4 Pillars, 1 Goal

Revolutionizing Denials Management with Artificial Intelligence

What's Inside

Payers
Already Rely on AI

You should too.

Hospitals and healthcare systems are crying foul as they face a tsunami of claims denials. The culprit? AI-powered payer algorithms. These digital decision-makers are churning out denials at breakneck speeds, leaving providers scrambling to keep up. It's a high-tech game of "gotcha" that's leaving many in the healthcare space wondering: Is this progress, or just a faster way to say no?

The American Medical Association's (AMA) latest claims denials numbers paint a picture that'll make your head spin: a whopping 11% of all claims got the cold shoulder from payers in 2023, up from 8% just two years earlier. What does that mean for your average health system? Try 110,000 unpaid claims and a financial headache for healthcare executives nationwide.

This billion-dollar game of "Sorry, not sorry" isn't just about AI. It's a perfect storm of complicated billing codes, ever-shifting payer policies, and some insurers playing hardball with a "deny first, ask questions later" approach. It's enough to make even the most seasoned healthcare professional wonder if they need a law degree just to get paid. So, as the denial rates climb, one thing's for sure: in this high-stakes healthcare claims hustle, the only constant is change.

The Denials Dilemma: A $19.7 Billion Headache

Let's face it, denials are the bane of every healthcare RCM leader's existence. They're not just paper pushbacks—they're profit-eaters, time-wasters, and satisfaction-killers for both providers and patients.

Picture this: a payer slaps a big red "DENIED" stamp on your claim. Why? Take your pick:

- Data gone AWOL
- Medical necessity pushback
- The dreaded "prior authorization" dance
- Or the payers' favorite game: musical guidelines

Nearly 15% of claims to private payers get shot down on the first try—even those with prior authorization. In 2023 alone, providers burned through $19.7 billion battling these denials. Each rejection hits hard, leaving providers in a scramble and patients seeing red. It's high time we flip this script.

The Devastating Impact of Prior Authorization Delays

**94%** reported delays in accessing necessary care

89% noted a negative impact on patient clinical outcomes

80% observed patients abandoning treatment

Source: Andis Robeznieks. "Health Systems Plagued by Payer-Takeback Schemes, 110,000 Denials." American Medical Association, 19 Jan. 2023, www.ama-assn.org/practice-management/prior-authorization/health-systems-plagued-payer-takeback-schemes-110000.
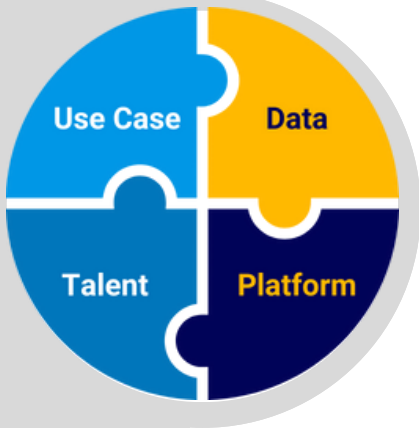
AI Is the Efficiency Key

The catalyst for streamlined operations

When 63% of denied claims are recoverable but rarely reworked,
it's important to grasp the implications. For many organizations, this means you are owed money for services you've already provided—but that money never reaches you.

Why has this become the norm in healthcare RCM? Because providers are already facing significant challenges. With staffing shortages, shrinking margins, and rising denials rates, providers simply lack the time, money, and resources to thoroughly address denied claims.
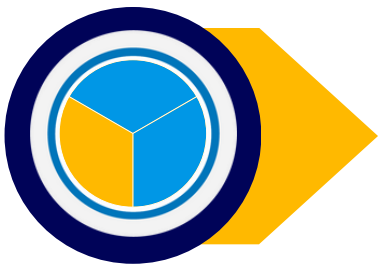
Two-thirds of denials **remain unaddressed**

12% increase in overall initial denial rates in the first three quarters of 2023

Nearly 15% of all claims submitted to private payers for reimbursement are initially **denied**

How Can Providers Catch Up?

Success hinges on leveraging the four pillars

Healthcare providers can work to catch up to insurance payers by adopting an AI-enabled approach for managing and preventing claims denials. In today's healthcare landscape, artificial intelligence is emerging as the secret weapon for hospitals looking to level the playing field with payers. Gone are the days of manual processes and missed opportunities in revenue cycle management.

AI Is Here to Shake Things Up!

Picture this: Smart algorithms tirelessly combing through mountains of data, spotting inefficiencies and flagging potential payment issues before they become costly problems. It's like having a financial superhero working 24/7 for your hospital. By harnessing the power of AI, hospitals have the ability to:

- Slash waste with laser precision
- Maximize revenue opportunities at every turn
- Turbocharge efficiency across RCM processes

The result? A healthier bottom line and more resources to focus on what really matters—patient care. This strategy hinges on four critical pillars:

1 Well-Defined Use Cases
Use cases form the strategic foundation, guiding the implementation of AI solutions such as automated coding, denials prediction, and appeal generation.

