



COUNTRYWIDE MEDICAL BILLING SERVICES LLC

Revenue Cycle Management | HIPAA & ISO Certified | Serving 200+ Clinics Nationwide

CASE STUDY — BEHAVIORAL HEALTH | PERFORMANCE REPORT MAR–DEC 2025

From 10 Appointments a Month to **247 Appointments** with Zero Outstanding Claims

A Complete Behavioral Health Revenue Cycle Transformation

A behavioral health clinic in Illinois was operating under a dissolved business entity with broken credentialing, no EFT/ERA setup, and just 10 appointments a month. In under 90 days, CMBS rebuilt the entire operation from the ground up.

247

Monthly
Appointments

\$23,486

Dec 2025
Collections

90 Days

Full Operational
Rebuild

Zero

Outstanding
Claims

CLIENT PROFILE

Specialty:	Behavioral Health — Illinois (Multi-Location Practice)
Period:	March 2025 – December 2025
EHR:	Migrated to SimplePractice (from Tebra)
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OVERVIEW

In March 2025, the provider operated under a Behavioral Health Clinic — a **dissolved business entity** with six scattered Illinois locations, none fully active. Because the entity was no longer legally valid, credentialing, billing, enrollment, and payer communication were entirely broken.

The provider was clinically skilled but **administratively unsupported**, resulting in severely limited revenue growth, invisible claims, and no pathway to scale. CMBS was engaged to perform a complete operational rebuild from the ground up.

CLIENT BACKGROUND — The Starting Point

- 01 Only 1 Semi-Active Location**
Six Illinois locations existed on paper but none were fully operational. Only one was seeing patients at just 10 appointments per month.
- 02 Invalid Business Entity (Dissolved)**
The clinic was still billing under a legally dissolved entity — causing payer confusion, automatic claim denials, and misdirected remittances.
- 03 No Visibility Into Claims or Payments**
There was no reporting infrastructure. The provider had no insight into what was submitted, denied, or paid. Revenue was completely opaque.
- 04 Non-Transparent Previous Biller**
The prior billing company had not been submitting claims properly or consistently. Backlogged and unworked claims accumulated with no recovery plan.
- 05 Costly, Unoptimized EHR (Tebra)**
The clinic was paying high monthly fees for Tebra, which was not configured for their workflow. Billing visibility was poor and scheduling was disconnected.
- 06 No EFT/ERA Setup**
All payments were processed manually via paper checks — causing 30–60 day delays per payment cycle and making reconciliation nearly impossible.

The provider was clinically skilled, but administratively unsupported — leading to severely limited revenue growth.

COUNTRYWIDE'S INTERVENTION — First 90 Days

Within the first 90 days, Countrywide Medical Billing Services executed a **complete operational rebuild** across three critical workstreams simultaneously. Every broken component of the revenue cycle was identified, corrected, and relaunched.

Phase 1	<p>Business & Credentialing Fix</p> <ul style="list-style-type: none"> • Corrected NPI, taxonomy code, and primary practice address across all records • Re-established credentialing under a valid, active business entity • Updated all payer directories — BCBS, UHC, Aetna, and all Medicaid plans • Completed EFT & ERA enrollment for all payers, eliminating manual check delays • Verified and corrected provider enrollment status with each insurance network
Phase 2	<p>EHR Optimization & Migration</p> <ul style="list-style-type: none"> • Guided client to migrate from costly, underutilized Tebra to SimplePractice • Configured integrated scheduling, telehealth, and billing in one unified platform • Set up automated claim routing and real-time ERA payment posting • Reduced EHR monthly cost while dramatically improving billing visibility • Trained staff on new system with zero disruption to patient scheduling
Phase 3	<p>Clean Slate Billing System Rebuild</p> <ul style="list-style-type: none"> • Rebuilt the entire billing engine from scratch under the corrected entity • Identified and resubmitted all aged claims within timely filing windows • Eliminated 100% of the inherited billing backlog within 60 days • Created zero outstanding claims workflow — clean submission from day one • Implemented 24–48 hour claim submission protocol for all new encounters

CREDENTIALING REBUILT	BILLING BACKLOG ELIMINATED	EFT/ERA ACTIVATED	CLAIM SUBMISSION SLA
90 Days	60 Days	All Payers	24–48 hrs
Full fix from scratch	100% inherited AR cleared	Payments now electronic	Every encounter, every time

MONTHLY GROWTH — After Partnering With Countrywide

The table below shows verified insurance revenue and appointment volume after onboarding. The practice grew from near-zero billing activity in March 2025 to a fully operational, growing clinic by year end — with zero outstanding claims throughout.

