



New program works to reduce Illinois providers' administrative costs

For immediate release

Indianapolis, February 19, 2010: A May 2009 *Health Affairs* article estimated that providers spend up to \$69,000 per physician calling payers each year, much of it to resolve issues related to claims denied for lack of complete information. In response, Blue Cross and Blue Shield of Illinois (BCBSIL) and RealMed have launched a cooperative agreement focused on reducing that expense for Illinois providers.

RealMed, a revenue cycle management company, has more than 6,000 Illinois providers as clients. Together, BCBSIL and RealMed are identifying which of these providers and practices will most likely realize savings and are providing them online access to automated, real-time eligibility, benefit information, and claim status. As a result, these providers will spend less time on the phone and submit more accurate and complete claims, which are much less likely to be denied.

"This program focuses on reducing providers' costs by efficiently delivering reliable, automated, real-time information," says Kathy Tsoukalas, manager, BCBSIL Enterprise Health Care Management.

RealMed Illinois Regional Vice President Joe Kukolla adds, "We're pleased to be helping Blue Cross help Illinois physicians reduce costs and improve administrative efficiency."

RealMed serves a large number of providers ranging from small practices to large academic medical centers and specialty providers. For more information on this program, contact your RealMed representative or E-mail Joe Kukolla at Joe.Kukolla@realmed.com, or call him at 317-814-6713.

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