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How-To

RCM Vendor Transition Checklist

A step-by-step guide to switching medical billing companies without losing revenue

- Pre-transition planning checklist (16 items)
- 90-day transition timeline with parallel processing
- Data migration and payer re-enrollment protocol
- Post-transition performance monitoring

Pre-Transition Planning (60-90 Days Before Go-Live)

Contract & Legal

- [ ] Review current billing company contract for termination notice period (typically 60-90 days)
- [ ] Review early termination fee provisions and calculate total exit cost
- [ ] Send written termination notice to current company via certified mail
- [ ] Review data ownership and export provisions in current contract
- [ ] Execute new contract with incoming billing company (reviewed by attorney)
- [ ] Execute BAA (Business Associate Agreement) with new billing company
- [ ] Verify new company's SOC 2 and HIPAA compliance documentation

Financial Planning

- [ ] Budget for 2-4 month revenue dip during transition period
- [ ] Establish cash reserve (recommend 2 months of operating expenses)
- [ ] Negotiate delayed start of percentage-based billing with new company (no fees until go-live)
- [ ] Confirm new company's policy for working old A/R (current company's outstanding claims)

Data & Systems

- [ ] Request complete data export from current company (patient demographics, billing history, A/R aging, open claims)
- [ ] Confirm data export format is compatible with new company's system
- [ ] Export all payer contracts, fee schedules, and credentialing records
- [ ] Back up all data independently (do not rely solely on either billing company)
- [ ] Set up system access for new billing company (EHR, PM, clearinghouse)

Critical: Old A/R Ownership.

Before terminating your current company, establish in writing who will work the outstanding accounts receivable. Some companies stop working claims immediately upon notice of termination. Others will continue working old A/R for 60-90 days (sometimes for an additional fee). Get this in writing BEFORE you send the termination notice.

90-Day Transition Timeline

Recommended Parallel-Processing Transition Plan

Visual timeline with milestones

Days 1-30

- [ ] Termination notice sent to current company
- [ ] New company contract and BAA executed
- [ ] Data export requested from current company
- [ ] New company begins system setup and integration testing
- [ ] Provider credentialing verification with new company
- [ ] Front-office staff training scheduled

Days 31-60

- [ ] New company begins processing new claims (go-live for new dates of service)
- [ ] Current company continues working existing A/R
- [ ] Both companies have system access during overlap
- [ ] New company conducts payer enrollment verification for all providers/all payers
- [ ] Front-office staff trained on new workflows (charge capture, eligibility, referrals)
- [ ] Daily monitoring of claim submission and payment posting by new company

Days 61-90

- [ ] Current company completes final A/R work and provides final reconciliation
- [ ] Current company system access revoked

- [ ] Current company provides final data export
- [ ] New company assumes responsibility for ALL A/R (new and legacy)
- [ ] Verify all payer enrollments are active and claims are adjudicating
- [ ] First full-month performance review with new company

The Parallel Period Is Essential.

Running both companies simultaneously for 30-60 days costs more short-term but prevents the revenue gap that occurs when claims stop being submitted during a hard cutover. The parallel model protects your cash flow.

Payer Enrollment & Credentialing

Ensuring Uninterrupted Payer Enrollment During Transition

Critical Steps

- [ ] Obtain complete list of all payer enrollments from current billing company
- [ ] Verify each provider's enrollment status with EVERY payer directly (do NOT rely on current company's records)
- [ ] Update billing entity information (TIN, NPI, address) with all payers if the new billing company uses a different clearinghouse
- [ ] Submit Change of Information forms to all payers for new clearinghouse/submitter ID
- [ ] Test electronic claim submission with each major payer before go-live
- [ ] Verify ERA (Electronic Remittance Advice) routing to new billing company's system
- [ ] Verify EFT (Electronic Funds Transfer) routing — confirm payments still go to YOUR bank account (not the billing company's)
- [ ] Confirm provider CAQH profiles are current (new billing companies may need updated CAQH)