2 Robust Data
High-quality data, including claims information, clinical records, payer policies, and managed-care contracts, fuels these AI systems.

3 Efficient Platform
An effective AI platform seamlessly integrates data access, workflow automation, and insightful reporting, empowering healthcare providers to optimize their RCM.

4 Highly-Skilled Talent
Highly-skilled resources drawn from a diverse array of professionals are crucial for facilitating effective AI development, application, and management.

Use Cases Serve as the Foundation

Designing AI solutions with purpose

In the rush to adopt artificial intelligence, it's tempting to chase after the latest technologies or mimic competitors' strategies. However, successful AI implementation requires a more thoughtful approach centered on addressing true RCM challenges. The key is to identify and target actual pain points within your hospital or healthcare system.

Let's Get Real for a Minute

When you're planning your AI project, you need to tie it directly to your business's actual needs. No fancy tech for tech's sake.

First, take a good look at your hospital's strategy or that big headache everyone is trying to solve.

What Is an AI Use Case?

An AI Use Case describes a specific real-world scenario where artificial intelligence solves a particular problem, ensuring targeted and effective business implementation.

Next, think about how AI could help tackle that. Remember, the goal is to make AI work for you, not the other way around. Keep it practical, keep it relevant—and you'll be onto a winner.

"It really starts with use cases. As you think about what problems you are actually trying to solve, it's remarkable how often somebody builds tech without a clear understanding of the problem that they're solving. And then often, that tech ends up not really getting the traction that's needed."

Spencer Allee
Chief AI Officer at Aspirion

But don't be afraid to think outside the box. Embrace innovative methods like design thinking—a user-centric approach fostering creative solutions through empathy and rapid prototyping—to develop unique AI use cases. These techniques can uncover surprising and effective ways to address your organization's challenges with AI.

AI in Action: 5 Game-Changers for Exceptional Denials Management

Forget theory—let's talk about results. AI isn't just buzzwords; it's a profit-boosting, paperwork-slaying powerhouse. Check out these five real-world AI heroes tackling denials head-on:

1 **Stronger Outcomes:** AI-driven denials management enhances appeal success rates and optimizes reimbursements, resulting in improved financial performance and higher patient satisfaction.

2 **Predictive Claim Analysis:** Machine learning algorithms identify claims at high risk of denial, enabling preemptive corrections to boost claim accuracy prior to submission.

3 **Strategic Denial Prioritization:** AI-powered scoring models, built on historical data, help prioritize denials and aid in resource allocation by assessing appeal success probability and potential revenue impact when dealing with high denial volumes.

4 **Workflow Optimization:** AI examines revenue cycle management workflows to detect inefficiencies and recommend enhancements, boosting overall operational effectiveness.

5 **Appeal Success:** Models trained on clinical documentation, guidelines, and payer policies help produce comprehensive appeals letters that drive increased overturn rates and higher reimbursements.

First Steps First
What do you want to fix first?

When trying to address your organization's challenges, start small. Focus on one major pain point. Don't try to "boil the ocean" or bite off more than you can chew. Start by asking yourself these questions:

- What are the most important business problems you need to address?
- How will AI help?
- How will you source or build the solution?
- How will you measure success and over what timeframe?

The Data + AI Relationship

The ultimate tech dynamic duo

Think of data and AI as the dynamic duo of the tech world—they're practically inseparable. And let's face it, without top-notch data, even the smartest AI is left twiddling its virtual thumbs.

AI Is a Data Glutton

The more AI eats, the smarter it gets. That's where harnessing the right data in the right way comes in—by feeding the AI beast and helping it level up without constant human hand-holding.

This data feast has led to a smorgasbord of practical RCM AI uses, tackling issues like account prioritization, claims denial appeals, and managing insurer contracts effectively. To make data truly shine, you've got to look at it through the lens of real use cases.

Data Is Delicious

When it come to denials resolution and prevention, gone are the days of throwing more bodies at the denials problem. Today's secret weapon? AI-powered, data-driven strategies.

With artificial intelligence crunching through mountains of claims data, we're not just working harder—we're working smarter. AI doesn't just spot patterns; it predicts outcomes and suggests winning appeals strategies.

> "Because of the data available, you can now strategize on appealing claims. The strategy is not simply to put more humans on it, but also put more technology on it. Data is delicious. You've got to track and trend everything."
>
> *Gloriann Sordo,*
> *President, Denials Operations at Aspirion*

It's like having a crystal ball and an army of expert analysts rolled into one. Let AI track every trend and analyze every nuance. Because when it comes to denials management, AI-powered insights don't just save time—they have the power to supercharge your bottom line.

