

Currently believed to be the most significant attack on the health care system in U.S. history, this cyberattack could result in hospitals struggling to finance their operation and provide services to their communities.



 **Florida's hospitals need real solutions. Every day that passes is another day that hospitals are not receiving the critical funds that support patient care.**

Among the survey participants, **73% (106 Hospitals)** have a direct contract with Change Healthcare

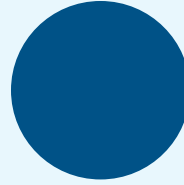
Out of the hospitals that directly contract with Change Healthcare, here are the services they utilize:

- 53% Claims Processing & Remittance**
- 52% Claim Submissions**
- 30% Medicaid & Disability Eligibility**
- 28% E-prescribing**
- 25% Eligibility Verification**
- 25% Authorization Requests**
- 15% Credit Scoring/Propensity to Pay**

\$1.3 Billion
anticipated monthly cash impact

Data based on FHA Survey representing 56% of all Florida Hospital Beds

Nearly half (47%) of the hospitals participating in the survey reported disruptions in billing traditional Medicare costing ~\$78.7 million a week.



\$120 Million

anticipated monthly cash impact for hospitals using 3rd party vendors affiliated with Change

Data based on FHA Survey representing 56% of all Florida Hospital Beds

What Florida's hospitals are saying:

“We are having to uncheck the “electronic billing” box and then hand-key all claims into the other systems.”

“We have not delayed any elective services because we created a workaround to call for authorizations and estimate patient responsibility.”

“The longer the system is down, the greater the backlog of claims/accounts, and it will take months for the payers to catch up.”

“We will have to pull staff off other projects to manually process the claims, implement additional security measures, and develop workarounds. This will have lingering implications for months to come.”

“Moving to a different clearinghouse typically takes 3-6 months – could be done in 45-90 days if staff devote 80+ hours/week to do, but it depends upon vendor's capacity to onboard providers.”

Resources and information available at

bitly.fha.org/changehealthcare

