MDaudit

CASE STUDY

How San Juan Regional Medical Center Built a Billing Compliance Program From Scratch and **Audited $1.59M** in Charges in a Year

Before MDaudit, San Juan Regional Medical Center had no billing compliance program at all, no risk-based auditing, and no reliable way to even pull a report from its EHR when a PEPPER report flagged a concern. As a rural hospital with an 86% Medicare, Medicaid, and uninsured payer mix, every dollar protected mattered more than most.

THE CUSTOMER PROFILE

San Juan Regional Medical Center (SJRMC) is a nearly 200-bed Level III Trauma Center. With 19 specialty clinics, this rural, community-owned nonprofit hospital serves the Four Corners region of New Mexico, Arizona, Utah, and Colorado. Founded in 1910 by two physicians who saw a need for quality healthcare in their community, SJRMC actively participates in the 340B Program to keep medication and care accessible across the communities it serves.

198	19
PATIENT BEDS	SPECIALTY CLINICS
1,650	**200**
EMPLOYEES	NEARLY 200 PROVIDERS

THE SOLUTION

MDaudit Billing Risks leverages charge data regularly ingested from claims, with pre-built analytics and peer benchmarking, to identify healthcare billing compliance insights. *"That is what it means to have data at your fingertips,"* says Patricia Supanich-Wall, Chief Compliance Officer. *"To be able to slice and dice the data and be able to analyze it to direct our risk-based auditing has been huge."*

- Streamlined audit workflows caught a locum interventional cardiologist who had zero billable procedures charged in their first 60 days due to charting errors, an issue that could have gone undetected indefinitely
- A routine audit uncovered years of Botox waste being billed incorrectly (one unit per injection instead of actual micrograms wasted), dating back to a 2019 EHR go-live
- Drill-down dashboards and reports help the team detect billing and coding anomalies and identify root causes, not just symptoms

THE RESULTS

- Completed 1,000 audit cases and audited $1.59M in charges over 12 months
- Surfaced 1,660 audit case findings, including $182K in non-agree findings
- Caught individual issues, like a locum's zero-billed procedures and years of mis-billed Botox waste, that had gone undetected for months or years

1,000	$1.59M
1,000 Cases Completed (12 Months)	$1.59M in Charges Audited
1,660	**$182K**
1,660 Audit Case Findings	$182K in Non-Agree Findings

> *We would have never known that we weren't billing for those procedures without MDaudit. The impact would have been hundreds and hundreds of thousands of dollars, and that was only two months. Who knows how long it could have gone on. We would have never known.*
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> *MDaudit has helped us uncover a lot of revenue opportunities and has facilitated a lot of really good conversations across our organization. And there is still so much more data to leverage in bringing in other departments to help them work a little smarter.*
>
> **Patricia Supanich-Wall,** Chief Compliance Officer, San Juan Regional Medical Center

READY TO SEE SIMILAR RESULTS?

Schedule a demo to discover how MDaudit can help your organization minimize risks and maximize revenues.

Visit mdaudit.com/demo or scan the QR code below.

About MDaudit

MDaudit is an award-winning AI-enhanced continuous risk monitoring platform and trusted revenue integrity partner to healthcare organizations nationwide. Working in the background, we deliver the insights you need to face the future with confidence. Learn more at www.mdaudit.com.

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