From Bytes to Breakthroughs: Unleashing the Power of Data

In healthcare RCM, knowledge translates directly to improved outcomes and stronger bottom lines. Aspirion is harnessing this principle, leveraging AI and robust data to transform denials management.

With the treasure trove of data at our fingertips, Aspirion is creating a more efficient, accurate, and proactive approach to handling claims denials. By developing predictive scoring models and implementing machine learning algorithms, we can craft savvy appeals strategies that pack a punch. It's not just about working harder—it's about working smarter. And remember, in this game, data isn't just king—when it's paired with AI it's a whole royal feast.

"How do you help speed along the process while strengthening the robustness of the appeal through which a coder or a clinician or an attorney reviews up to a 2,000-page medical record and pulls out the pertinent information to justify back to the payer why it was that complex of a case or should have been paid inpatient?

"The DRG shouldn't have been downgraded. Those types of things are being enabled through large language model usage today, which is a step change in technical capabilities and is evolving really fast."

Jim Bohnsack
Chief Strategy Officer at Aspirion

The Answer Lies Within the Data

AI is changing the game in denials management. It's gobbling up all sorts of data—from claims histories to payer rules—and using it to spot potential denials before they happen. This smart tech helps craft better appeals and file claims more accurately. The best part? It frees up the experts to tackle the tough cases, making the most of their advanced skills.

But AI isn't stopping there. It's giving the whole workflow a makeover, finding ways to smooth out the kinks and maximize revenue. Aspirion's not just tweaking the system—we're flipping it on its head. For healthcare providers feeling the financial squeeze, this data-driven approach could be the lifeline they need to keep their revenue cycles healthy and efficient.
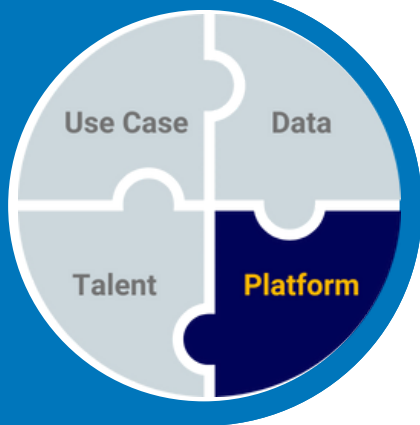
More Than Just a Fancy Platform

Match the model to your mission

Purpose-built platforms that are adept at digesting unstructured documents play a pivotal role. An optimal platform provides the tools, infrastructure, and capabilities to effectively develop, deploy, and manage AI solutions.

The underlying data infrastructure must be capable of routing the right operational, claim-level, clinical, and contract data to the large language models (LLMs)—and then route the results into operational workflows. Getting RCM teams to adopt these results is yet another challenge, requiring change management, training, and a product-driven approach to implement these models and ensure they create value for the business.

Building the AI Powerhouse
Recognizing that hospitals and healthcare providers often lack the resources to make tech investments independently, Aspirion aims to fill this gap. With the largest payers outspending the largest health systems by a factor of 10, it's evident that providers cannot compete on their own.

Aspirion's approach is to provide solutions that allow providers to leverage advancements in technology without having to develop them internally. This is particularly crucial as providers prioritize patient care and struggle to keep up with the evolving landscape of healthcare technology.

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At Aspirion, we're putting AI and automation to work, turbocharging revenue for our healthcare partners. Most providers can't match the tech firepower of big insurance companies. That's where we come in. We're making the bold tech moves and spreading the benefits across all our client partners. It's like giving every hospital a turbo boost in the race against payers.

Cutting Edge AI Technology: Without the Headache

Picking the Perfect Platform: Let's face it, folks—not all RCM platforms are created equal. When you're diving into the world of artificial intelligence, you need a trusty sidekick that can keep up with your core workflows while playing it safe with your data.

Think of it like choosing the right superhero gadget. You want something that can:

- Whip up AI solutions faster than you can say "algorithm"
- Deploy them smoother than a butter slide
- Manage them without breaking a sweat

But wait, there's more! Your advanced platform should come with built-in analytics to add predictive value to claims and underpayment patterns, and to identify payer and denials trends. And don't forget those top-notch security features—because nobody likes a data leak party pooper.

Now, here's the million-dollar question: Do you have the time and energy to build this dream platform yourself? Or should you team up with a vendor who's already got the goods? It's like deciding between crafting your own superhero suit or borrowing Iron Man's—choose wisely!

"AI is already in everything that we do on a day-to-day basis—in our phones, our cars, and our homes. We are at the beginning of a sea-change in how we do business, similar to the early days of the internet. AI is unlocking new possibilities that will transform the way we work over the next decade.

"It's not a question of 'if' or even 'when,' but rather a question of 'how' and 'how fast' for you and your business."

