Reduced denials and eligibility issues with IKS Health patient access solution

Client profile

A physician-led, multi-specialty medical group providing healthcare to the greater Chattanooga area. They have more than 120 healthcare professionals with over 33 locations. They are on the cutting edge of the healthcare industry with a full spectrum of both preventive and specialized medical care.

Challenge

- High number of denials rooted in patient access issues and eligibility verification (e.g., insurance coverage and registration integrity)
- Low clearinghouse transaction success rates due to demographic and eligibility- based criteria issues

Solution

- Deployed IKS Health patient access solution with autonomous Eligibility/Benefits Verification (EV/BV) to map benefits to planned services
- Longitudinal patient profiler feature ensured registration integrity by detecting and correcting mismatched or missing data in the registration feed to avoid denials
- EV/BV processed for all scheduled visits and liability estimation for specific groups from first quarter
- Prior authorization conducted with payor knowledge base for specific visits when applicable

Impact delivered

>$550K

Revenue saved from denials

58%

Reduction in front-end related denials post implementation

Results

- Weekly and monthly reports demonstrated continuous ROI through substantial reduction in front-end originated denials
- Delivered registration integrity, EV/BV, and liability estimation value
- Strong denial reduction trend from $1M to $431K from Q1 to Q3

To learn more about IKS Health patient access solution, contact us today at info@ikshealth.com.

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