

CASE STUDY

How Munson Healthcare Optimized Financial Navigation with Technology and Expert Support



TAILORMED

Background

Munson Healthcare is Northern Michigan's largest and leading health system. Its team of medical experts, eight award-winning community hospitals, and related organizations serve people in 29 counties. Patients receive comprehensive, quality care locally, while also benefiting from Munson's partnerships with major institutions, including Mayo Clinic, Michigan Medicine, and Corewell Health.

Since 2016, Munson Healthcare has provided state-of-the-art cancer services through its **Cowell Family Cancer Center** and its **Regional Cancer Network**. Its holistic approach focuses on offering the latest advanced treatments and guiding patients at each step of their journey—from diagnosis to survivorship.



At a Glance:

CHALLENGE

Financial navigation was hindered by manual, reactive processes and limited workforce capacity, impacting Munson's ability to effectively serve the growing needs of its patient population.

.....

SOLUTION

Munson implemented the TailorMed platform in 2018 and its tech-enabled support service, TailorMed Complete, in 2022.

.....

PHASE 1 RESULTS

\$49M in approved funding

PHASE 2 RESULTS


- >15%** increase in patients assisted
- 44%** increase in program approvals
- \$193K** claimed copay assistance
- 49%** decrease in AR days on claims

CHALLENGE: PHASE 1

Manual, Decentralized Processes

Soaring healthcare costs have had a devastating effect on patients, providers, and the entire healthcare ecosystem. To address affordability, Munson's Cowell Family Cancer Center created its financial navigation program a decade ago. The program's financial navigators were tasked with conducting insurance optimization, helping with insurance and other program enrollment, and seeking out various forms of patient financial assistance.

However, the manual, multi-step, decentralized nature of their work created an administrative burden and limited program reach. Though the cancer center made efforts to identify financially at-risk patients, most patients self-selected into the program. As a result, those with the greatest financial need or collection risk did not always receive assistance.



“Financial toxicity is a horrible thing. Patients want to get treated, and if there’s a barrier there, we need to do everything we can to help remove it. At the same time, we only have so many resources.”

Ashley Ochoa

Coordinator, Coding Operations, Oncology Service Line

CHALLENGE: PHASE 1

Low Bandwidth Due to Staffing Shortages

At the same time, the cancer center struggled to keep its financial navigation program fully staffed with three navigators. Due to the specific skill set required—which combines elements of social work, medical billing, and other areas—openings went unfilled for extended time periods, often leaving one or two navigators to manage a heavy workload.

Cowell Family Cancer Center challenges at a glance:

- Lack of proactive patient identification process
- Inefficient workflows, leading to underutilized resources
- Overburdened team with insufficient capacity

“We had three full-time employees approved, but we couldn’t fill the positions. When one of my co-workers left, her position was open for almost two years. Finding a financial navigator is extremely difficult. You need someone who wants to be in social work, but also in finance. It’s hard to marry those two worlds. The result was that we didn’t have enough time or peoplepower. We were mostly relying on free drugs.”

Ashley Ochoa

Coordinator, Coding Operations, Oncology Service Line

SOLUTION: PHASE 1

Streamlining Patient Assistance with Technology

In 2018, the Cowell Family Cancer implemented TailorMed's platform to automate and streamline its financial navigation process. The platform proactively flags patients at risk of financial distress before their visit. It then matches patients with a comprehensive list of funding opportunities, drawing on more than 6,000 resources, along with the most expedited enrollment options.

The platform enabled Munson's navigators to house all financial assistance processes within a single system, rather than using spreadsheets and Google searches. TailorMed Financial Insights also allowed leadership to quantify program success and promote data-driven decision-making.

