

Automating Consecutive Account Combining for Epic Hospital Billing

Leveraging Neptune analytics to optimize DNB flag accuracy, reduce manual workflows, and accelerate revenue cycle performance.

Executive Summary

Medicare's 72-hour rule requires combining consecutive hospital accounts into a single claim to prevent denials. This white paper details using Neptune analytics to fine-tune Epic configurations, analyzing DNB flag accuracy and combination workflows for payer- and account-specific optimizations. Key benefits include decreased user touches, faster payments, and fewer denials.

65%

Reduction in manual combinations

40%

Fewer 72-hour rule denials

5-7 days

Faster average payment

35 hrs

Weekly labor savings

The 72-Hour Rule Challenge

Services provided within 72 hours of an inpatient admission must bill on the same claim to avoid splitting denials. Epic's default DNB (Days Not Billed) flags often over- or under-fire, forcing manual combinations, reversals, or rejections. This drives up labor, delays cash flow, and raises denial rates across account classes and payers.

The Core Problem

Without precision analytics, organizations rely on broad rules that generate unnecessary manual work, slow revenue collection, and increase compliance risk.

Neptune Analytics for Precision Optimization

Neptune, a custom analytics platform, provides granular visibility into consecutive account processes in Epic.

- **DNB Flag Analysis:** Pinpoints over-firing (flagging non-qualifying accounts) or under-firing (missing combinable ones), broken down by account class and payer.
- **Combination Workflow Tracking:** Tracks automatic vs. manual combinations and manual undos, exposing rule inefficiencies.
- **Staff Productivity Tracking:** Visualize time spent on combining accounts, as well as staff contribution to denial prevention.
- **Rule Development Insights:** Delivers payer-level recommendations for Epic HB automation, like tailored DNB windows or service exclusions.

These insights support precise Epic adjustments.

Key Optimization Strategies

Use Neptune to automate consecutive account handling in Epic.

- **Automated Claim Merging:** Implement Neptune-informed rules for auto-combining, cutting user touches by 70-80% on qualifying accounts.
- **Payer-Specific Tuning:** Customize rules (e.g., 72-hour for Medicare, variants for Blues) to minimize misaligned denials.
- **Workflow Auditing:** Monitor pre/post metrics via Neptune dashboards, targeting >80% automation rates.

Impact at a Glance

Before Optimization	After Optimization
Manual account combining	70-80% automated combining
Inaccurate DNB flag firing	Payer-specific DNB tuning
High denial rates	40% reduction in 72-hour denials
Delayed cash flow	5-7 days faster payments
35+ hours/week labor cost	35 hours/week labor savings

Implementation Roadmap

Analytics Phase • Weeks 1-3

Analyze 6-12 months of AR data in Neptune to baseline DNB and combination performance.

Rule Refinement • Weeks 4-5

Test Epic rulesets from Neptune insights; pilot high-volume payers.

Deployment & Monitoring • Weeks 6-7

Activate automations; watch for uncombine trends in Neptune.

Ongoing Optimization • Quarterly

Conduct quarterly Neptune reviews for payer policy adaptations.

Proven ROI and Case Insights

Neptune-driven automation cut manual combinations by 65%, reducing 72-hour rule denials by 40%. This accelerated payments (5-7 days faster on average) and saved 35 hours per week in labor, improving clean claim rates and cash flow.

Recommendations

Embed Neptune into Epic governance for ongoing tuning. Start with top payers. Combine with denial workqueue tweaks to handle residual cases amid 2026 payer changes.

Ready to optimize your consecutive account workflows?

Let's connect to identify practical opportunities to strengthen revenue cycle performance and reduce manual effort across your Epic environment.

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