

## Case Study | HEALTHCARE REVENUE CYCLE MANAGEMENT

### Claims Denial Analytics for a Revenue Cycle Management Vendor



#### Problem

Healthcare providers lacked visibility into the underlying reasons behind claim denials.

This hindered their ability to take proactive measures, address root causes, and optimize the revenue cycle.

#### Solution

Implemented a robust denial analytics platform powered by business intelligence tools:

- Data Warehouse:** Centralized repository consolidating data from claims systems, denial codes, and related financial information.
- Business Intelligence (BI) Tools:** Tableau, Power BI, or similar platforms for data analysis and visualization.
- Comprehensive Reporting:** Track denial trends over time (by payer, facility, procedure, denial reason, etc.).

#### Results

- Significantly reduced denial rates by proactively addressing the root causes identified through data analysis.
- Faster identification of denial patterns, enabling timely corrective actions to optimize the revenue cycle.
- Improved financial performance and cash flow for the healthcare provider.

#### Technology Stack

- Data Warehouse:** Database suitable for handling diverse sources of claims and revenue cycle data.
- BI Tools:** Flexible visualization platforms for exploring trends and patterns.
- Reporting Tools:** Built into the BI platform or custom-developed for tailored reports.

#### Software Development

- ETL Processes:** Extract, Transform, and Load pipelines to gather data from disparate systems into the data warehouse.
- Dashboard Development:** Intuitive dashboards providing insights on denial trends and drill-down functionality.
- Reporting Capabilities:** Generation of actionable reports to guide revenue cycle optimization efforts.

#### Before Metrics

Denial rate: 12%

Time to identify root causes of denials: Weeks

#### After Metrics

Denial rate: 8%

Time to identify root causes of denials: Days