Spencer Allee
Chief AI Officer at Aspirion
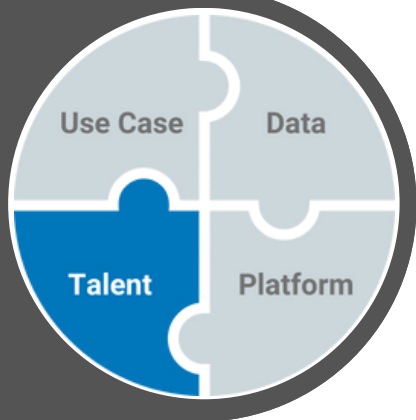
Build the Best Team with Skilled Talent

Harness top-tier expertise

You've got cutting-edge tech, solid use cases, and a wealth of data. But here's the high-stakes question: Do you have the talent to bring it all together and make your AI implementation truly shine?

The AI Dream Team

Successful AI isn't a solo act—it's a team performance. To truly harness AI's power, organizations need to assemble a diverse cast of talents.

Building AI models depends not only on hard-to-find data scientists with sophisticated talent who can effectively harness data and identify the right use cases for machine learning, but also on seasoned RCM professionals who have been honing their denials resolution skills for decades. Skilled talent comes from an array of areas, including:

- Data scientists and engineers
- Attorneys and legal experts
- Clinicians

- RCM operations subject-matter experts
- Product managers
- Learning and development specialists

AI is a powerhouse, no doubt—solving big problems left and right. But let's not kid ourselves: it's also stirring up new challenges as we speak.

That's exactly why your team's mix of skills and perspectives is critical. The right blend of talent can help you navigate both the opportunities and the pitfalls of this game-changing tech.

Build, Buy, or Partner:
Crafting Your Path to AI Success

Build, buy, or partner? That's the make-or-break decision facing RCM leaders diving into AI. Building in-house? You're the boss, but brace for resource drain and talent wars. Buying off-the-shelf? Quick, sure, but expensive—and one size rarely fits all.

Enter the game-changer: strategic partnerships. You're suddenly playing in the big leagues with cutting-edge tech, top-tier talent, and the agility to pivot on a dime.

> "I will say, in speed to value, buying a service is usually the quickest, and then you can assess whether you want to then in-house and then re-insource it later...Then decide, if it's that good and that cost effective, then why insource it?"
>
> **Brad Tinnermon**
> **SVP Finance Shared Services at Kaiser Permanente**

In their rush to jump on board the AI train leaving the station, many RCM leaders make the mistake of focusing solely on the technology platform. While having an advanced AI platform that's on the frontier of machine learning and automation is absolutely essential for any denials management approach, equally essential is leveraging use cases, data, and talent. It's these four pillars working together—platform, use cases, data, and talent—that create a powerful AI tool for the most effective denials resolution.

Why go it alone when you can have Aspirion's all-star team in your corner?

Our Competitive Advantage

- **We invest heavily in artificial intelligence**
- **We staff higher-skilled resources**
- **We focus on recovery performance and prevention**

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About Us

For over two decades, Aspirion has been a trusted ally to hospitals and health systems nationwide, focusing on maximizing revenue from denials, underpayments, and complex claims.

Our team of expert legal, clinical, and technical professionals leverages cutting-edge proprietary technology powered by artificial intelligence to ensure our provider partners recover their earned revenue.

With a client base spanning the entire United States, Aspirion proudly serves half of the nation's 10 largest health systems. Our recent accolades include: the 2024 Best in KLAS for Denials Management, the HITRUST Risk-Based 2-year Certification for the second cycle, and a place on the 2024 Inc. 5000 list of America's fastest-growing private companies.

BEST IN KLAS®
DENIALS MANAGEMENT SERVICES
2024

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HITRUST CERTIFIED

Inc. 5000 — AMERICA'S FASTEST-GROWING PRIVATE COMPANIES

Start your AI-powered denials management journey with us!

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2024 Best in KLAS

Denials Management

We're thrilled to have earned the #1 Best in KLAS Award for Denials Management Services. This esteemed recognition holds particular significance for our organization, as it is based solely on the candid assessments provided by our hospital and healthcare system clients to KLAS Research. It's a testament to the hard work and dedication of the Aspirion team in providing top-tier services in this critical area of healthcare revenue management.

"We are profoundly honored to be acknowledged as the premier Denials Management provider by KLAS. The Best in KLAS award, exclusively determined by candid feedback from our clients, carries exceptional meaning as it vividly reflects the concrete value our clients gain from our denials resolution and prevention services.

"Receiving this recognition is a privilege, and we hold deep gratitude for the chance to contribute to the financial strength and operational excellence of the hospitals and health systems we proudly serve."

Amy Amick, CEO, Aspirion