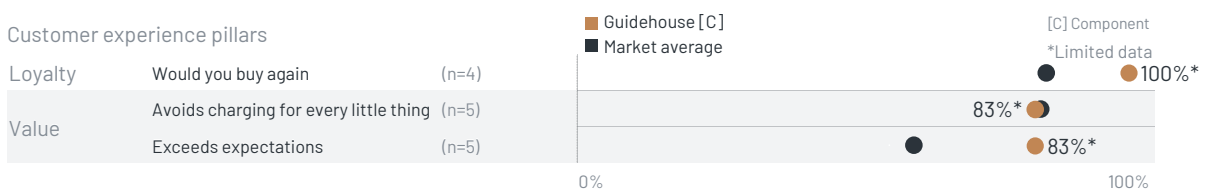


Figure 4 **Guidehouse [C]—Standard Yes/No Indicators**
Percentage of respondents who answered yes; percentages are calculated based on individual respondent counts, not unique organizations



R1

Figure 5 **R1—Standard Numeric Indicators**
(1-9 scale)

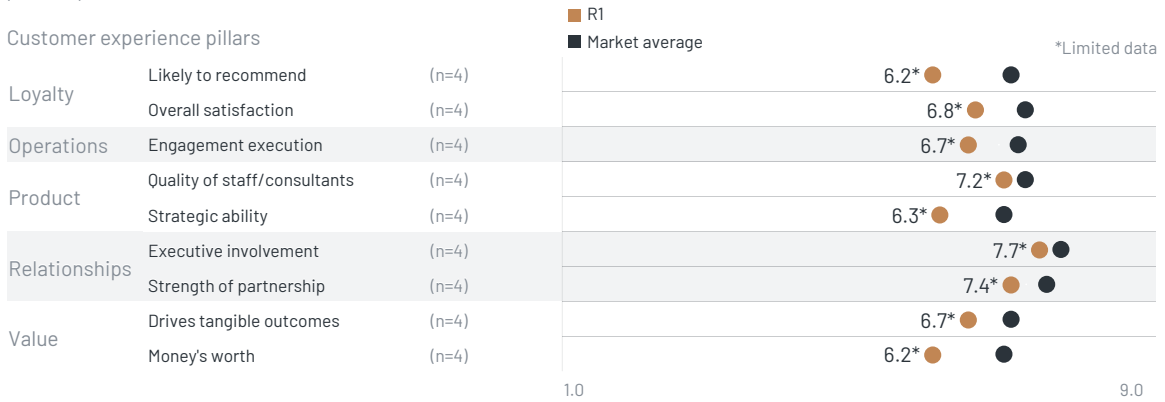
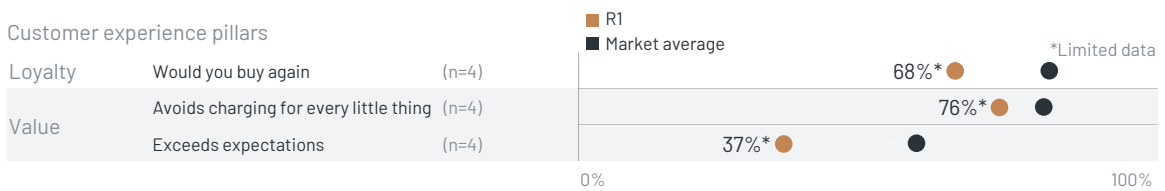


Figure 6 **R1—Standard Yes/No Indicators**

Percentage of respondents who answered yes; percentages are calculated based on individual respondent counts, not unique organizations





Client Interview Details

Ensemble Health Partners

C-suite

Ambulatory care and post-acute care were not Ensemble Health Partners' strengths when I worked with them at another organization. The firm is still more slanted toward hospital work, but they have been building more strength on the ambulatory side, and there has been some improvement. Ensemble Health Partners still needs some help on the coding side of the house, and they know that.

As far as technology goes, Ensemble Health Partners has acquired Odeza, but we may not put up Odeza because of integration issues with our EMR. We will still have to integrate with our EMR because it feeds the revenue cycle process, but we may have to build in a better digital consumer-oriented technology on the front end instead of relying on a system that has all the components to get the bill out the door but is clunky. We are talking with other startups and disruptors, and we may bolt another solution to our front end.

As to our day-to-day A/R management and volume of transactions, sometimes accounts get stuck for one reason or another, and it is hard to manage things. We manage a lot of transactions, but things need to be escalated from time to time to get resolved. Once Ensemble Health Partners becomes aware of something, they can resolve it, but through the volume of transactions, some accounts get buried in work queues and aren't worked promptly. If we find the right person at the firm, they have the expertise and the know-how to resolve an issue. The challenge is getting issues to the right people, and that can cause delays or frustrations on our end.

As we go into different areas talking about expanding our scope and rebadging people, sometimes Ensemble Health Partners sends in what I call their lieutenants, and the lieutenants have trouble getting into their customers' heads. Some of the leaders at the firm, not Judson Ivy and Shannon White but different leaders, get into the transaction and talk about communication with the people who will become their employees. Those leaders don't realize that things aren't about the transaction. I am shocked that I have had to tell the firm to quit talking about the numbers in the transaction. If that leader were in my head or our CEO's head, that leader would understand the situation is way bigger than the number of people in the transaction.

During the contracting process, Ensemble Health said that we would have a cash hiccup and that it would take several months for cash to be collected at the same level as before. That has been a little painful, but the firm did tell us ahead of time, so we should have been prepared. The firm has done a great job with their communication. We have worked with Ensemble Health's teams to communicate with our staff members, who have been very pleased. We have received good, quick responses with accurate information.

Ensemble Health Partners gives us an outstanding partnership. They have unbelievable responsiveness and service, and they offer cutting-edge support technology and solutions. They do more than any other revenue cycle company I have ever worked with in terms of helping us solve problems upstream. They are not just doing their job on the back end; they are really trying to work collaboratively with our operators to understand and address issues that are outside of their realm because of how well they understand the business. I can't say enough good things about the firm. They have my full endorsement.

Ensemble Health Partners had a really great integration team. They helped out tremendously in terms of finances, end-user operations, charges, reconciliations, and things like that.

Ensemble Health Partners had some of the same staffing challenges during COVID-19 that all of us did, but they tried to work smarter, not harder, so we didn't see the service suffer as a result. We still maintained our metrics and continued with good performance. I get the feeling that the firm obviously does have some turnover, and with how many employees they have, it is not atypical for us to have a change, but the firm does a good job of making sure that there is no single point of failure. Other employees step in to cover until a new person is hired. I have found that the firm mitigates turnover very well by creating redundancies within the organization.

Ensemble Health Partners handles everything from soup to nuts. One of the things I am most excited about is tapping into the firm's infrastructure to manage different business aspects, whereas before we were limited by our resources. Ensemble Health Partners has departments for areas such as A/R management, denials management, and coding. The firm is so specialized that we would have never been able to afford their level of expertise on our own. Large health systems can do things on their own, but those things distract from the core business, which is running a hospital. We do not have the bandwidth or investment appetite to distract from our core business, so outsourcing services to Ensemble Health Partners helps us to access and leverage their expertise at a fraction of the cost. The firm has done a phenomenal job of tailoring information to our organization.

Ensemble Health Partners has a great business model. One of the things that they can afford me is a higher level of expertise than what I could go out on the market and buy because I am getting a piece of a lot of different kinds of experts from Ensemble Health Partners. The model they have is there to make us successful.

Ensemble Health Partners has always been extremely flexible. If we were to expand, we would use the firm's revenue cycle partner. We have an arrangement, so nickel-and-diming is not even contemplated. The firm is very apt to work on different projects.

Ensemble Health Partners has done a great job of bringing in experienced people that are well respected in the field.

Ensemble Health Partners has grown a lot and is growing very quickly, but I haven't seen any change in service as a result of that growth. I like the way that Ensemble Health Partners is structured. I have the CEO's contact information, and the firm also has an executive who is our contact person. Our contact is dedicated to us and communicates with me regularly. Internally, Ensemble Health Partners may feel the effects of their quick growth, but externally, I don't see any impact. I recommend Ensemble Health Partners often.

Ensemble Health Partners is a leader in technology. They are always looking for ways to be more efficient and help health systems bring in more revenue. The firm has brought some things to us that we want to implement. Health systems are not always the fastest to do things from a technological standpoint, and we wanted to outsource with Ensemble Health Partners because of their capabilities with analytics and technology. We have a technology system across our organization, but there are some things the vendor of that system doesn't do well. Ensemble Health Partners has brought some other capabilities, and there are some that we are going to move forward with. A lot of revenue cycle firms come in and do what they do with whatever system we have. One thing that differentiates Ensemble Health Partners is that they lead from a technological standpoint and always look for ways to improve performance.

Ensemble Health Partners is best at execution. We have a typical revenue cycle scorecard with days in A/R, days in credit balances, and physician and hospital billing. In the short term, the revenue lift categories are the most important to us, and our scorecard is great.

Ensemble Health Partners is doing a great job of hitting the metrics and goals that we agreed to. They execute things very well. The things that are a big deal to us are cash collections and reducing A/R denials. Those are the things that drive money back into our checkbooks.

Ensemble Health Partners is doing a pretty good job. We did an analysis to show where we would be with or without them. It was not perfect, but we had made a lot of assumptions about things that had changed, and we pulled those out and showed the before-and-after pictures. We included the fact that Ensemble Health Partners only cost us a little more money than our internal revenue cycle team. There is a net benefit to the firm's services for sure.