Month	Insurance Collected	Appointments	Month-over-Month
Mar–Apr 2025 (Setup)	\$0 — Rebuilding	~10	—
May 2025	\$3,811.00	42	Billing Live
June 2025	\$6,707.00	57	+\$2,896 (+76%)
July 2025	\$5,774.00	52	-\$933 (seasonal)
August 2025	\$7,468.00	83	+\$1,694 (+29%)
Sep 2025	\$8,340.00	112	+\$872 (+12%)
Oct 2025	\$12,607.00	145	+\$4,267 (+51%)
Nov 2025	\$22,437.50	247	+\$9,830 (+78%)
Dec 2025	\$23,486.00	247	+\$1,048 (+5%)
TOTAL (8 months)	\$90,630.50	1,045 appts	\$0 → \$23,486/mo



"From a dissolved entity with 10 appointments a month to \$23,486 collected in December — with zero outstanding claims. CMBS rebuilt everything we needed to finally grow."

— Behavioral Health Provider — Illinois (Identity Confidential)



OPERATIONAL & FINANCIAL IMPACT

The transformation extended beyond revenue numbers. Every operational component of the practice was improved — from claim submission speed to provider financial visibility.

BEFORE vs. AFTER COUNTRYWIDE

METRIC	BEFORE COUNTRYWIDE	AFTER COUNTRYWIDE
Monthly Appointments	~10	247
Monthly Collections	Irregular / unclear	\$23,486 (Dec 2025)
Business Entity Status	Dissolved / invalid	Valid, active, compliant
EHR Platform	Tebra — costly, underutilized	SimplePractice — optimized
Credentialing & Address	Incorrect / unclear	Corrected & payer-aligned
EFT/ERA Setup	None — all manual checks	Active on all payers
Outstanding Claims	Unknown / unmanaged	Zero — since day one
Claim Submission	Inconsistent / delayed	24–48 hours consistently
Billing Transparency	None	Full weekly reporting
Provider Admin Burden	High — consuming clinical time	Minimal — CMBS managed

OPERATIONAL HIGHLIGHTS

✓ Consistent 24–48 hour claim submission on every encounter	✓ Zero outstanding claims since launch of new billing workflow
✓ Full transparency into payments, denials, and payer mix	✓ Provider freed from billing confusion and manual admin work
✓ All 6 Illinois locations now active and billing correctly	✓ Integrated telehealth billing via SimplePractice
✓ Real-time ERA posting — payments reconciled same day	✓ Weekly performance reports delivered to provider

CONCLUSION — What This Transformation Proves

By rebuilding the client's credentialing, payment channels, EHR configuration, and billing workflows entirely from the ground up, Countrywide transformed a struggling behavioral health practice — operating under a dissolved entity with just 10 appointments a month — into a **growing, stable, fully compliant operation** with predictable revenue and complete billing transparency.

The results speak for themselves: **\$90,630.50 collected in 8 months, 247 appointments by December, and zero outstanding claims since day one.** No revenue was left on the table. No claim went unsubmitted.

WHAT THIS MEANS FOR OTHER BEHAVIORAL HEALTH CLINICS

You don't need more staff — You need cleaner, smarter workflows.

You don't need more patients first — You need to capture and collect on the ones you already see.

You don't need a bigger budget — You need a billing partner whose success depends on yours.

With the right partner, Even a low-volume practice can become a predictable, scalable operation.



"If you operate a behavioral health clinic and feel like billing, credentialing, or your current EHR is holding you back — we are happy to review your setup and show you exactly where you may be losing revenue. No obligation."

— Countrywide Medical Billing Services LLC | www.countrywidem.com

✓ 99.2% Claim Accuracy	✓ Behavioral Health Specialists	✓ HIPAA & ISO Certified
✓ 24–48hr Claim Submission	✓ EHR Migration Support Included	✓ No Long-Term Contracts
✓ Credentialing & Re-credentialing	✓ Full AR Recovery & Backlog Clearance	✓ Free Billing Audit
✓ SimplePractice Integration	✓ Weekly Transparent Reporting	✓ Trusted by 200+ Clinics

Ready to Transform Your Behavioral Health Practice?

Schedule your FREE billing audit — no commitment, no obligation. Discover how much revenue your practice is leaving on the table every month.

Contact Us Today

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