## A FEW SUCCESS STORIES

## **JUST LIKE YOU...**

## **DENIALS**

A lot of the healthcare providers agree, they are extremely efficient at 95% of their revenue cycle management and struggle with the remaining 5%. The insurance companies are constantly coming up with new reasons to deny a claim which makes the process of getting these claims paid complex. The following success stories came from doing a risk-free retro-analysis of their denied A/R accounts they had written off to bad debt due to no payment. The goal was to identify any potential opportunity to recover any lost revenue from the insurance companies. Our highly aggressive legal/IT based approach generated the following results...



2,100+ BED HEALTH SYSTEM

A health system gave us roughly 2,000 denied accounts that they had written off at an average of 242 days aged and thought were uncollectible.

WE RECOVERED \$4.8M+ IN LOST REVENUE FROM THE PAYERS.



A health system gave us \$4.4M of their denied accounts that were written off at an average of 269 days aged.

WE RECOVERED \$1M+ IN LOST REVENUE FROM THE PAYERS.





We asked a hospital to review their written off denied accounts.

Having exhausted all of their denial efforts, they were absolutely certain we would have a 0% success rate.

TO DATE, WE HAVE RECOVERED \$500,000+ FOR THEM FROM THE PAYERS.