Ensemble Health Partners is in many venues across the country, so their exposure is huge. They can use their experiences in one part of the country to help if they see something in our system. There is usually somebody at the firm who has seen our problems in other facilities and has answers. That is priceless.

Ensemble Health Partners is still a relatively new company, and I would want to see a more streamlined standardization process in the future. I am also careful about what I ask for because we enjoy the benefit of a partnership where the executives are just a phone call away and will make things happen. But 80% of the time, we just need to do what we know is the right thing to do. We would like to automate all our processes and almost perfect them. From any revenue cycle firm, what I want to see is 100% clean claims out the door with every client. The closer we get to that number, the better we will be. There is an opportunity for how we can automate a lot of things and understand that each client has different nuances and uses different systems, so Ensemble Health Partners needs to layer resources on top to really plug and play.

Ensemble Health Partners missed expectations in three particular areas. One area is our employed physician group's A/R days because it is higher than the industry average, so the firm has really missed the mark. There are reasons why they missed the mark, and we are moving in the right direction, but it has required constant prodding from our organization to move that needle and for them to meet expectations. The second area was related to waiting times. There was a time when some of our patients had to wait a while to register, so that was another missed expectation. The third area they have been missing expectations in is patient statements. There have been inaccuracies and all kinds of problems along the way that have been worked on, but the firm has missed expectations. We get a lot of patient complaints about statements.

Ensemble Health Partners moved to the top score for strategic ability when they hired Jim Gaffney and his team from PwC. He has connections in areas I don't know anything about, so I reach out to the firm, and they give me a lot of information. They save me a week's worth of research. The firm has been beneficial to me because I am trying to make business decisions, and I can go to them and ask how to build something. The executives are highly responsible, accessible, and involved.

Ensemble Health Partners' strength is on the hospital revenue cycle side more than the physician side or any other ancillary side. The firm is really focused on cash and is driven by metrics to a higher extent than we were before. How Ensemble Health Partners manages their business is through KPIs, and they are very data driven.

For the most part, the firm has done a good job. They have done what we asked them to do. Our biggest issues were talent and resources, and Ensemble Health Partners was able to solidify things. We don't have to deal with those issues on a regular basis. The firm has the same struggles we have with recruiting, but the firm is certainly structured better to recruit than we are as part of a health system. So Ensemble Health Partners has done a good job maintaining resources.

From a client standpoint, Ensemble Health Partners' responsiveness was extremely high, and they desired to find win-win solutions. When I approached the firm because the contracts were big, and lots of things came up that we didn't anticipate, we have always been able to work through things without going to the letter of the contract because the contract didn't anticipate everything. The level of collaboration and partnership exceeded my expectations, and my expectations were high. We are still probably in the honeymoon period, but I have had a number of relationships that did not go this way, so I have a good basis for comparison. The firm has behaved like a partner and not like a vendor.

High-level things are going well with Ensemble Health Partners. We continue to push for a higher performance level, but we have come a long way in the last few years and have made a lot of progress. When we internally ran our revenue cycle, things were a mess. Bringing in Ensemble Health Partners was one of the earliest moves I made when I got here, and we want to expand the firm's scope even more. The firm partners with us, and we have had a decent journey.

I am starting to struggle with Ensemble Health Partners' client delivery model. We have a liaison for each of our markets, but some markets are in only one hospital while other markets are in several. I like my market liaison, but they are trying to cover several hospitals. If everything is smooth sailing, maybe one person is appropriate, but with all the changes healthcare is going through, my person barely has enough time to cover the issues that bubble up, be proactive, and exceed my expectations. Ensemble Health Partners wants us to go to our liaisons, but that makes it difficult to understand the firm's structure, so we don't know who is accountable for the different functions. The people on the patient access side are more visible, and it is easier to get to them, but I don't know who some of the leaders are because I go through my liaison.

I have either worked with or been exposed to several of Ensemble Health Partners' competitors, and Ensemble Health Partners has a dedication to maintaining excellence that I have not seen in other firms. One other firm, which I have tremendous respect for, used to be like that, but they lost that excellence as they grew over time. A testament to Ensemble Health Partners' team is that as they have grown over the last few years, they have still maintained that level of excellence. It is remarkable.

I have good access to the Ensemble Health Partners' executives. I don't play that card very often, but if I am not getting the attention I need from our designated leader, I can pick up the phone, and the executives will answer my call.

I have high expectations for my Ensemble Health Partners revenue cycle team. They can make a patient experience very good from a quality perspective, but they can also make it miserable because of what they do. The firm is such an important part of the patient experience, and a little mistake here or there can make a problem. I think that the firm could provide more executive coaching to some of their managers to help them understand what overcommunication is and the power of relationship building with the people on the team. There is also an extensive amount of training that is needed for the frontline workers to really understand things. The pandemic has played a role in the lack of training, but I don't want to use that as an excuse. When a company takes somebody off the street and puts them in the revenue cycle, it takes years before that individual has a full understanding of what they are doing. That is not a secret; the firm just needs to own that and talk about it a little more.

I recommend Ensemble Health Partners all the time. They can be trusted. They do what they say they are going to do and make a difference positively, not only for the bottom line but also for the people that work in the organization. Our staff was afraid that I brought

the firm in because they didn't know enough. Now, our staff thanks me for bringing in the firm. The firm has made an impact on our culture and a big impact on our bottom line.

I think Ensemble Health Partners has dealt with some of the same things that everybody has dealt with over the last year in terms of staffing shortages. And sometimes in certain areas, they need more people. But we are dealing with the same things. I don't know that that issue is specific to the firm, but that is something I have noticed. The good thing about Ensemble Health Partners is that because they are big, they can pull in people from other projects if we need them for something specific. But the firm has struggled to hire people, just like everybody else.

I think that driving tangible outcomes from the firm's perspective is not waiting to be told what to do; they need to be telling us as the client what we are going to do. They should be identifying a problem before I identify the problem, and they should put a work plan together to get where we need to go and then drive the outcomes and communicate consistently throughout the process. The firm should consistently come back to us and tell us what progress has been made. In aggregate, I have had to pull way more of that from Ensemble Health Partners than they have pushed to me. That has been a little disappointing for me. For instance, we had a flaw inside of our system, and it was causing the A/R to build up. I brought the issue up to the firm, and they were slow to react, slow to put a plan in place, and slow to execute and drive. I constantly ask for progress updates, and I have to pull more from them than I feel I should need to.

I work pretty closely with some of the firm's people, and I can text, call, or email them at any time of the day. They are available. They do a good job, and they respond quickly to our requests.

I work with Ensemble Health Partners very closely. I feel like they are a part of my team. They are a great partner, so I am pleased with them overall. I have had a very positive experience. And Ensemble Health Partners is fantastic with executive involvement.

I would give Ensemble Health Partners the top score for staff, but I have had to switch some people out with people who work with my style better. I made those switches based more on personality than proficiency.

I would like to see more proactiveness from Ensemble Health Partners' leadership and staff to tell us how we can perform better as opposed to Ensemble Health Partners having us bring up the issues. The firm is getting there, but I wouldn't want to recommend Ensemble Health Partners until I see more consistency in their performance. And that is just going to be associated with time.

I would tell people that we have found that it is very easy to add statements of work and scope with Ensemble Health Partners, and I would tell others to make sure they get the whole scope on day one. Ensemble Health Partners is a great company to work with. They will go the extra mile. They don't enter a contract to be average or to fail. The firm is there to excel, and they want to excel. They want to know that they are the best, and they do what it takes to be the best.

I would tell somebody who is thinking about going with Ensemble Health Partners to build trust, get to know the company, and talk to people. One company isn't going to have expertise in every area, and when there are companies like Ensemble Health Partners, there is a reason to outsource things to get desired results.

If I had to change anything about Ensemble Health Partners, it would be the speed of creating enhancements. The firm is working on enhancements, but from my strategic perspective, they can't do those things fast enough.

If someone called me asking what I thought of Ensemble Health Partners, I would help them go into the decision with eyes wide open. They need to know what they are getting and what they are not getting, and I would help them to set their own expectations. I think if an executive's expectations are set appropriately, they are going to know the firm's weaknesses and strengths, and generally speaking, they are going to be fine. For myself, there have been some times when I didn't have the background of what the firm's strengths and weaknesses were, and I got surprised along the way.

In an environment where we are constricted for resources, automation is certainly the way to go. Ensemble Health Partners has met quite a few initiatives in automation, certainly in terms of using tool sets and optimizing the tool sets. Optimizing our EMR is one thing that we press on Ensemble Health Partners on a regular basis. Our EMR vendor is always coming up with something new, and we want to make sure that we are taking full advantage of that.

In an optimal scenario, we would get a series of regular reports, and with the number of clients that Ensemble Health Partners has, we would think that they would have that down to a science. However, I have had to create all of the reports behind the scenes. Doing regular reports is not outside of the firm's technical ability. They have great computer systems, and it would sure be nice for me not to have to recreate the wheel.

In hindsight, I would have outsourced our revenue cycle sooner than later. The key people in my organization must be comfortable with every decision, so we have to take small steps. We have learned that we could have done things more quickly.

In most of our calls with Ensemble Health, some executives are present. The firm is remarkably adept at speaking about things, from the national strategic perspective around the revenue cycle and healthcare down to the nitty-gritty of the CPT codes. We are not the firm's biggest client, but we don't feel less loved because of that. We are one of the smallest children in the family, but the firm does not forget about us.

