



Mental Healthcare Provider

Chicago, USA

Background

A/R Follow-Up: Automates claim status checks, identifies cases where claims have been processed but not updated in the EHR, and updates medical notes accordingly.

Challenges

- ✗ A/R follow up takes most time.
- ✗ A/R team 6 follow up reps and 3 claims submission around 10.
- ✗ denials 25-30% due to the above mentioned 6 status claims data entry.

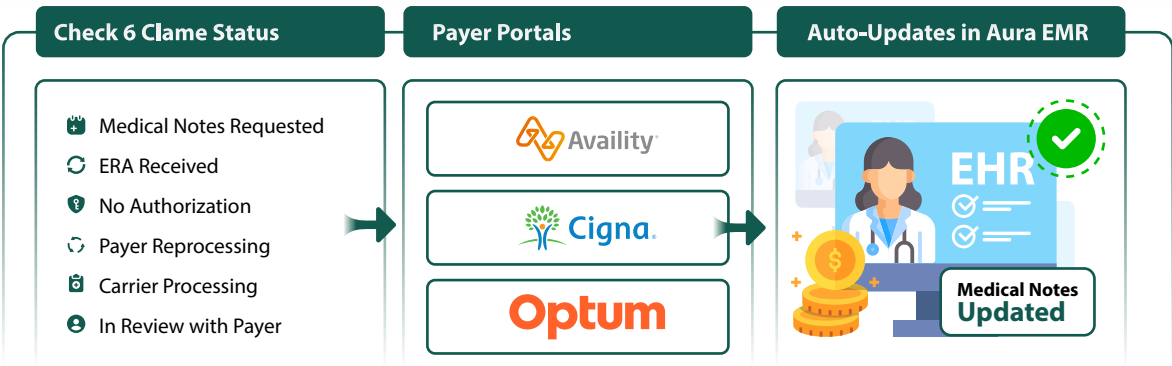
Solution

Claims Data Entry

Aura EMR login and check claims 6 status: medical notes requested, ERA received, no authorization, payer reprocessing, carrier processing and in review with payer update on payer portals availability, optum and cigna.

First 3 status responsible for 30% denials claims have been processed but EHR not updated caused problems, denials

Solution Claims Data Entry & Automation



Business Impact, Metrics and Volumes

Automation Benefits (A/R): Processes all outstanding claims without manual effort

Automatically logs into Availity to retrieve missing records.

Flags rejections for quick resolution.

Notifies staff only when human input is necessary.