

Rhodes Scholar



**Business Intelligence Software that
Starts with Knowledge of the Lab Industry**

Rhodes Group has applied their knowledge from being a premier laboratory consulting group for over ten years to create a business intelligence platform specifically for the lab. Rhodes Scholar is a proven industry solution providing the tools to “crunch the numbers” in the most effective way. Several major labs across the country have been using Scholar for years to guide and manage their business. Scholar provides the “brain power” to assess your data...and allows you to make every management decision a meaningful one.

Scholar Revenue Cycle Module

- Includes automated, detailed extractions from your billing system to analyze all facets of your gross charges, net revenue, and cash collections
- Observe trends in revenue, rejections, AR and unbilled claims using multiple variables including client, payer, test, physician, CPT, etc.
- Compare payer reimbursement by CPT by payer
- Track claims and aging by dollar value of claim
- Monitor write-offs to evaluate their necessity
- Prioritize billing department resources

Scholar Expense Cycle Module

- Includes automated data processing from your general ledger, accounts payable, materials management, and payroll systems
- Monitor spending trends with vendors
- Group and roll-up your data however you need to
- Analyze FTE utilization and effectiveness
- Track overtime, sick time and PTO utilization

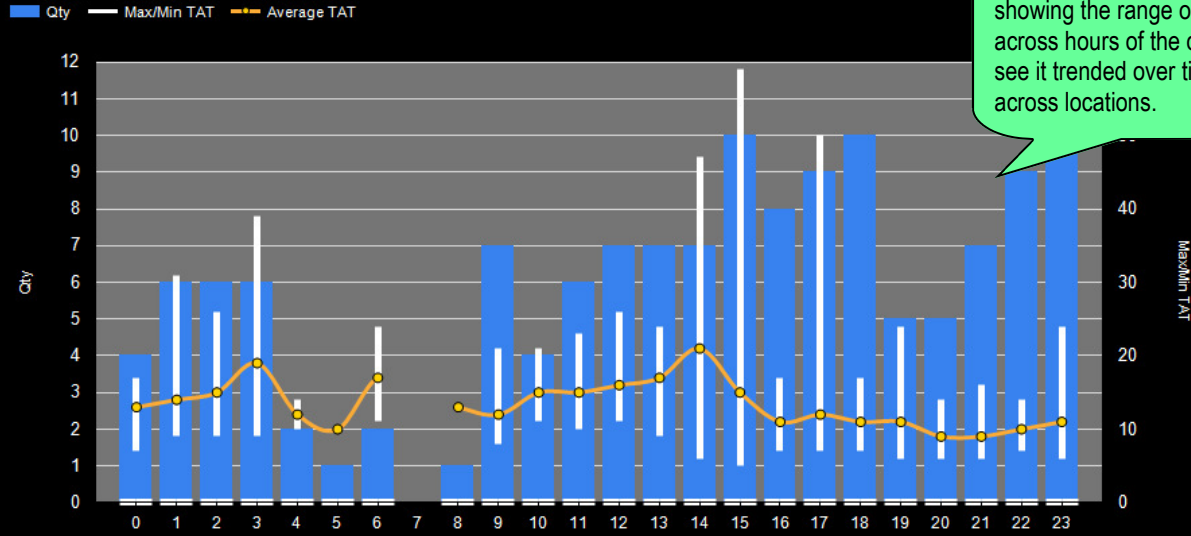
Scholar Productivity Module

- Track specimen processing productivity using multiple variables including turnaround time, client, test, location, department, tech code, etc.
- Tech-based and/or Method-based statistics
- Redesign your workflow based on known activity trends
- Perform quality assurance audits

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Rhodes Group

TAT Chart



Here's a turnaround time graph showing the range of times across hours of the day. Also see it trended over time or across locations.

	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Qty	4	6	6	6	2	1	2	0	1	7	4	0	0	0	0	0	0	0	0	0	0	0	0	0
MaxTAT	17	31	26	39	14	10	24		13	21	21												14	24
MinTAT	7	9	9	9	10	10	11																	
AverageTAT	13	14	15	19	12	10	17																	
Outliers	0	1	0	1	0	0	0																	

Here's a report showing the allowed rates from various payers for the last two years of your highest volume procedures, highlighting trends in reimbursement by payer

Approved Rates for Last Two Years (3)

	QUANTITY		AVGAPPROVEDRATE			
	ALL		Payer 1		Payer 2	
	2009	2008	2009	2008	2009	2008
PHLEBOTOMY & HANDLING (36415)	97,093	165,370	\$3.10	\$3.08	\$3.13	\$3.11
LIPID PANEL (80061)	59,843	97,642	\$12.47	\$11.61	\$12.44	\$12.24
COMPREHENS METABOL PANEL (80053)	54,437	89,373	\$11.02	\$10.06	\$14.31	\$13.75
ABSOLUTE EOSINOPHIL (85025)	37,205	61,892	\$8.07	\$7.34	\$11.42	\$10.92
TSH (84443)	30,856	53,484	\$17.16	\$15.92	\$24.72	\$23.55
FT4 (84439)	27,699	45,095	\$9.26	\$8.63	\$13.26	\$12.65
GENERAL HEALTH PANEL (80050)	26,588	42,174	\$26.17	\$26.51	0	0
	23,522	38,238	\$10.01	\$9.21	\$15.41	\$13.64
	18,623	32,119	\$8.21	\$7.61	\$11.76	\$11.22
	5,622	8,092	\$22.27	\$22.28	\$22.05	\$21.35
	23,238	29,824	\$4.49	\$3.78	\$6.11	\$5.94
	19,568	33,880	\$13.86	\$12.17	\$21.28	\$19.58
	39	39	\$6.80	\$6.14	\$9.51	\$9.07
	36	36	\$27.18	\$25.96	\$27.48	\$26.33