In the scheme of the firm's overall business, we are not that large of a piece of the pie. Ensemble Health Partners has resources that work specifically on our things, but sometimes we get lost in the mix.

In the time that Ensemble Health has been billing for us, they have come to me many times to say that they have found an opportunity for improvement. From a communication standpoint, I understand what is going on with the revenue cycle, but there is a night-and-day difference between Ensemble Health and other firms we have worked with. We felt like the other firms were pulling our teeth, whereas Ensemble Health comes to me because they want to collect.

One criticism that I have about Ensemble Health is that as an organization, they have turnover within their leadership team, specifically within their senior leadership team. Sometimes it is a bit difficult to know who to go to within the organization to find the right answer.

One of our other vendors is making it harder to work with Ensemble Health Partners. I really wish that vendor wouldn't see the firm as a competitor. Ensemble Health Partners is a great partner; they have grown, and we have not seen our service level change at all. The firm is collaborative in the way they approach solutions. When we win, the firm wins. The firm has had some turnover in their mid-level leadership team. We haven't had any interruptions because our local account leadership team from Ensemble Health Partners has been so strong. The firm has been extremely strategic on the hospital side. The firm has seemed a little new on the physician side, and I believe they will continue to improve. If I were starting over, I would absolutely go with Ensemble Health Partners again.

Our annual spending with Ensemble Health Partners is a pure contingency percentage to collect that is very competitive. Ensemble Health Partners' model is a mix between cost savings and a guaranteed revenue lift. They work with us if we miss things.

Our engagement with Ensemble Health Partners will certainly be maintained and could potentially expand based on the services they offer in the future and some additional things we are looking at. Ensemble Health Partners may start doing some things on the front end, such as registration and customer service training, that we haven't done before. The firm has also added some resources to the managed care area, and they have reached out to us to not necessarily outsource our managed care function but to augment it. Ensemble Health Partners is always looking for ways to improve things, make things easier on health systems, and increase our net revenue. We have a partnership, so if the services the firm offers help improve our net revenue, then the firm benefits as well. That is one of the things I love about Ensemble Health Partners.

Our organization was making some big changes in our revenue cycle, and we had difficulty recruiting. And recruiting is even harder now than it was at that point in time. The pandemic certainly accelerated some of our issues. And we were at risk because if we had lost even a handful of people, we would have worried about our ability to collect. So that was why we decided to outsource. And we selected Ensemble Health Partners because several things stood out about them compared to the things that stood out about their competitors. Ensemble Health Partners' leadership team was a very compelling point, as well as their goals, objectives, and performance.

Our relationship with government officials is crucial, and in the revenue cycle space, there is an endless battle with hospitals and managed care organizations on ensuring that we get paid for the services we have rendered. Ensemble Health Partners has partnered with us to help convey a message around the issues we see and to hopefully effect change. Ensemble Health Partners has collaborated with us and provided additional support as part of our partnership.

Some members of our executive team are very strongly aligned with Ensemble Health Partners, but there are other folks that aren't satisfied. They feel that there is a much more widespread issue of the firm missing expectations.

The beauty of Ensemble Health Partners is that they are always open to considering other areas that they might help in. They have far exceeded our expectations, and they have been a fantastic partner. They deliver on the promises they make, and we find them to be extremely proactive. For example, they are proactive when there is anything changing in the revenue cycle space, and they were also proactive during COVID-19 and helped us navigate through that really well.

The firm definitely wants us to be successful because with the way the contract is written, if we are successful, they are successful. They don't get paid unless we get paid, so our interests align great. We still have to manage the contract. Ensemble Health Partners is certainly our partner and our firm, but they are not us. So there are going to be things that we disagree on, and we have to come together and discuss those things. But Ensemble Health Partners certainly wants us to be successful. There are opportunities with things that we can improve, and the firm could probably assist and be more proactive in helping us in those areas, but the firm does a good job.

The firm has opportunities to improve the quality of their staff with specific individuals, but we can't expect 100% perfection. On the operational side, there is some opportunity for more strategic ability from Ensemble Health Partners. I don't want to say that their strategic ability doesn't exist, but we are in the midst of a transition, so the firm's teams are having to become acquainted with our data and issues and figure out how they can make a meaningful impact. I am starting to see progress, but from a process perspective, Ensemble Health Partners has so many different departments running point on different things, so something may happen in one department but not get communicated to the other department or the centralized hub. Then something falls through the cracks. We have also had some misses because we are still trying to figure out who is doing what.

The firm is great to work with. I talk with them often, and they are happy to have that level of engagement with all our senior leaders. Our senior leaders will reach out to the firm, ask questions, and get prompt, detailed feedback. We will always have bumps in the road, but the firm fixes things quickly. We have regular meetings with the firm's executives, and I can tell the next day that the firm actually did what we talked about. If we tell the firm something they can improve, they are all over it, and they find a way to make that happen. Also, the executive I most interact with is amazingly experienced, and if they run into something that they don't have the authority to do, they will tell me. Additionally, the firm's analytics and consistent desire to add value are emblematic of a great partnership. The firm implemented a new service for all their clients. We didn't ask for that, but the firm had the ability to add value, so they did. That was a win-win situation for everybody. We have a really good relationship with the firm.

The firm is really a fully integrated part of our team, and that is how we should operate. I have people I can text about an issue and ask for help. We have a great partnership. The firm has done a great job. I am in communication with multiple folks from the Ensemble Health Partners team all of the time. The leaders are willing to just pick up the phone and address an issue. If I have an idea or something that I need to bounce off of one of them, they are very apt to just dive right in.

The firm's leadership is very responsive whenever I have issues. They meet needs and follow through. Most of the time, I call the leaders directly, and they handle things.

The firm's leadership takes hold of things and makes them happen. There are several examples of that. When there was a transition, our leadership was worried about the relationship with Ensemble Health Partners. The firm dove in and worked very hard, and things are going well. We know if we need something, we can call anyone at the firm, including the executive team. The firm has never told us no; they are very responsive.

The firm's success is our success, and that is what they feel and believe. All the way down to frontline leadership, the firm invests in their team members. They give their associates rationale for the importance of the work that they are doing and the importance to their clients. I have been really impressed with the leadership team overall. The firm's culture really drives client success. The partnership is good. We challenge the firm, and they challenge us. That is what makes a good partnership. Every time we have challenged the firm, they have come through.

The folks that I interact with are experts. They have a strong knowledge base in the revenue cycle. The leadership teams at Ensemble Health Partners pair up skill sets pretty well with what folks are going to be working on. They spend a lot of time recruiting good talent,

and that is hard to do in this environment. The firm has a depth of experience that is excellent. The Ensemble Health Partners' team follows up really well and closes the loop. That is a key component that has been really valuable. I don't have to reach back out and ask where things are. The answers that we get back are complete, and that is super helpful. The team is really process oriented. They are really attentive too. The leader of our sector is fantastic and does a really great job.

The leader of Ensemble Health Partners sets high expectations of what leadership should be in an organization. When we feel there is a concern or an issue, the firm responds immediately. If we see something that does not make sense, it is easy to pick up the phone and ask Ensemble Health Partners to look at things and find what is missing. They have been excellent and exceeded our expectations.

The minute the government started passing legislation that could impact the revenue cycle with the CARES Act and things of that nature, we were getting legal and financial analyses from Ensemble Health Partners on all the different things, how they would impact us, and what the firm's response was. The firm is consistently like that. They stay on top of any sort of legislative trend or managed care trend in the market. They involve us in lobbying efforts and in other legislative efforts on a proactive basis. The firm is definitely what I would consider a vanguard of advocacy, and they are really trying to improve the revenue cycle for healthcare systems.

The payers continue to challenge us on every front, so our focus is not just on the typical A/R days and on 100% of collections and point-of-service collections. Our focus is also on trying to drive down denials, and that involves interacting with our operators and getting more aggressive with the payers to mitigate some of their games. Ensemble Health Partners has the ability to help us with things, but I have had to push them on strategic pricing and pricing transparency. The firm doesn't like the number I want to get down to for denials, probably because that number is tied to some of the firm's compensation.

The revenue cycle is always a hot topic in our organization, and because of the magnitude of accounts Ensemble Health Partners touches through our healthcare process, there are always areas for improvement. As things get elevated and issues get raised, I am comfortable that the firm has the expertise and leadership to resolve things. Their leadership team knows the revenue cycle and stays current. Ensemble Health Partners is a good partner. We used to outsource our work to a different firm, and that was a disaster. Then we brought in Ensemble Health Partners, and the rest is history. The firm turned things around for us. They have the requisite expertise and know-how to run the revenue cycle, so I would recommend the firm to another healthcare organization and tell others to take a strong look at Ensemble Health Partners.

The technology we see from Ensemble Health Partners is definitely an improvement from the technology we have had in the past. Part of the preaccess function entails a scheduling component, and Ensemble Health Partners is working on solutions for self-scheduling, appointment reminders, and things of that nature.

There has been marked improvement in achieving the metrics we need, but there has been slow progress in other areas. Our net A/R days have not been moving as well as we would like, and we haven't cleaned up some of the issues we have within the A/R system. One of the key factors is the system we are using. I think Ensemble Health Partners does well with their connections, but they are struggling with our product. There are not a lot of firms with skill sets for our product. I still think Ensemble Health Partners is a great company and does great work.

There is always small room for improvement in our partnership. We have a lot of stressful things going on since we are in the optimization phase, and we need to collaborate.

