



## CASE STUDY

# Aged AR Claims Management

Aged AR Slashed by Over \$85 Million in Under 6 Months

## AT A GLANCE

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### Challenges

- Severe staffing shortages within healthcare system's internal revenue cycle management team
- Lack of in-house expertise on payer-specific guidelines
- Persistent billing errors, including missing modifiers and incorrect bill type

### Results

- Reduced Aged AR by \$85 million on 22,282 accounts
- Over \$8 million in total cash collections
- \$4 million (53%) collected on accounts older than 331 days
- 278% increase in collections compared to provider's internal staff performance on the same inventory

### About the Healthcare System

This major Southeastern healthcare system features 3 hospitals, 13 practices, and 30 outpatient sites, plus telehealth. It boasts nationally ranked cancer and rehabilitation centers.

**\$85M**

reduction in Aged AR  
in under 6 months

## Challenge

The healthcare system faced significant challenges in managing its aged accounts receivable. Due to severe staffing shortages, the medical system was struggling with an enormous backlog of aging accounts. Problems centered on a lack of in-house expertise on payer-specific guidelines, as well as persistent billing errors—such as missing modifiers on claims, submitting claims via hardcopy instead of electronically, and incorrect bill type for outpatient claims from critical access hospitals (CAHs).

## Solution

The solution involved a comprehensive strategy involving a combination of technical, clinical, and legal expertise. Effective change management, proactive partnership optimization, and preemptive troubleshooting all played integral roles. Aspirion took the following steps to remedy the situation:



### Rapid Learning and Implementation

Aspirion mastered complex payer guidelines, and developed and implemented standardized operating procedures (SOPs) for the follow-up team.



### Strategic Account Management

Aspirion assigned accounts to expert analysts based on financial class and dollar range, as well as allocated subject-matter experts to specific, relevant payers.



### Proactive Problem-Solving

Aspirion escalated outstanding denials to payers, engaging managers and claims specialists, in addition to rectifying billing issues to prevent future denials.

## Results

Aspirion's expert clinicians and attorneys tackled aged denials with impressive results. In under six months, the healthcare system's aged accounts decreased by \$85 million—a 278% collection increase. Recoveries included \$4+ million from accounts over 331 days old and nearly \$3 million from those exceeding 361 days.

Seeing this success, the provider expanded their partnership with Aspirion from a one-time project to ongoing account support.

## Engage with Us



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