

WAYSTAR

Strategies to alleviate disruption

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1

TODAY'S SPEAKER



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Let's get to know each other

What is your role within your organization?


- a. Front office + patient access
- b. Middle office + CDM + charge capture
- c. Back office + billing + denials
- d. Revenue cycle management + leadership
- e. Other



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2



Agenda

- Recent industry disruption + impact
- Reducing future cybersecurity threats
- Finding the right partner
- Value of a better approach

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3

3



Industry disruption + impact



4



Healthcare data breaches continue to rise

132+ million Americans (roughly 40% of the U.S. population) were affected by health-record data breaches in 2023¹

A far-reaching + costly concern

- 727** Large healthcare security breaches in 2023¹
- 256%** Increase in large data breaches from hacking in past 5 years²
- 50** States reported HIPAA security breaches in 2023³
- 20M** Average estimated cost per healthcare data breach¹


 ¹Modern Healthcare ²Healthcare Dive ³HIPAA Journal

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5



PHISHING ATTACKS

464%

increase in phishing attacks in the first 6 months of 2023¹

DATA BREACHES

30%

of 100,000 data breaches could have been avoided by better data management + security¹

RANSOMWARE


\$22M

Estimated amount paid to hackers during a Feb 2024 ransomware attack¹

DARK WEB

\$60

per medical record sold on the dark web according to CNBC¹

 ¹HEMA

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POLLING QUESTION #2

How has cybersecurity changed at your organization in the past year?

- A** My organization has made **significant** changes + investments in cybersecurity over the past year
- B** My organization has made **some** changes + investments in cybersecurity over the past year
- C** My organization has **not made any** changes or investments in cybersecurity over the past year

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7

7



CYBERATTACK RIPPLE EFFECTS

The February 21st cyberattack halted cash flow for healthcare organizations across the country, leaving lasting impacts

Data breaches result in lost patient confidence + impact care delivery

1 in 3

Americans estimated to be impacted¹

55%

Of respondents said they had to use personal funds to cover expenses²

80%

Of organizations suffered lost revenue from unpaid claims²

83%

Of organizations incurred additional expenses due to manual processes or new technology investments³

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¹Modern Healthcare ²AMA ³HFMA
Eliciting Insights Change Impact
Market Pulse

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8

POLLING QUESTION #2

How did the recent cyberattack affect your organization?

- A** My organization experienced significant disruption
- B** My organization experienced some disruption, but it was not significant
- C** My organization was unaffected



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9

9

INDUSTRY DISRUPTION + IMPACT

Options explored

OPTIONS

Wait for resolution and repair

Drop to paper

Submit directly to payer portals

Switch to a new vendor

CONSIDERATIONS

- Cash flow risk
- Unpredictability of timing and outcome
- Reliance on current systems not failing in future
- Cash flow risk
- Staff workflow dramatically impacted
- Only viable for short-term and likely for only highest dollar claims
- Not a scalable solution – requirements on provider IT team would be overwhelming
- Staff workflow dramatically impacted
- Reliance on *each payer* to provide visibility on eligibility, claims, denials, etc.
- Lack of functionality, automation would hinder revenue cycle performance
- Selecting the right long-term partner
- Implementation time + proven success
- Enrollment requirements
- Client success track record



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10

10

INDUSTRY DISRUPTION + IMPACT

Going direct to payers: A limited strategy

| | What you deserve | Limitations of direct-to-payer |
|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Infrastructure | <ul style="list-style-type: none"> + Rapid proven implementations + Certified security architecture | <ul style="list-style-type: none"> - Connections must be built for each payer - Security protocols maintained for each payer |
| Scale + efficiency | <ul style="list-style-type: none"> + A simplified enrollment experience + Ability to operate at scale across all payers + Normalized, enriched data and claim edits | <ul style="list-style-type: none"> - Labor intensive enrollments - Individual submissions (by claim, by payer) - Each payer would require their own edits + normalization efforts to be built and maintained |
| Functionality + workflow | <ul style="list-style-type: none"> + Claim management: Batch submissions, curated edits, proactive statusing, work queue prioritization + Payer payment management: Automated reconciliation, splitting + posting + Denial + appeal management: Avoiding denials + automating appeals + Data visibility: Analytics to provide transparency | <ul style="list-style-type: none"> - Manual or inefficient workflows to verify eligibility and submit claims - No functionality or support with posting or reconciliation - No defense against payer denials - Transaction logs likely to be only visibility provided |
| Support | <ul style="list-style-type: none"> + Industry leading support and a responsive, knowledgeable team | <ul style="list-style-type: none"> - Difficult to predict what kind of support payers will be able to provide |

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INDUSTRY DISRUPTION + IMPACT

Switching to a new vendor

Factors to consider:

| | |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Partnership | <ul style="list-style-type: none"> + The right long-term partner + Positioned to offer innovative solutions that grow with your organization |
| Implementation + Enrollments | <ul style="list-style-type: none"> + Time and resources required + Proven success from existing clients |
| Functionality + workflow | <ul style="list-style-type: none"> + Solution offerings that span the revenue cycle + Leverages technology to improve efficiency + Flexible workflow to meet unique needs + Analytics to provide transparency |
| Support + Security | <ul style="list-style-type: none"> + Industry leading support and a responsive, knowledgeable team |