There is really outstanding execution on everything. There isn't a lot that the firm has fallen short on. They do a phenomenal job. The team has done a good job on the front, middle, and back ends of the revenue cycle and has focused on the specific metrics that drive each of the components within the entire revenue cycle. I have worked with the firm's leaders for a long time and have a lot of confidence in the outcomes. We have almost closed out all the gaps.

Things are going really well with Ensemble Health Partners and have always been going well. The firm hit the ground running in the very first month of the contract. Their work during the pandemic was outstanding, especially given all the revenue cycle challenges that we had. We started out with not a great revenue cycle, and we have improved, largely due to the firm's efforts. When we worked with other firms on projects, they didn't have any opportunities with the revenue cycle because they thought our revenue cycle was great.

Things are going well with Ensemble Health Partners. We had a lot going on, and they assisted us dramatically. We relied on their expertise. They obviously acquired the talent that we have here, and we were able to supplement that during the process, and that was very helpful. It would have been very challenging to just rely on our resources during that time. Our project went well, and we had great outcomes. We were up and running quicker than we anticipated. So Ensemble Health Partners did a great job helping us through that. The project was a lot of work for everyone involved, but Ensemble Health Partners was able to build on those successes. We haven't lost any ground, and that is great. We have our days in A/R down significantly. The firm delivered on what they promised, and they continue to deliver. We have certainly seen improvements in our metrics, our cash, our revenue lift, and our revenue cycle.

Things are going well with Ensemble Health Partners. We have expanded their scope of work substantially, and that is a vote of confidence. We have turned over a lot of collections to them. When we do a major transaction, we have legacy contracts, but Ensemble Health Partners handles things like professionals. As we acquire centers and have organic growth, Ensemble Health Partners will be my go-to firm.

Through the implementation and going live, Ensemble Health Partners consistently exceeded expectations. We went live in a very short period of time. The time between signing the contract and going live was unusually quick.

Using Ensemble Health Partners, we have seen consistent improvement in pretty much every metric that we track, whether that be A/R days, denials, or cash. The value of Ensemble Health Partners that people often forget is the broad view that the firm sees across all their clients. If one of our payers isn't doing something, Ensemble Health Partners can provide insights into denials, contracts, and so on. They can provide insight, for example, that an issue is being caused by a systemic problem that we may want to take to our hospital association or bureau of insurance. The feedback from Ensemble Health Partners is very valuable. They know things we would never know if we kept the work in-house.

Value is defined by cost and quality, and although there are some gaps in our cost-to-collect, Ensemble Health Partners does not nickel-and-dime us for things, so we are on the upside for the price that we pay.

We are communicating a lot more; however, communication is a challenge for Ensemble Health Partners because of the model they use. They have a client-delivery individual tied to our facility, and all communication goes through our client-delivery person. That person works with all the teams at the firm. The problem is that if there are a lot of things going on, it is hard to get information. We run into issues with communication or delays in communication and try to move forward. There are certain things we could be doing better with the firm, and communication is one of those things.

We are growing, and there are things coming down the pike, so Ensemble Health Partners will grow with us. We are looking at a couple of things out of scope right now that we might add.

We are still not quite hitting all the metrics I would like. There is a lot of organizational distrust for the firm. People link most issues to Ensemble Health Partners. If a statement is not going out right, that gets labeled as the firm's problem, even if the problem was caused by a configuration issue. I see a lot of value in what the firm does, so I believe we are on the right track and have made a lot of progress over the last year. But we have a bit of an image issue with our board and our medical staff. Ultimately, our biggest issue is with rebuilding trust. Many think our revenue cycle is completely broken, but that is far from the truth. We have challenges, and Ensemble Health Partners is working to improve things. We have modified their scope slightly. I don't know what we will do, but expanding our work with the firm could be a consideration in the future.

We had some issues with Ensemble Health Partners and ended up having a conversation with the firm's leadership to talk through those issues. Ensemble Health Partners followed up on everything they said they were going to do. I had some relatively significant asks because there were people on our account that were not performing, and we were not getting the collaborative energy that we needed in order to be an organization that was always improving performance in the revenue cycle. So Ensemble Health Partners made some changes and delivered on the restructurings that we needed. There are several areas that we still need to get better in, but the conversation is different than what it was before. We are able to talk through things and see what we can do to make things happen. The collaborative atmosphere has improved greatly. The people at Ensemble Health Partners have listened to us and our needs. There has been a vast improvement in our experience and in the way we connect with the firm. Our partnership with Ensemble Health Partners is along the path of improvement.

We have a good working relationship with Ensemble Health Partners. Our relationship is one where we are not going to get ticky-tacky about every single penny going back and forth.

We have an agreement with Ensemble Health Partners on what they can bill us for, and they do not nickel-and-dime us. Everything is very clear in our contract.

We have key metrics as part of our agreement with Ensemble Health Partners, and they strive to hit those. When the firm hits those metrics, it strengthens our net revenue and how we collect.

We have run into some hiccups along the road with Ensemble Health Partners, so our experience hasn't been perfect, but as we prioritize the problems that we have and as we execute on those priorities, we are making our relationship stronger and firmer over time. I think our relationship is getting stronger a little slower than my team would like, and there have been some disruptions along the way, but in aggregate, we are moving in the right direction and continuing to strengthen the relationship. Some of the people that I work with on a day-to-day basis have never owned the revenue cycle in the way that I have, so as an owner, sometimes there can be a little bit of a gap there. However, I find that as I have conversations with them and as I provide some coaching along the way, they understand more, and they are receptive. The people from Ensemble Health Partners are great business partners.

We meet with the Ensemble Health Partners' executives on a regular basis. We know that if we have an issue, we can pick up the phone, and the firm is on things hands down.

We realized that if we worked with an outsourced organization with the size and scope of Ensemble Health, they would bring their expertise and would have the ability to invest in research and development to keep us on the cutting edge going forward.

We rely heavily on the firm to bring ideas and issues to us, and the firm does that on a consistent basis. We have regular meetings where we go through each department and their initiatives, where they are, and where they can improve. The firm does a good job with that too.

We used Ensemble Health Partners for services before our current engagement, and that allowed me to work with and evaluate the firm's team. That led to our outsourcing engagement. When we started the engagement, we were in the middle of several other projects and were dealing with the pandemic, but Ensemble Health Partners threw whatever resources were necessary at the engagement. They did that at no charge because many things were part of the overall relationship to ensure we were successful. Because of the COVID-19 pandemic, Ensemble Health Partners had to do a lot of things that they normally wouldn't do and had to rewrite their playbooks and statements of work, but they also brought people in. The firm's team is phenomenal. There is no doubt in my mind that the firm's leadership and team will do whatever they need to do to make sure we are successful, and that means a lot to me. Ensemble Health Partners is in the trenches with us, helping us figure things out.

We were in a desperate situation when we started with Ensemble Health Partners, and from that perspective, the firm did great. They came in, collected a bunch of cash, and brought some stability to the organization.

We were on a call with one of the firm's HIM directors, and they knew that a certain number of charges equated to a certain number of days in A/R. That is when we realized the team is really integrated. The firm's team understands the work we do from a coding perspective and how it impacts A/R. There is an interconnectivity between how the team operates when the HIM director understands days in A/R. That demonstrates a level of expertise because generally when we get into each one of these services, we are primarily focused on getting the claim coded and out the door. That is a good demonstration of how the teams work together within Ensemble Health Partners to really deliver a good result.

When going through a transition with our EMR vendor, Ensemble Health Partners worked extensively to make sure that we kept our best practices. They did an outstanding job. They played a huge part in making sure our revenue did not get hit, and they understood things.

When we outsource something, it is important to help the outsourced organization understand that they are still part of our organization. So we don't look at our relationship as our organization plus Ensemble Health Partners. Patients, service workers, physicians, and others don't care; they just want a well-performing service. Many times, we outsource something, and the firm says exactly how things are going to be, and that is what Ensemble Health Partners' stance was before we had a conversation with the firm

and made some changes. So that approach has changed substantially, and that is a good thing. We still have a way to help people understand that they have to be collaborative and not just take something to the 50-yard line and hand it off. We have to cross over to help out when needed. So we are working on that.

With Ensemble Health Partners, we feel like we found a full surface revenue cycle firm that truly generates results. The firm's ability to provide us with data and feedback on trends and create reporting has really helped our operations.

Without question, Ensemble Health has their act together. They are professional, and we can tell that they know exactly what they are doing. We can tell that they have a process and procedures that they follow. They communicate extremely well and are responsive. We feel like we joined the New York Yankees because Ensemble Health is an organization that has their act together.

VPs/other executives

Because of the engagement, we can send our CDI folks home to work remotely. We had several vacancies, and we just couldn't attract nurses to do the CDI work. Being able to do this work remotely through the firm's Ensemble IQ system and algorithm and be able to tag and query our software vendor has been great. Ensemble Health Partners also helped us get automation through our software vendor.

Ensemble Health Partners has done some underpayments for us. Underpayment is a huge area of single-case agreements. We were just accepting dollars that were proposed by insurance companies without pushing back, and the firm uncovered a number of things for us. So we have some reprocessing going on. I am very pleased with the firm's performance, and so is the senior leadership of our organization.

Our coding accuracy is much better with the firm, even though they are using some foreign coders. We have a mechanism in place to review the coding they are doing, and we are very comfortable knowing that they are not doing overcoding or anything like that.