Here's a report showing current A/R and invoices by payer group but also calculates payer specific DSO and aging

AR Statistics
This reports shows balance amount , invoice count, and DSO for account receivables by payer categories.

	BALANCE	INVOICECOUNT	AVGBALANCE	DSO	AVGDAILY\$	AVGBILLEDAGE	AVGDATEOFSERVICEAGE	AVGLASTACTIVITYAGE
ALL	\$70,997,735	358,992	\$197.77	31.4	\$2,256,286	33.3	99.6	28.7
THIRD PARTY	\$49,930,426	194,770	\$256.36	23.1	\$2,157,523	15.7	43.4	15.0
THIRD PARTY	\$22,243,268	82,669	\$269.06	27.6	\$806,693	18.6	49.4	17.4
MEDICARE	\$12,541,576	55,927	\$224.25	21.5	\$582,139	12.7	23.7	12.6
BCBS	\$10,009,080	36,241	\$276.18	18.2	\$549,488	12.1	35.1	11.2
MEDICAID	\$4,293,981	17,101	\$251.10	20.9	\$205,336	15.7	46.6	15.1
OTHER THIRD PARTY	\$842,520	2,832	\$297.50	41.5	\$20,293	40.1	238.8	40.2
PATIENT	\$19,234,625	162,314	\$118.50	307.5	\$62,559	54.3	150.6	45.1
SELF PAY	\$19,232,108	162,303	\$118.50	308.1	\$62,429	54.3	150.6	45.1
OTHER	\$2,518	11	\$228.86	14.6	\$172	20.9	84.9	20.9
CLIENT	\$1,832,684	1,908	\$960.53	44.6	\$41,135	46.8	-1 #ND	38.4

We offer fully capable ad hoc reporting from Rhodes Scholar is by using Microsoft Excel. Drag-and-drop fields directly in Excel to create data-driven spreadsheets on the fly and use the data like you would any other spreadsheet. There is no learning curve for users to learn a completely different toolset for ad hoc reporting.

Here is cash collections broken out by the state, then metropolitan area, then county, then zip code. The columns show the break-out of client versus patient versus third party. Do you have the ability to break out any segment of your business geographically?

Amount	Client	Patient	Third Party
GA	\$1,899,377	\$4,624,092	\$99,151,17
NC	\$10,115,698	\$15,379,960	\$407,575,02
SC	\$880,261	\$5,085,864	\$77,691,02
TN	\$1,446,655	\$5,629,432	\$127,083,26
Chattanooga, TN-GA (1560)	\$141,635	\$686,999	\$17,611,84
Clarksville-Hopkinsville, TN-KY (1660)	\$0	\$7,668	\$157,26
JohnsonCity-Kingsport-Bristol, TN-VA (3660)	\$464,479	\$2,387,349	\$52,443,37
Tennessee - Carter	\$6,976	\$13,547	\$603,56
Tennessee - Hawkins	\$26,214	\$100,641	\$3,173,35
Church Hill, TN (37642)	\$105	\$19,397	\$478,72
Bulls Gap, TN (37711)		\$999	\$24,12
Rogersville, TN (37857)	\$26,109	\$80,244	\$2,670,50
Tennessee - Sullivan	\$384,949	\$1,924,860	\$42,060,70

Here is the dollar value and number of rejections over time broken into categories indicating which rejections are bill patient types versus those that are written off. Measure the results of front-end or billing process charges.

	2009, Q3	2009, Q2	2009, Q1	2008, Q4
Accepted	\$104,099,987	1,271,577	\$192,316,850	2,356,650
Other	\$1,394,834	22,766	\$3,295,490	51,044
Rejected	\$11,301,474	130,121	\$23,239,571	277,503
Bill Patient	\$3,610,659	36,137	\$8,092,937	84,341
Out of Network	\$147,422	1,221	\$212,453	1,236
Patient Not Eligible	\$1,477,141	14,442	\$3,486,173	36,055
Preexisting Condition	\$8,844	56	\$32,288	195
Patient Responsibility	\$127,400	1,497	\$268,156	3,125
Service Not Covered	\$1,849,853	18,921	\$4,093,867	43,730
Duplicate Claim	\$2,325,390	23,036	\$5,472,727	55,266
Research	\$2,362,777	21,940	\$4,990,372	48,289
unknown	\$1,463,039	13,034	\$2,162,956	19,810
Writeoff	\$1,539,609	35,974	\$2,520,578	69,797
Grand Total	\$116,796,296	1,424,464	\$218,851,910	2,685,197