A success story:

Accelerated Implementation Program

Able to send claims in 72 hrs: Within the first 48 hours of go-live:

| | | | | |
|-----------------------|-------------------------|---------------------|-----------------------------------------|------------------|
| 24 hrs. | 48 hrs. | 118K+ | \$42.5M | 132 |
| System design + build | Payer mapping + testing | claims transactions | value of claimspayers covered submitted | (no enrollments) |

| Wednesday Feb 21 | Friday Feb 23 | Saturday Feb 24 | Sunday - Monday Feb 25 - 26 | Tuesday - Wednesday Feb 27 - 28 |
|---------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------|
| • Cyber attack | • Request received to start install ASAP, agreement at 7pm | • Environment created • Secure file exchange • 1 st claim files received | • Payer mapping + responses generated • Payer route validation • EHR receipt confirmation | • HB + PB claims live |

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12



13

REDUCING CYBERSECURITY THREATS

5 Strategies to explore



- Asses your vendor's ability to serve + support you**
- Check vendor certifications + assessments**
- Ask vendors and partners key security questions**
- Strengthen existing security + access controls**
- Train employees regularly on data security + compliance**

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14

14

REDUCING CYBERSECURITY THREATS

Tip 1: Access service + support

Questions to consider for your RCM vendor

What is your average **implementation satisfaction score**?

How often do you meet **implementation timelines**?

What is the average **client support satisfaction score**?

How long does it take to reach a **live support** representative?

What is your average turnaround time on **support case resolution**?



15

REDUCING CYBERSECURITY THREATS

Tip 2: Check certifications + assessments

Ask about these common certification standards:

SOC 2 Type II

HITRUST r2

PCI DSS

Security information and event Management system (SIEM)



16

REDUCING CYBERSECURITY THREATS

Tip 3: Assess common security standards

Ask these key security questions:

Questions:

How do you **monitor systems** for suspicious activity?

What's your process for **assessing vulnerabilities** in your systems network?

What is your **recovery strategy** if you're targeted or hacked?

Answers should include:

- + 24/7 monitoring
- + Advanced technology
- + SIEM systems
- + Regular vulnerability scans + penetration testing
- + Threat intelligence (collecting and analyzing information about the latest cyber threats)
- + Actively searching for weaknesses attackers could exploit in the future
- + Procedures for identifying, containing, and recovering from an attack
- + Communication plan for clients that prioritizes speed, transparency, and ongoing communication

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REDUCING CYBERSECURITY THREATS

Tip 4: Strengthen existing security + access

Ask your IT department to:

Require frequent password rotations

Implement two-factor authentication

Review IP whitelisting settings

Monitor user activity

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REDUCING CYBERSECURITY THREATS

Tip 5: Regular training on data security + compliance

Make sure every employee completes regular training on the most common methods of cyberattack, including:

Email

QR codes

Mobile

Working remotely



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19

19

POLLING QUESTION #3

How confident are you in your organization's security strategy?

- A** Very confident
- B** Somewhat confident
- C** Not confident

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20

20

POLLING QUESTION #4

How confident are you in your RCM partner's security strategy?

- A** Very confident
- B** Somewhat confident
- C** Not confident

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21



22

RCM PARTNER TABLE-STAKES

What you should expect from your partner

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>All claims + payers</p> <ul style="list-style-type: none"> • Commercial, Medicare, and Medicaid in all 50 states • Government, commercial, auto, workers' comp attachments • Smart routing of Web + EDI connections to payers | <p>Remote + secure access</p> <ul style="list-style-type: none"> • Real-time integration with Medicare FISS • Regular security + compliance audits including PCI, HiTrust certification and SOC 2 • Secure, cloud-based solution with remote and mobile access | <p>Service + partnership</p> <ul style="list-style-type: none"> • Single platform, vendor and support contact • Exemplary NPS score + 95%+ client satisfaction rate • Seconds to reach live support |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

A unified platform to meet your connectivity, security, and service needs



THE VALUE OF A BETTER PLATFORM

Not all RCM partners are created equal

| | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>RCM partner table-stakes.</p> <ul style="list-style-type: none"> + All claims + payers + Remote + secure access + Service + partnership | <p>The right data. The first time.</p> <ul style="list-style-type: none"> + Identify coverage + Automated authorizations + Curated edits | <p>Efficiency within workflow.</p> <ul style="list-style-type: none"> + Proactive claim statusing + Paperless processes + Automated prioritization and work queue routing | <p>Transmission isn't sufficient. Payments are what matter.</p> <ul style="list-style-type: none"> + Patient + payer payment reconciliation + posting + Seamless patient + provider experience + Performance monitoring + analytics |
| <p>Proper data upfront decreases denials, speeds payment</p> | | <p>Faster + fuller payments</p> | |
| <p>A single platform provides workforce flexibility while increasing security</p> | | <p>Efficiency gains reduce effort + improve accuracy</p> | |