The firm is doing a phenomenal job. Our point-of-service collections have increased dramatically, and we like the fact that our patients are not complaining. Collecting the money up front is important because we have an obligation to the insurance companies to collect the co-pays. We have closed a gap related to scheduling patients and collecting money. We are scheduling many days out and collecting money before a certain time, and that is a dramatic improvement that I have seen.

The firm is very responsive. I have worked with organizations that will push back and blame us for things, and we go back and forth. But Ensemble Health Partners is quick to raise their hands and say that they royally messed up. They have been a very responsive partner.

The firm keeps our doctors informed, and the firm shares new technology. They helped us reduce some significant costs by doing some due diligence for us related to switching software vendors. The firm didn't advocate for a vendor, but they presented the analysis and market intelligence for us. They are involved in our strategy, and they help us leverage the best things we can. They have also met all the service level agreements that we put in place.

We are holding the firm accountable for having the technology to maintain the costs for them to perform the service and automate everything. We are investing dollars, we are encouraging the firm, and we are having discussions with them at all touchpoints. We have cleaned up our balance sheets, and we have deployed all the resources, all the equipment, and everything to Ensemble Health Partners, end to end. The firm is responsible for making things easier for physicians. And even though they are a revenue cycle firm, they are acquiring small technology firms, so they are really building an infrastructure. I had an opportunity to look at their underpayment tools and their own internal Ensemble IQ system that identifies miscoding opportunities. The firm is developing in-house tools and partnering with bigger firms as well.

We are planning on having another department join Ensemble Health Partners. We see the service continuing to expand within the revenue cycle for as long as we identify opportunities. We are also exploring other things we can do with the firm, and we see our engagement being sustained throughout the length of our contract.

We had a lot of vacancies, but the firm filled all those positions, and the resources had the expertise we needed. Previously, we were forced to hire from our local communities, but the firm's pool is much broader in terms of where they get their resources. They are well resourced to cover us nationwide. And not only are we getting our money's worth in that regard but there are also revenue lift guarantees. In year one, we saw significant dollars.

We have a dedicated person from the firm, and we have an escalation process. We routinely review our operations with the firm, and one of the higher-ups of the firm attends those meetings. The firm always gives us feedback about what we are doing wrong and how we can improve. For example, one area of exploration is technology. The firm has proprietary software that they have built to capture the payments. But we are encouraged to go outside to compete for their services, and we can come back to the firm and tell them we would rather use a different technology. They connect with us on strategy in terms of how we align our resources and how we can coordinate services at the hospital. There are things we do that impact the firm's ability to avoid denials, so we have strategic meetings where the firm shares information to help us avoid denials. We include the firm in our meeting regarding how we will move forward. The firm is involved with us, and we are complete partners. We are not surrendering our whole business to them, but we have empowered them, and we trust that they will do well for us.

Guidehouse

C-suite

Based on the market and the size of our hospital, Guidehouse was a better choice than a firm I had worked with in the past. Guidehouse bought a company in our area that knew our managed care market very well, so Guidehouse has a lot of expertise in managing our revenue cycle.

From a relationship standpoint, things are going great. When it comes to our revenue cycle, Guidehouse is part of the team, and that is how people see it internally and externally. I am very satisfied with the firm. When I was in a crunch, Guidehouse brought certain resources on board, and I didn't have to pay an additional cost to set that up. So we have a true partnership with Guidehouse. They go above and beyond. We are also able to bounce ideas off of our contact from the firm, and even if what we need is outside of the revenue cycle, this person listens and will put us in touch with the right people at Guidehouse.

From an analytics standpoint, the firm brings a lot to the table. From a benchmarking standpoint, they have all the key metrics. The managed care contract negotiation side of things has been phenomenal. I have been thoroughly impressed. The meeting cadence that we have has been good. The firm has good technical people on their team as well. I have worked with numerous firms that didn't have experience in our state, so it has been a breath of fresh air that Guidehouse actually knows our state market. I highly recommend them, and I would work with them again.

Guidehouse has exceeded our expectations for cash flow and volume of cash collected. We have a dashboard where we can see that Guidehouse is doing very well on all their metrics. We look at a lot of indicators from accounts receivable to denials to billing lag, and Guidehouse is green in all those areas. I am very satisfied with the firm.

Guidehouse has turnover issues, and it takes them a while to train new people. We get where we need to be eventually, though.

Guidehouse is very professional, and they know their job. The firm is very accessible, easy to work with, and willing to help us with anything, including some things that aren't directly part of their job. Sometimes Guidehouse has some data we can use to help solve a certain compliance problem or other issue, and if we ask them for that data, they do the extra work to get it for us.

Guidehouse's leadership is good. They engage with me, and if I ask for something, they mobilize everybody.

Guidehouse's staff could be more proactive. The issue could just be that we have a lot going on here, but there are some things the firm could be more proactive with to take us to the next level.

I would tell a colleague that Guidehouse is as good as any company they partner with. People working with Guidehouse must tackle things up front and ensure they get a good liaison.

Our outcomes with Guidehouse have been great, and that is because of the partnership we have on both sides. Guidehouse has helped us tremendously with process improvement. Because Guidehouse is a larger firm, they have great resources, and they have expertise in different types of accounts that we are not used to encountering, so we can tap into their expertise as well. We have put a lot of things into place with Guidehouse that we have really benefited from, and we have increased our up-front cash collections and decreased our days in A/R. A lot of this is done by really taking an assessment of what is going on and looking at what we can change in that process. We don't just want quick wins; we want to make things sustainable. We have also automated some of our processes instead of doing things manually, and that also potentially reduces costs and reduces the likelihood of error.

Revenue cycle optimization is something we are engaging with Guidehouse on to try to improve processes A-Z. I want denials to be reduced, I want my bills to go quicker, and I want things to be more accurate going out. I want to ensure that we are following up on accounts, and if we are underpaid, I want to make sure that we are going back to the payers. I also want to make sure my A/R is not aging out. We had challenges with other firms, and Guidehouse was willing to commit more staffing to us and presented better solutions to address some of our A/R issues. We selected Guidehouse because they had a better product. Their proprietary system for analytics has been very helpful to me and my team. The firm took certain things on, got on some calls, and made improvements. For the clinical denials piece, they had a team that could help us.

The firm has to lead a lot of things. They get engaged and learn about different topics.

The firm's services needed some fixing, but now things are good. Before, Guidehouse was not communicating well, and they blamed us for everything. We had a very dysfunctional relationship, and Guidehouse didn't know how to fix it. That surprised me.

The only area of opportunity for improvement for Guidehouse would be in the overall follow-up process on their claims. When a remit comes in, cash is posted if the amount is less than expected. There are better strategies in the overall process that can be employed or explored, such as keeping the appeals and other things of that nature.

The overall partnership with the firm has been smooth. There is open dialogue. They don't nickel-and-dime me. If anomalies come up when I am analyzing the A/R, the firm addresses those. They are good at letting me know of problems that are occurring, and we work together as a team. The firm has been reasonable from a pricing standpoint. Healthcare is a challenging environment, and our state is a very unique and challenging market when it comes to payers. I felt like Guidehouse had a good grasp and understanding of capitation, fee for service, claims, and variable contracts. I had never been around a company before that had their expected reimbursement so closely tied to the contract, so I could tell that Guidehouse was diligent. As a trusted partner, they have done a good job.

The quality of the staff and consultants from Guidehouse is great. Those people have acted as though our hospitals are owned by them, but they have done that in a good way. We had a lot of technical issues with our EHR, and Guidehouse worked with us in spite of the challenges. Each of the staff members could serve in different types of committees proficiently. The value of a contract is no better than the person who is in charge of carrying things out, and the project leader was outstanding. Guidehouse has our interests at heart; I cannot say enough good things about the firm. All of the people from Guidehouse have gone the extra mile to resolve any problems.

We definitely get our money's worth. Guidehouse is a pretty low-cost firm considering they don't nickel-and-dime us. Their prices are way better than those of any other firm.

We weren't looking to outsource because we had always done things internally, so it was stressful for us to even consider outsourcing our revenue cycle. The idea was that Guidehouse would take over a lot of our expenses by centralizing things in our area and that they would do a better job overall, resulting in more reimbursement. Guidehouse has done an excellent job. We have been very happy with the firm. They have been a solution to a problem we didn't know we had. We were comfortable with what we did for many years, but evidently, there was more room for improvement than we realized. Our cash collections have never been better. We now get better information because we have a whole company with expertise in different subjects at our disposal compared to the one person we had before. Guidehouse has improved our quality and efficiency, and our employees have been happy working for Guidehouse. I haven't heard any complaints. Choosing to work with Guidehouse was a great move for us.

Directors

The people I work with from Guidehouse every day are awesome. The Guidehouse team that does the heavy lifting works hard to get things done, but it doesn't seem like the senior executives care about the day-to-day work.

We have been partners with Guidehouse for a long time, and it has always been nice working with the senior executives from their entity. However, the firm has lost some of their strong leadership, and the people who have replaced them do not reach out like the other leaders used to. It seems like when we try to sharpen our pencils for addendums and things, the firm's leadership has changed. Partnerships happen from the top down, but I don't feel like that is happening with Guidehouse.

R1

C-suite

Acquisitions are not what we worry about. Our worries are up-front cash collections, back-end cash collections, and whether R1 hit their goals and targets for the month. Cash is king, and we want to make sure that R1 is collecting and that we are aware of any issues with system upgrades or other system issues. Medicare holds are always a concern because Medicare puts on holds for updates in late December, so that tends to slow the cash flow. But those are the things that we concern ourselves with when we are talking to R1. I don't really care what R1 does, what they acquire, or whether they lose the entire senior administrative team as long as down here on the ground, we are collecting cash.