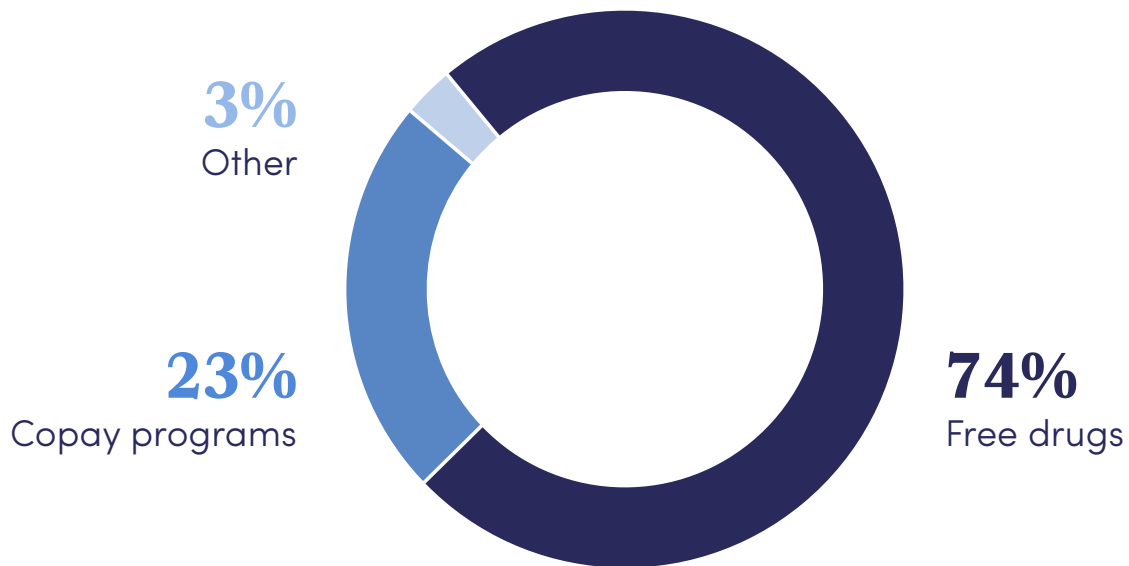
“We needed to think outside the box by leveraging any and all tools at our disposal. That's how we came to TailorMed,” said Munson's Ashley Ochoa.

RESULTS: PHASE 1

\$49 Million in Approved Patient Resources

During the first five years of its partnership with TailorMed (2018-2022), the cancer center's technology-supported approach improved efficiencies, broadened program reach, and increased financial assistance enrollments and approved funding.

Resources included manufacturer copay cards, foundations, free drug programs, and more.



1,300+
unique patients



1,500+
individual enrollments



\$49M
approved funding

CHALLENGE: PHASE 2

Claims Management

Despite improvements in program efficiency and outcomes, navigators at the Cowell Family Cancer Center still struggled with rising patient volumes and increased demands. Once patients were approved for financial assistance, the task of monitoring and processing copay claims drained staff's time and capacity. This resulted in a backlog of claims in Accounts Receivable and limited the cancer center's ability to collect approved funds.

Due to the time spent on program enrollment and claims management, the navigators had little time to devote to insurance optimization. And without being able to help patients find the best possible healthcare coverage, the team recognized they were only providing short-term solutions to patients' financial challenges.

“Following up on claims involved interoffice mail and faxing—and lots of phone calls with copay foundations. The process took so long that we'd have to bill patients, even after we told them they wouldn't be responsible for the costs. We also did quite a bit of writing off. We realized we needed to shift gears and focus on insurance optimization. Copay cards are fantastic, but if the patient is underinsured, it's like putting a Band-Aid on a big, gaping wound.”

Ashley Ochoa

Coordinator, Coding Operations, Oncology Service Line

SOLUTION: PHASE 2

Combining Tech with People Power

To combat these challenges, Munson determined that its financial navigation program required a staffing solution to supplement the technology solution. In late 2022, leadership decided to invest in TailorMed's tech-enabled support service to serve cancer patients at Cowell and four additional facilities. The service, **TailorMed Complete**, provides an expert support team of remote financial navigators.

The team is comprised of five navigators, bringing **more than 65 years of combined experience** working in health systems, pharmacies, and other settings. One member of the team was assigned as the primary navigator supporting Munson's staff.

In addition to working directly with patients to secure financial assistance, the TailorMed team took over the claims management process.

The objectives were to:

- Reduce the workload of Munson's staff
- Maximize program success
- Reach more patients in need

SOLUTION: PHASE 2

Scaling Navigation with Expert Support

Munson began utilizing the financial navigation staffing service, to complement its technology solution, in October 2022. To measure the success of this two-pronged initiative, Munson set goals using baseline metrics from the previous fiscal year.

By March 2023, six months post-implementation, administrators and staff hoped to achieve:

- A 15% increase in the number of patients assisted (baseline: 89 patients; goal: 102 patients)
- A 25% increase in financial assistance program approvals (baseline: 94 approvals; goal: 117 approvals)
- A 25% reduction in the average number of days copay assistance claims spent in Accounts Receivable (baseline: 183 days; goal: 137 days)

In addition, after one year, they sought to increase the amount of claimed copay assistance by 25%, plus the cost of investment in the software (baseline: \$300,000; goal: \$401,400).

