

CASE STUDY

Conversational AI and Intelligent Automation Reduce Payer Denials, Improve Employee Efficiency

Organization profile

Guidehouse provides global consulting and managed services to public sector and commercial markets, with broad capabilities in management, technology, and risk consulting.

Results

1M+ activities captured

2K+ hours of re-work eliminated

additional use cases identified

Process discovery optimized the client's revenue cycle operations by identifying unused functionality in the EMR system, as well as identification of process automation for financial clearance and account follow-up.

> Michael Duke, Partner - Commercial Healthcare





Challenge

Guidehouse's client, a notable health system, was experiencing millions of dollars in insurance claim denials, and employees were burdened by ineffective processes. The health system tapped Guidehouse, an Automation Anywhere partner, to advise on task optimization with Intelligent Automation starting with 13 of its business functions.

Solution

Using a combination of Automation Anywhere's Process Discovery technology and subject matter expert consultation, Guidehouse swiftly observed its client's broad-swath processes on a macro level, then identified failure points on a micro level to unearth opportunities for optimization with Intelligent Automation.

Over two weeks, Guidehouse gathered more than one million data points from the client and gained a thorough understanding of several ineffective processes that presented powerful use cases for Intelligent Automation. With these insights, Guidehouse made recommendations and developed a roadmap to streamline and automate high-value use cases across the health system's business functions.

Processes automated

- Deferral of accounts
- Eligibility status updates
- Claim corrections and resubmission
- Physician payer credentialing confirmation
- Prior authorization determination and submission
- Work queue update for impact on delay/defer policy

We impacted over \$44 million in denied accounts needing rework by optimizing the client's core tech and launching conversational AI with robotic process automation to provide a unique automation experience for the client team.

> Michael Duke, Partner - Commercial Healthcare

The whole story

One stand-out use case involved the health system client's insurance eligibility verification process. Guidehouse observed high-volume first-pass denials and initiated a deeper investigation with Process Discovery. The analysis found that the client's patients were mistakenly giving incorrect insurance providers, causing the health system to receive eligibility denials. These denials forced tedious employee rework and unnecessary rejections that amounted to \$44 million annually.

To avoid future denials, reclaim employee time, and streamline the process, Guidehouse worked with the client to implement conversational AI. This enabled the health system to quickly contact the payer, obtain updated information, and use Intelligent Automation to update the patient's file in the system or take specific action if required. The two-pronged optimization strategy significantly reduced millions of dollars in payer denials and returned over 2,000 hours of time to the client's employees to perform other value-added tasks.

The future

Leveraging Process Discovery, Guidehouse has identified, roadmapped, and is developing seven additional processes with the health system. Guidehouse will work with the client to expand these efforts to additional functions, including HR, supply chain, reimbursements, and payroll. Further, Guidehouse plans to repeat the discovery process with the health system in the future to investigate additional opportunities for incremental process improvements and ensure automation governance and process governance over the implemented changes.



About Automation Anywhere

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= North America: 1.888.484.3535 x1 | International: 1.408.834.7676 x1

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sales@automationanywhere.com

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