Payer	Provider NPI	Enrollment Active?	ERA Routed?	EFT Verified?	Test Claim Sent?
Medicare	_____	[ ]	[ ]	[ ]	[ ]
Medicaid	_____	[ ]	[ ]	[ ]	[ ]
BCBS	_____	[ ]	[ ]	[ ]	[ ]
Aetna	_____	[ ]	[ ]	[ ]	[ ]
UnitedHealthcare	_____	[ ]	[ ]	[ ]	[ ]
Cigna	_____	[ ]	[ ]	[ ]	[ ]
Humana	_____	[ ]	[ ]	[ ]	[ ]
_____	_____	[ ]	[ ]	[ ]	[ ]

Payer	Provider NPI	Enrollment Active?	ERA Routed?	EFT Verified?	Test Claim Sent?
_____	_____	[ ]	[ ]	[ ]	[ ]

EFT Routing Is Critical.

During a billing company transition, there is a risk that payer payments get routed to the wrong bank account — either the old billing company's lockbox or a wrong account. Verify EFT routing for EVERY major payer before go-live. A single routing error can delay $10,000–$100,000+ in payments for weeks.

Staff Training & Workflow Changes

Preparing Your Front-Office Team for the New Billing Workflow

Training Checklist

- [ ] Schedule 2-4 hours of training for all front-office staff with new billing company
- [ ] Train on new eligibility verification workflow (if changed)
- [ ] Train on updated charge capture process (superbills, EHR charge entry)
- [ ] Train on new prior authorization workflow (if applicable)
- [ ] Train on new patient statement process and payment collection protocols
- [ ] Update front-desk scripts for patient billing inquiries ("Your billing is now handled by...")
- [ ] Update patient-facing materials (statements, website, phone prompts) with new billing contact info
- [ ] Designate an internal "billing liaison" who serves as the primary contact with new company

Common Workflow Changes

Area	Old Process	New Process	Training Needed
Eligibility verification	Manual / batch	Real-time automated	Front desk
Charge entry	Paper superbill	EHR-based	All providers
Prior authorization	Phone/fax	Portal-based	Clinical staff
Patient payments	Front desk only	Online portal + front desk	Front desk + patients
Referral tracking	Spreadsheet	Integrated PM system	Referral coordinator

Post-Transition Monitoring (First 90 Days)

Performance Monitoring Dashboard — First 90 Days After Go-Live

Weekly Monitoring

- [ ] Confirm all claims are being submitted within 48 hours of date of service
- [ ] Monitor clearinghouse acceptance rates (should be >98% immediately)
- [ ] Verify payment posting is current (within 24-48 hours of ERA receipt)
- [ ] Check for any payer enrollment rejections or claim routing errors
- [ ] Confirm patient statements are accurate and being sent on schedule

Metric	Benchmark	Month 1	Month 2	Month 3
Claims submitted within 48 hrs	>95%	_____	_____	_____
First-pass acceptance rate	>95%	_____	_____	_____
Denial rate	<8%	_____	_____	_____
Days in A/R (new claims)	<35	_____	_____	_____
Net collections vs. prior period	≥95% of baseline	_____	_____	_____
Patient complaint volume	Stable	_____	_____	_____
Report delivery (on time?)	By 15th of month	_____	_____	_____

Expect a Dip.

Month 1 collections from the new company will be lower than normal because claims submitted after go-live take 14-45 days to adjudicate. By month 3, collections should be at or above pre-transition levels. If they're not, escalate immediately.

Transition Cost Estimate

Side-by-side comparison

Cost Item	Low Estimate	High Estimate
Early termination fee (current company)	$0	$25,000
Data export fee (current company)	$0	$5,000
Setup/implementation fee (new company)	$300	$3,000
Overlap period (both companies paid, ~60 days)	$5,000	$15,000
Revenue dip during transition (months 1-2)	$10,000	$50,000
Staff training time (opportunity cost)	$1,000	$3,000
Attorney review of contracts	$500	$2,000
Total transition cost	**$16,800**	**$103,000**

The typical transition costs $20,000–$50,000 when you factor in all direct and indirect costs. If your current billing company is underperforming by more than $5,000/month (e.g., slow collections, high denials), the transition pays for itself within 6-12 months. Use this math to justify the switch.

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