Everybody was and still is dealing with a staffing crisis. R1 has pivoted many times and brought different solutions. We had an opportunity to look at outsourcing some things overseas, and that was not always popular, but at least there was an answer versus having something completely fall apart. So R1 is trying to stay ahead of things. They have lots of facilities to look at and see trends happening. Because we are part of a larger network, a strategic benefit for us is that R1 can say what is going on in certain areas and what is coming, so we know when we need to pivot. That has been good.

First and foremost, R1's customer service is excellent. R1 responds to any needs or concerns we have, and R1 is really attentive in that regard. They have strong technical expertise through each different department of the revenue cycle. Usually, when we call R1 and have a concern, they have good, strong people there to help get things aligned and moving in the right direction.

I don't really concern myself with the high-level changes with R1. Our relationship with R1 has always been like relationships with most contract services; what matters is how good the people that the firm gives us in our region are. A while back, we had a lot of trouble with that, and I wouldn't have recommended R1 then. They were trying to manage things from afar, and that felt almost like an armchair quarterback. That relationship just wasn't working. After lots of conversations and fighting, R1 finally found a representative who was a very stable leader. So even with all the changes, the rigmarole, and COVID-19, R1 has done a good job providing good leadership members who fit the culture and are going to be present and visible with their boots on the ground. That has helped create a stable environment and has helped with staffing. Having stable leadership always helps with retention. Stable leadership has really helped with everything. That has been a very positive thing for us.

If someone is looking to outsource the revenue cycle process and find a partner, they would definitely want R1 in the mix of a bid process. I would say to sit down and talk with R1 because they have a strong bench strength to bring.

In general, the firm meets my expectations. If they are falling a little short or I think there is an opportunity, I pick up the phone and call the on-site lead person to answer my question. I wouldn't say that the firm consistently exceeds my expectations, but I certainly don't require that. The firm performs well, and they can collect the cash. I don't know that anybody consistently performs above my expectations.

One thing R1 has done well is with the workforce challenges that we are all experiencing right now, they have done some things to secure their existing staff.

Our revenue cycle meetings are really strong. Generally, we are aware of the problems equally as fast as R1 is. But they do a really good job of pointing out information when we ask for drill downs on what is going on, whether there was a system hold due to a Medicare update, or whether we had true claims issues. Payers are playing crazy games where they are requesting whole charts now more than ever just to call something a clean claim so that the claim will drop. Payers put things on hold and try to convert things from inpatient to observation, so we have to work with R1 very closely to make sure that we are doing things appropriately. There is a method to R1's madness in terms of how they lay things out at the closing point and look at the cash and the issues and determine which issues we are working on and how we are going to overcome them in the next couple of weeks. I have always felt that R1 is 100% transparent on the good and the bad, and that is always a positive.

Over the last few years, we have seen good performance from R1 in reducing our denials and A/R days, especially our aged A/R. There has been quite a bit of improvement. When I look at the high-level metrics, R1 exceeds our expectations. The firm has a good group of people.

Providers looking to use R1 should make sure to carefully review the scope of services that R1 will provide. Providers need to understand those scopes, what R1 is going to do, and the current gap analysis. And if the firm is not going to cover something, providers need to have a plan for that. Providers need to be very clear with R1 in the beginning and clearly understand what they are getting into.

R1 brought a wealth of knowledge and experience with them, and they brought to the table different tools and automation that we didn't have in our systems. Working with R1 provided us with a view beyond our organization's focus and showed us the best metrics out there. We might have thought we were doing well in a certain area, but when we compared ourselves to the nation, we realized that may not be the case. The firm's process across hospitals is pretty consistent. Shortly before we started working with R1, we consolidated everything and started to create specialty teams that focused on things across the company, but R1 took things to the next level for us.

R1 does a fine job with about 80% of the work, but 20% still hangs out there. Things are missed and aren't thought about critically. R1 has issues getting into details from time to time. For example, one of the most complex areas in the revenue cycle is the pharmacy space, especially with infusions and whatnot. There needs to be a little more detail because my team finds a lot of errors when we bill. The right claim can make a difference between getting a high-cost drug completely paid for or not. When it comes to R1's bread and butter, such as registering, coding, billing, and collecting, things are fine. The issue is when we get into nuances. R1 isn't looking for other things that could potentially go amiss. Sometimes they don't have the education to do relatively complex things.

R1 does great work, but their fee is on the high end. R1's services are not cheap, and our finance people don't like paying a lot of money.

R1 has a layer of tools that they are using, but they have to layer the tools onto our systems, so that can cause issues that are not always R1's fault. We are just a large company. And sometimes the communication also makes the first few months bumpy because we can't always foresee what the issues are going to be based on trying to marry the tools and systems. R1 can't always foresee the issues either, so I am not fully satisfied. But generally, after that two-month change period, we start to hit our stride again.

R1 has done a great job of being flexible with their models. When staffing has gotten more constrained, whether from a COVID-19 surge or from the vaccine mandates that our organization had, R1 has been very creative to identify what things can be done remotely or with pooled teams versus just sticking with what they have always done. The firm has been able to manage through a lot of the volatility where others have struggled. I would recommend R1; in fact, I have recommended them recently.

R1 has good technology. They bring a lot of different tools and data to the table and have data-driven discussions with us. We would like R1 to not just bring forward the data but also manage the revenue cycle and manage cash collections and everything we are trying to do around the revenue cycle. I want the firm to give us the tools around the operations themselves as well as get the data and provide analysis.

R1 has had some challenges with staffing, and those challenges have involved servicing our account. The firm doesn't have the infrastructure to support their growth. Their customers are the ones that suffer from that. While the firm listens to us, there is more opportunity to communicate issues and challenges up front rather than us finding things out through underperformance or metrics not looking good.

R1 is a great partner for us. While we outsource to R1, we feel like they are our employees, are on the same team, and have bought in to attaining our objectives and satisfying the mission of our organization.

R1's end-to-end work has been a little clunky. The handoffs aren't always as good as they should be for their different functions within R1. There are challenges at times. R1's communication within their organization could be better. I think internal miscommunication might cause clunkiness at times.

R1's executive leadership wants to ensure that we are maximizing our relationship and getting the most benefit from it. They listen to their customers.

R1's services are very good. We have a very good on-site leader who is able to help track things down. With purchased services of any kind, whether hospitals love or hate outsourcing their departments depends on the on-site leader, and we have an excellent on-site

leader here. We do seem to be in sync with R1's people. We make a lot of progress when we have alignment. I am very pleased with R1 in terms of our engagement. We attack our opportunities, and I feel like we have good communication with the firm. I am pleased by the service that R1 provides.

R1's pricing structure is pretty easy in that it is a percent of collections. R1's model is good in that they provide other services. So they have positions that we can supplement with if we want to.

The executives are involved as much as I would like them to be with R1. We have regular calls, and that is sufficient. If I need more, I get more. We have standing calls with our corporate person and the local representative, but if I need more, I can easily access the corporate person, and the local on-site person is always available. That person is not available 24/7, but that person always gets back to me. They are very good. The firm's people are all working as a team, and that is an important piece of the puzzle.

The firm has been a willing partner in things we have wanted to try and do. Some of those things have worked, and some of them haven't, but that is the way anything in business works; we win some, and we lose some. If we haven't fallen skiing, then we are not really skiing. We are improving our processes, and I am pleased with the firm being an excellent partner in trying new things and making improvements.

The one area where I would like to see improvement from R1 is proactivity when they have an update meeting to present performance data and talk about what they are doing. The firm has gotten much better at being proactive, but one or two team members are still learning that skill. A couple of individuals have done a great job setting the expectations and developing their team to be more forward thinking as they present information. One of the groups I worked with was essentially reading information on a piece of paper, but the firm has evolved and now has multiple ongoing projects for improvement with different maturity levels at any given time. And the firm is very quick to talk through what they are doing, how things are going, what they are adjusting, and what they are protecting.

The quality of the staff members is excellent, especially the firm's leaders. They are no better or worse than anybody I run across. I just try to find good people that actually fill all the slots. The firm has some of the same problems that other individual systems have in finding people to fill spots, but the firm does a good job. The firm's leaders and staff are above average. But they do have turnover. People leave because somebody else offers them more money. But the people are good, and the firm trains them well. I don't have complaints from patients about the firm's services.

There are always opportunities that R1 is working on. They set good goals and usually come up with good action plans to get to those goals. R1 is by no means perfect, but they exceed expectations.

Things with R1 are good; I love their team and my primary contacts. The firm continues to be very collaborative, communicative, and open. They make sure that we walk through things together. If something is going on, the firm is very quick to make sure I am right there with them and that I get whatever feedback they have. We have had several simultaneous engagements, and R1 has been great about keeping things on schedule when reasonable but has also been amenable to adjusting the timing if something is not going to produce the outcome that we are after. We have had very minor delays, but the firm has done a phenomenal job staying on top of things, continuing to move forward, and staying in good communication with everyone who is impacted by changes. My operators have consistently known what was going on, what to expect, and where to raise concerns if something hasn't gone as expected.

