



DenialsIQ

Advanced Analytics

DenialsIQ™ advanced analytics from GE Healthcare uses a powerful statistical algorithm developed by GE's Global Research Center that uncovers unseen trends from within claims denials to help provider organizations improve financial performance by accelerating revenues and by avoiding denials before they occur.



Provider networks are facing an increasingly complex reimbursement environment, characterized by changing requirements, inconsistent guidelines and rising costs, challenging their ability to collect the full amount of revenue that is owed to them. Denied claims represent extraordinary costs to health systems and are a primary contributor to bad debt, which represents millions in lost net patient revenue every year.

DenialsIQ helps accelerate the revenue cycle by empowering managers with actionable insights about patterns of root cause factors within their claims denials. DenialsIQ helps take the guess work and research out of the denials appeals process while providing the level of granularity and direction to make workflow improvements to help reduce future denials before they occur.



Reduce cost to collect by focusing resources on your most valuable problems

Re-working denied claims is estimated to cost \$25 per claim, these costs can quickly add up and erode margin. Dynamic visualizations in DenialsIQ display denials trends based on value, so managers can identify their most costly issues and assign them to specific personnel or subject matter experts as soon as they arise. Task owners can then work denials in bulk, reducing the amount of costly re work it takes to capture denied claims.

Accelerate Cash Without Time Consuming Research

DenialsIQ identifies hidden patterns within denials based on root cause factors, helping staff avoid time consuming research that often yields mixed results. Searching for statistically significant trends across a universe of denials should not be a human task, yet in many cases it is. The powerful algorithm within DenialsIQ identifies common factors that are driving denials so that humans don't have to, which helps resolve issues more quickly, accelerating adjudication and avoiding costly delays.

Make meaningful workflow improvements to help reduce bad debt

Denials are a primary driver of bad debt, which represents millions in lost revenue and negatively impacts critical financial metrics every year. The median bad debt to net patient revenue for non-for profit hospitals in 2013 was 5.8%. DenialsIQ surfaces prevailing denials trends as soon as they become meaningful, enabling managers to make informed workflow adjustments to help avoid denied claims from turning into bad debt and from reoccurring in the future.

Imagination at work

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