RESULTS: PHASE 2

More Claimed Assistance and Expedited Access

The two-pronged approach of technology and expert support bolstered patients'—and Munson's—financial health. Within the first six months, the financial navigation program realized significant early gains.

In addition to the defined key performance indicators (KPIs), copay assistance collections rose from \$3,026 in January 2023 to \$22,405 in February 2023, an increase of 639%. **In March 2023, collections totaled \$30,183, representing the program's highest collected amount in a single month.**

In large part, the claimed copay assistance represents expenses that patients would not otherwise have been able to pay; thus, unpaid balances would have been sent to collections or written off as bad debt. In this way, the initiative has had a direct impact on Munson's ability to collect revenue.



>15%
increase in
patients assisted



44%
increase in
approvals



\$193K
claimed copay
assistance



49%
decrease in
AR days on
assistance claims

RESULTS: PHASE 2

Greater Patient Impact and an Empowered Workforce

This combined approach has empowered Munson's team to focus on what they do best. The staff were able to concentrate on insurance optimization, while the support team handled financial assistance and claims management. Notably, the primary navigator on the support team expedited processes that had been previously handled by staff.

The staff can now help patients secure optimal benefits (including supplemental coverage), enroll in Munson's internal assistance program, and offset living expenses, transportation costs, and more. They also meet with partners such as United Way to ensure a smooth transition of care to community resources. These changes have strengthened the financial navigation program, boosted workforce morale, and lowered the likelihood of burnout. In sum, the initiative has accelerated Munson's capacity to provide the high-quality, holistic care for which it is known.

With TailorMed Complete handling copay assistance and claims management, the Munson team was able to secure:

- **\$62K** in living expense grants
- **\$69K** in patient savings through the Medicare Low-Income Subsidy Program (LIS) or "Extra Help"
- **\$31K** in patient savings through the Medicare Savings Program (MSP)

Looking Ahead

Due to the early success of the partnership, Munson Healthcare plans to continue optimizing its navigation efforts in collaboration with the TailorMed Complete team.

The health system will also be better positioned to boost its financial performance by increasing revenue collection, reducing write-offs, and lowering drug spend.

More than five years after the initial implementation of TailorMed's platform, Munson Healthcare's leadership is enthusiastic about what the financial navigation program can accomplish with the combined power of technology and expert support.

“We’re working together for better outcomes. Now, I tell patients, ‘I’m going to transfer you to my copay card team,’ and that’s when I lean on TailorMed Complete. We’re able to get our patients into insurance plans where they can afford their medications, because TailorMed is doing the other work behind the scenes. It’s also made it easier for us to recruit staff. When someone leaves and we hire a new navigator, we don’t worry because we have the TailorMed team to fall back on.”

Ashley Ochoa

Coordinator, Coding Operations, Oncology Service Line

For more information, contact us at:

contact@tailormed.co

800.910.9801

tailormed.co

About TailorMed

TailorMed offers the nation's largest network of patients, providers, pharmacies, partners, and life science companies focused on ensuring all patients across all medical conditions can afford treatment. Driven by TailorMed's best-in-class platform, network constituents can proactively identify, match, and enroll patients in financial assistance programs to deliver a world-class patient financial experience while reducing the cost of care delivery and increasing revenues. TailorMed's secure, web-based financial assistance solutions are deployed across more than 1,000 sites of care including Providence Health, UnityPoint Health, Yale-New Haven Health, and Advocate Aurora Health. To learn more, go to tailormed.co.

About Munson Healthcare

Munson Healthcare is northern Michigan's largest and leading healthcare system. Based in Traverse City, Mich., Munson's team of healthcare experts, eight award-winning community hospitals, and related organizations serve people in 29 counties. Most of the region's 540,000 residents can receive comprehensive quality care in or near their local community with access to sophisticated diagnostic technology such as 3D tomography, advanced cancer and heart treatments, and the latest robotic technology, stereotactic radiosurgery, and non-invasive surgical procedures. Patients in northern Michigan also benefit from Munson Healthcare's collaborative partnerships with major health care systems, including Mayo Clinic, Michigan Medicine, Spectrum Health, and Mary Free Bed Rehabilitation Hospital. To learn more, visit munsonhealthcare.org.

TAILORMED