We are having some good success with R1. The outcomes from a patient satisfaction perspective are greater than what I expected. R1 has done a good job of balancing the technology with the physical presence to achieve something that is generally accepted. Strategically, they have had acquisitions of all of the technologies and the platforms over the past few years. I hope to see them bringing things all together into one package, assembling it, and showing us the value of all those things coming together. They still have some work to do. R1 is a national partner, which takes a lot of weight off of us. The integration and the partnership there make things very seamless for us, and we have a very strong site lead. That makes all of the difference in the world.

We continue to struggle with lowering the denial rates for our up-front denials, getting clean claims out the door, and making sure we don't have a lot of follow-ups. We have to go back and improve the back end of things. There is certainly room to improve on some of the operational metrics.

We deployed some new technology in a certain area for our hospitals, and we found after the review that we weren't getting all the revenue we should. Some of that had to do with R1's lack of expertise in the coding space. They didn't have the expertise to understand our coding. We need to let the firm know that we have something complex coming, and then they dive in and figure things out, but they don't ask. There is a communication gap. R1 needs to educate their customers more on the challenges and impediments the firm faces that keep them from billing and collecting promptly. The firm needs to tell us more about what we are doing wrong. That is very important. When R1 presents data to us, I always ask them what they need from us and what will help them do their jobs. For some reason, we still haven't gotten to the point where we can share key takeaways during our governance meetings. I don't know whether that is because R1 doesn't want to tell us what we are doing wrong. To have a solid partnership, R1 needs to be comfortable doing that.

We have made improvements, and the firm has helped us drive them forward. We have improved in terms of denial reduction, preregistration, and financial clearance. We still have improvements to make, and we are not perfect, but we have made great progress, and the firm has been right there with us. We get value from what we spend from top to bottom. I would recommend R1, and I do when I talk to people or go to meetings. I introduce people to R1, and I also encourage them to make the best decision for their facility based on their feedback. But I always recommend that people look at R1.

We have seen much more collaboration from the firm. All of the R1 executives that are servicing the account are on the calls and are talking about issues. Even at a market level, that executive-level involvement is something that I didn't see a lot in other firms.

We seem to get some good guidance out of the firm, but I don't participate actively in new ideas. The firm just comes to me. Like most places during the pandemic, the firm worked rapidly with us, and we came up with remote contactless registration and have now rolled it out. Now people can do on-the-phone registration and register at home, and that is handled way outside of any local ministry and is done corporately. Our organization is doing a lot of the work, but R1 is receptive to our ideas and is at the table.

When we ask for additional work, there is always an amendment to the contract. The additional things we ask for are often not things that the firm considers to be already in our scope. The firm is willing to take on more but at an additional charge.

VPs/other executives

As a whole, the leadership I deal with at R1 is responsive; I don't have issues with their responsiveness. They are quick to respond, but the product does seem to have a lot of issues pop up that we have to address.

As we were deciding to go with R1, I felt that R1 had positioned themselves in the market as a very technology-forward entity that happened to be in RCM. Contrastingly, a competing firm had hung their hat on being RCM operators that would become more efficient as they invested strategically in technology. Those messages were very different in the marketplace. We made the decision with our eyes wide open, and we agreed on how R1 was fashioned. We had good RCM leadership in our internal team, so we felt that if R1 started to go off the rails, we were reasonably covered. But the breadth and the depth of the challenges we have had recently have been very difficult for us. The challenges have strained our relationship with R1 a great deal, and they have hurt R1's credibility with a lot of our leadership. Our leadership wonders whether R1 knows what the heck they are doing. We have gone through a deep valley of despair. We recently had some positive things happen and are hoping that we are at the beginning of a nice trend out of the darkness, but the challenges have been extremely exhausting.

Given the choice, I would not buy R1's services again because I have seen other organizations who have done much better for a lower cost point. We are getting most of what we need and most of what we want for the money that we spend, but we are spending a whole lot of money, and I would expect more than we are getting.

I am satisfied with how R1 relates to the client and the efforts that R1 is making in a lot of areas. But sometimes I feel like we are sitting on a balloon and trying to push things down, and I am not satisfied with the sit-on-the-balloon approach that we are experiencing right now. I am not satisfied with the level of automation that R1 is putting in place to drive the metrics. When I think about automation, there are a lot of automated tools out there that could do a lot of the work of the people that R1 has working for them, and I don't think they have been very entrepreneurial about adding automation. They have added some automation, but I am not sure they have done it in the right place. I think there are other tools that they could very quickly get in place and implement that would drive success for customers, so I think they need to do more of that.

I think R1 is going to charge me more after the acquisition of Cloudmed is completed. I think there are probably opportunities there, but I am fearful that they are going to start wanting to charge me more for the product. I spend a lot of money with R1 and am not getting the results that I wanted, so I am not looking to spend even more money.

I will not refer R1 to anyone, not even employees. R1 needs to connect to patients. They need to look at the best interest of the clients and look at the best interests of who they are serving. Healthcare is a business, but it is also healthcare. The decisions that are being made impact patients downstream.

I would like to see more aggressive improvement in the patient relationship work that R1 does. R1 is the face of our organization, yet I would say they have not been very entrepreneurial in driving customer satisfaction.

I would tell R1 that they need to get results quicker. They are just too slow to get where we want them to get to. I want R1 to understand that there is a level of dissatisfaction that starts with the CEO of the organization and filters down, and they have to overcome that. Instead of getting the results that we expect, they have to overwhelm us with positive work, and they just haven't done that. So we have a lot of high-level executives who are not overly enamored with the results that R1 has achieved to date. I don't know whether R1's infrastructure is such that they can get done what they need to get done.

In some respects, I think things are going to get better. For the first time, R1 put in a senior vice president who really gets things. He listens and is very attentive.

Our contract is written to R1's advantage, so it is not in the best interest of our company. The contract is more about how much extra money they can get for little add-on things that they do. They have recently started claiming that some things are out of scope. We are having to dig into the contract and look at whether things are within its scope. Our relationship doesn't feel like a partnership.

Our relationship with R1 on the executive level has improved. We are meeting and constantly having conversations with them, and they are responsive to our needs. I can have a good relationship and go to them when there is a problem, and they will help push things.

R1 absolutely does not exceed my expectations. They don't have the skill set within their company to meet my expectations. And there is a lack of transparency. If I ask the right questions, then I get the information, but there are things that R1 should be forthcoming with before those things become issues. I see a lot of reactive behavior rather than proactive behavior, and that is continuous.

R1 has been behind with their technology deployment on the front end. Nothing has gone exceedingly well with R1 except our relationship development. The firm has also totally avoided nickel-and-diming us. Relationship development is important because when the !#\$%& hits the fan, we need someone who will not quit on us and who will work through issues with us. We have done a lot to be a very good partner to R1, despite the fact that they have let us down in a lot of key areas. I would not recommend R1 to others right now.

R1 has done a few acquisitions. They are trying to figure out how to possibly componentize their business a bit. In my opinion, that effort has to do with how customers might leverage R1's technology independent of their services. That possibility will be good for everybody because that will motivate R1 to make sure that their technology is keeping pace with the demand instead of customers just letting the firm run all their services to find cost savings. R1 is organizing themselves in a way that will better facilitate keeping pace with the demand with a stronger awareness of the customer's needs. That is a positive thing for R1. I think every health system out there right now is struggling to find, manage, and retain talent. Staffing costs are going to keep going up. If health systems can leverage a third party who can promise to deliver the positive results that health systems need at a lower cost, more and more health systems will do that. R1 is positioning their leadership teams to accomplish results at a low cost. With R1's acquisitions, R1 has acquired more technical functionality to complement their current technology solutions.

R1 has good people, but their processes, technology, and siloing within the organization have caused a lot of the issues we have had.

R1 has good people. The firm's strategic ability is improving. Their gig is executing well.

R1 has their best interests at heart, but not ours. If we had a true partnership, the firm would bring a lot of knowledge and expertise to the table. They should be bringing best practices, not shortcuts or ways to automate things that I don't feel are in the best interests of the company. Automating something is not always the solution. We still have to have human intervention for some things, and that is where

R1 is lacking because they want to write things off. They want to do drills. They don't want to pick up the phone and call payers. The feedback from my people is that the firm's people need to be trained on basic collection and follow-up practices because they just do not get those things.

R1 is falling short in several ways. They offer reasons for that, some of which are valid, but some of them are just excuses. The firm is struggling to meet our metrics. It takes R1 a lot longer to come up with outcomes than I have anticipated. They solve some of the little things, but they also drop the little things.

R1 may execute if we identify a problem or issue. However, we end up running into the same issues later down the road. The vendor is good at putting together a plan of attack, but the issues don't always stay away.

R1 still has a pretty long way to go with our organization to make us feel confident that they are the right choice for our growth. I suspect that will be a hard road because the folks in positions of responsibility at our organization don't have confidence in R1 right now. I am confused as to why some of the key leaders at our organization aren't more actively working with R1 to find solutions. Our leaders are not happy with what R1 is doing and want them to shape up. Our leaders have had physicians keep calling and complaining. I feel like our leadership thinks that if a physician is complaining about something, then the whole experience must be bad. But I think there are bad eggs everywhere. There are providers who are going to complain about everything and anything no matter what. Instead of working towards a solution, what our leadership wants to do is just complain about it. Our people that are in a position to help influence decisions don't influence decisions. Both parties really have to figure out ways to work together to be successful.

R1 was making some changes that looked promising, but in my personal experience, the firm wasn't exceeding our expectations. If I were starting over, I would spend an awful lot of time trying to convince people not to go with R1 from a services perspective. If R1 were more componentized, as I think they will be in the future, I would recommend that we acquire a bunch of their technology to help us. But with outsourcing, I would still try to convince the organization that there was a way that we could accomplish the same task by leveraging other technology in the market.

