

A background image showing a person's hands holding a tablet displaying various charts and graphs. The person is wearing a blue shirt. The image is partially obscured by a dark blue overlay on the right side.

CASE STUDY

How MDaudit Denials Predictor Helped This Health System Identify and **Mitigate up to \$10M in Revenue Risk**

Facing increased Medicare RAC audit scrutiny and a shrinking compliance team, this faith-based, nonprofit health system needed a way to identify denial risk and its root causes before claims went out the door, without adding headcount.



THE CUSTOMER PROFILE

The customer is a faith-based, nonprofit integrated health system serving more than 80 communities across Oregon, California, and Hawaii, with 37,000 employees, providers, and volunteers delivering care across more than 400 sites, including 19 acute care and five critical access hospitals, clinics, hospice and home care agencies, and retirement centers.

400+

SITES OF CARE

24

HOSPITAL LOCATIONS

3

STATES

4,212,710

OUTPATIENT VISITS

THE SOLUTION

MDaudit Denials Predictor helps the customer identify denial risk and its root causes, even before payer adjudication, to decrease denials, shorten payment lag time, and increase cash flow. Using a custom rule built on MDaudit's payer-centric rules engine, the team flags accounts that fall under the Medicare Coverage Evidence Development (CED) program before claims go out the door.

- Custom payer-centric rules stop claims lacking a required CED designation before submission
- Ad hoc reports and Denial Risks shift the team's focus from after-the-fact auditing to root-cause analysis
- Broader denial-type visibility (compliance issues, medical necessity, additional documentation required, and more) helps decrease financial risk

THE RESULTS

- Identified nearly 23% more revenue year-over-year, despite fewer auditors
- Decreased compliance risk identified by over 20%
- Drove a downward trend in denials and an upward trend in reimbursement



\$10M

Up to \$10M Annual
Revenue Risk Identified



22.69%

22.69% Increase in
Revenue Identified



20.39%

20.39% Decrease in
Compliance Risk Identified



30.87%

30.87% Decrease in
Initial Remits



18.18%

18.18% Decrease in
Auditors*

*2021 vs. 2022. Despite staffing and budget cuts, the team identified nearly 23% more revenue while decreasing compliance risk, even as auditor headcount and initial remits both declined.

READY TO SEE SIMILAR RESULTS?

Schedule a demo to discover how MDaudit can help your organization minimize risks and maximize revenues.

Visit mdaudit.com/demo or scan the QR code below.



With Denials Predictor, I have a simple solution that will stop claims from going out the door without the appropriate designation. It's insanely powerful. The technology is fantastic.

Director of Revenue Cycle Compliance

About MDaudit

MDaudit is an award-winning AI-enhanced continuous risk monitoring platform and trusted revenue integrity partner to healthcare organizations nationwide. Working in the background, we deliver the insights you need to face the future with confidence. Learn more at www.mdaudit.com.

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