AUTOMATION IN THE REVENUE CYCLE

Driving efficiency across the entire process

1 Eligibility Verification

Use of RPA to augment missing data from X12 in order to **return richer, more accurate benefit information** as well as identify potentially missing insurance coverage

2 Estimation of Patient Responsibility

Use of machine learning (AI) to identify payer adjudication rules and RPA to retrieve **real-time updates on patient financial responsibility and deliver truly accurate patient estimates**

3 Prior Authorizations

Use of machine learning to **identify upcoming services requiring authorization + RPA to initiate and follow-up on authorization requests**

4 Patient Payment Optimization

Use of predictive analytics to **provide tailored payment options and automated identification of charity** determination while delivering **personalized communications to drive self-service payments**

5 Revenue Capture

Use of machine learning to identify accounts with a high probability of **missing charges and DRG anomalies** to maximize revenue opportunities

6 Claim Status Checks

Predictive analytics to optimize when to **check status of claims**, use of **RPA to retrieve updated claims status** information, and AI to **normalize each payer's unique remark codes and auto-assign disposition codes**

7 Denial Management

Predictive analytics to **identify those denials most likely to be successfully appealed** in order to guide workflow

8 Payment Posting/Reconciliation

Automated **matching of claims to remits, posting of payer and patient payments**, including remit splitting and identification of missing payments as well as **reconciliation of all payments**

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25

25

AUTOMATION IN THE REVENUE CYCLE

Unlock additional benefit via a platform



Examples of benefits derived from a platform-based approach

Improving performance on self-pay patients

- Coverage detection hit rates increased by accessing claims history
- Pre-claim coverage detection enabled by utilizing automated eligibility verification as part of claim submission

Improving performance on patient transparency

- Infusing pre-service estimates into the patient-facing application allows patients to see the estimate alongside their bill and payment history

Improving performance on statusing claims

- Incorporating remit data into machine learning algorithms enable more visibility into payer and claim-specific response times leading to more effective status schedules

Improving performance on denial management

- Denial prioritization improved by incorporating remit data into machine learning algorithms
- Connecting claims, eligibility and denials allows for one-click eligibility verification and pre-populated appeals

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26

26

SECURITY FRAMEWORK

Proactive monitoring + risk mitigation

Ensure early detection + swift resolution

- Systematic deployment of comprehensive assessments
- Helps identify, address, and resolve vulnerabilities in systems and infrastructure

Rapidly remediate and prevent security incidents

- Proactive scanning and analysis of systems
- Helps identify potential vulnerabilities

Vulnerability assessments

Penetration testing

Understand attacker techniques + mitigate risks

- Ongoing gathering of raw, undetected threat information and security-related insights from multiple sources
- Helps analyze and uncover trends, patterns, and relationships to inform responses

24/7 US-based system monitoring

Identify potential threats and prevent disruptions

- Preventative security mechanisms
- Collect and analyze data from various sources across our network, including firewalls, intrusion detection systems, and endpoint security solutions

Threat intelligence

Security awareness training

Incident response plans

Security information and event management

Ensure best-practice approaches

- Mandatory cybersecurity and data protection training for all Waystar team members
- Helps ensure our team members are well-equipped with the latest tools and education for cybersecurity

Respond to and minimize disruptions

- Formal incident response plan
- Includes procedures for identifying, containing, and recovering from an attack

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Value of a better approach

VALUE OF A BETTER APPROACH

Understand the right platform for you

Enriched data and valuable insights

- Smarter and richer benefits information built into your workflow
- Automated data retrieval based on payer + service-specific rules
- More proactive + meaningful claim statusing
- Transparent dashboards with root-cause analysis

Intelligent and purpose-built automation

- Enriched, pre-populated data to mitigate and respond to denials
- Appeal prioritization based on machine learning applied to payer data and payment history
- Predictive analytics to forecast remit timing to reduce unnecessary effort

Proven and accessible support

- High net promoter scores as an indicator of client satisfaction
- Implementation satisfaction and timeliness as an indicator of proven and scalable solutions
- High customer support scores and low wait times as an indicator of ability to respond when you need it

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29

29

POWERFUL RESULTS

The value of a great partnership



Financial visibility

Automating the payment cycle reduces operating costs and focus on caring for patients



Quicker payments

Intelligent software streamlines and automates workflows that create excessive payment delays



Increased revenue

Simplifying the payment process increases the share of revenues collected



Greater productivity

Analytics, reporting, and forecasting tools provide visibility into areas for improvement



Rapid time-to-value

Ease of integration with existing systems enables quick implementation and realization of benefits

98%
first pass claim acceptance

46%
Reduction in eligibility-related denials

30%+
Coverage detection hits

2.5M+
continuously updated rules + edits

90%
Claims follow-up activities automated

95%
Remit reconciliations automated

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30

30

POLLING QUESTION #5

What is the most important for your organization when considering a new revenue cycle partner?

- A** ROI
- B** Innovative technology (AI + automation)
- C** Strong support + service
- D** Other



31

Q & A



32

Thank you

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