R1 will make every effort to hit the numbers that drive their bottom line, but they are less effective in the esoterics, like patient experience and some of the other detail areas. R1 is customer focused in a lot of ways, but they are also very focused on what drives their bottom line.

R1's metrics have been struggling. They are not doing things at the pace or the speed that our organization wants. R1 has got to do something about that because there are competitors of ours that are producing better metrics.

R1's performance is still very stable for us globally. There are pockets of things the firm is still doing really well, but there is a lot the firm is falling down on. There is example after example of things that are falling through the cracks and being done sloppily. I think that is attributable to a couple of things. R1 is growing, and they are not positioned internally or operationally for the growth very well. From a leadership readiness perspective, the firm is giving folks some really big jobs before those people have the requisite level of experience. Also, communication is terrible. R1 has sort of readopted the old-school accretive model, and the firm is trying to develop this approach where only the customer operations team interfaces with the customers. So the shared services teams only operate and do the work. New clients won't know any different, but what is hard for our organization is that this is not how we have ever worked with R1. And the firm is not connected internally well between the customer operations team and their operational folks, and that leaves us disconnected. We used to be really well connected, and now we are not.

R1's value proposition is that they will bring both a cost-to-collect improvement and a P&L improvement to an organization's top line. R1 says they will take an organization's denials from X to X minus Y, and R1 says that will have a P&L impact. But right now, R1 is many basis points below what our baseline was for cash collections. We look at several buckets of aging AR, and all our percentages have gone up, so things are very rough.

Some of R1's executives are very visible, but I am not sure whether their work and efforts are translating down to the rest of the organization.

The people I work with at R1 are very responsive and professional. I like working with them.

There are too many issues with R1's services. When we are auditing and trying to look at one thing, we find three other things wrong. That is the story of my life. That is what I have dealt with the last few years. We deal with issue after issue, and the issues get fixed, but then they happen again. So there is no permanent solution. The fixes are just a Band-Aid, and there is constant retraining on the firm's side because they have turnover. The firm has a big offshore operation, and those folks are used to widgets. They can do steps one through five, but they can't think. They just don't have that critical thinking capability, and that is no knock on them; that is just the nature of what we are doing.

There are very clear operational shortfalls in the R1 model. We have seen a lot of effort being put forth by all levels of R1, but thus far, that effort has not translated into achievement. All I care about is that my cash is at 100% and that my aged AR is sitting at historic lows in terms of its percentage of net revenue. Right now, we are not even close to either of those goals. Achievement is a numbers game and is driven by performance metrics, and right now, R1's metrics are awful. R1's performance severely lags behind where it should be. R1 believes that their process is scalable. I don't care about the scalability of the process. I care about cash in the door and denials. We are holding R1 to an appropriate standard, and we are not asking anything of them that we would not ask of ourselves in terms of performance.

Things are not good with R1. The quality of the firm's staff is one of our issues with the firm. R1 does not have good revenue cycle consultants. We started to see problems emerge. The problems were traditional issues we would expect to see with disruption, such as weaker than expected cash collections and certain aging AR buckets starting to grow at an accelerated rate. Those problems became the canary in the coal mine that warned us of the very challenging time we have had since. R1 has continued to struggle with collecting cash and managing AR. The problems have been multifactorial, and that has been challenging. It has been very surprising and disappointing for us to realize that the root cause of the issues has been a lack of focus on the fundamentals of how to collect.

We have certain base fee expenses, but it seems like sometimes there is some nickel-and-diming associated with those fees.

We have had reasonable success while working with R1. They perform pretty well on the KPIs that we have given them, but they have had a big issue with scheduling. Their ability to schedule patients for our imaging services has gone down dramatically. The service level dropped significantly. We have recovered from that, but the thing about R1 is that they are good to work with and deal with, but when we ask them to place efforts in a certain area, it seems like it takes a long time for those efforts to get in place.

We have had several senior executives assigned to us. The one we have now is more in the weeds. But they are knowledgeable and have walked the walk. I am hopeful that they are going to drive some improvement, but they are still new in this role. This senior executive seems to have a different approach and will hold folks accountable in order to drive improvements.

We look to a revenue cycle vendor as being the expert in helping us to prepare if there are regulatory changes or things that are coming down the pipeline. I have to push R1 on those changes instead of them being strategically helpful and in a good position.

We used R1 for a service, and the quality of their staff and consultants was poor. R1 goes from one extreme to the other. Those that are in management or leadership roles are of a much higher quality than the frontline staff that R1 hires and trains. I understand that everyone has staffing issues, but we have gone a long time with a number of vacancies that have impacted our ability to be successful.

We would like R1 to fix the silos within the organization. They have so many different groups working, and there are constant improper handoffs. The problem is if something doesn't fall within the vendor's technology, that is where they seem to struggle.

With all the changes R1 is going through, things are fairly promising. R1 is trying to build a more completely connected and integrated system. If R1 could create a seamless experience for patients on the front end using their technology, that technology could be pretty promising. There is a bunch of competition for that type of technology. But in the places where R1 is managing services already, if R1 can demonstrate that integrated technology can produce great results and improve the patient experience, that will be a big win for them.

With regard to the Cloudmed integration with R1, I really don't have any views at this point in time. We have been told that the integration will help expand some of the technology and services that we have, but I haven't seen anything to show me the impact of that yet. The possible benefits are something we have talked about, and I know it is still early in the process. I am excited about the thought of some of the services that Cloudmed can bring to the table with R1, but at this point in time, we haven't seen or they haven't been able to quantify the benefit of that to us yet.

Directors

Any shared sort of environment comes with its own challenges, and R1 does a lot of their work with an offshore, global team. I would say there is always an opportunity to improve the quality of the work in our shared service environments. That is difficult these days with everybody having staffing challenges, but there are lots of opportunities to make sure we get strong training through quality programs as we onboard new associates.

I don't think anybody in our organization would be doing the things that R1 does if we didn't have the firm.

If there is an issue, the people who I speak with at R1 don't just ignore it. They help me and look into it. It seems like R1 always follows up and coordinates things to help solve issues.

Our issues and problems are well known to R1. The issues are well communicated and discussed, and they are very visible. The firm's response has been ad nauseam. The firm has the intent to help us, but they do not execute well. The partnership is strong, and know what we need to do together, but we do not execute well.

R1 has a different sort of payment model. They do have KPIs and SLAs, and they react to those. In most cases, R1 stays within their contracted turnaround times, but some areas slip through.

R1 has good reporting and tools that they have developed and shared with us. They give us insights and a good line of sight on things that we are responsible for. We use R1's tools to see how we are doing on certain things. The firm's tools give us plenty of opportunities to work on our own shortcomings.

R1 is quick to respond when we have a need, and they take us seriously. They don't treat us differently than they treat the other side where they get the bulk of the money that they receive. R1 is flexible. If we ask them for something and then realize we would like to change it, they don't complain about getting a different version of something. Additionally, R1 stands out from their competitors because they don't tout things that they don't have like some firms do with the vaporware approach. R1 doesn't overpromise; they are realistic. They also don't ever make excuses; we have a good relationship in that sense.

R1 meets our expectations, but they don't exceed them. R1 goes after the big dollars first, and that is understandable, but a high percentage of our claims are the ones with small balances, and they don't get the attention that they need. At some point, the firm will have to come around and do the small-balance claims as well and not just let them age out. That is a place where R1 could improve.

Some valuable things that R1 brings us are their technology and the ability to work in a shared service environment. R1's technology really brings us a lot of great tools and capabilities, especially for follow-up, that we didn't necessarily have in all of our legacy patient accounting systems, and some of those tools do our work for us.

The R1 leadership is okay, but from the supervisors down, it is inconsistent. The firm does a lot of offshoring, which has unique challenges. There is a lot of turnover. The firm's delivery service is very inconsistent.

Things with R1 are pretty good. We communicate regularly. I feel like we are on the same page, and the firm is responsive. With the revenue cycle, there are so many things that can go wrong, and issues pop up constantly, but what makes R1 successful is the partnership we have with them and their communication. We have scheduled calls, but if something comes up on my radar that looks funny, I reach out to R1 and jump on a call with them. We have back-and-forth communication when issues arise.

Usually, R1's follow-up on issues is great, but with some changes, it takes a little longer to get the ball rolling. We don't always get outcomes as quickly as we would like, but the firm is doing what they can do.

We are very tight with the executives at R1. We speak frequently, and we have a big project that they are integral to. We are linked together to make improvements, and the firm is a very strong, strategic partner. All in all, I am very satisfied with R1. I am sure they are doing their best with the tool that we have given them to use.

We would not choose to buy R1 again because of their talent acquisition and retention. There are nuggets of things that R1 comes forward with that are helpful and have good outcomes. There are other things that are stuck in the past. R1 needs to make improvements, and the firm is not doing that well or quickly enough. They need to bring in the right talent. Along with that, they need to have recognition in their own environment that they need to move things forward. R1 tends to think that the way things are designed still works even when the world has changed, and they haven't changed with it. We do spend a lot on R1, and the outcomes are mixed.

We would recommend R1 with caution. We would tell friends or peers that if they are going to use R1, they should make sure they have very explicit protections around performance.

When I send requests for information, R1 gets back to me very promptly. My contact reached out proactively when we had a situation come up, and we got things resolved within 24 hours.