Denial Management

Increase your cash flow and reduce aging accounts receivables, denials, and write-offs.

Why You Should Outsource Your Denial Management

Up to 20% of all submitted claims are denied, and two-thirds of them are never appealed or effectively disputed — which means your facility could be leaving millions of dollars on the table every year.

Common Denial Causes:

- Authorization
- Medical Necessity
 - · Length of Stay
 - · Level of Care and DRG Downgrade
- · DRG Validation and Post-Care Audits
- Non-Covered Services
- · Coding Errors
- · Timely Filing

The Aspirion Difference

We are dedicated to exceptional results, precise denial resolution, and client success. Our team of experts achieves up to a 90% denial turnover rate on first pass denied claims and up to a 70% turnover rate on aged denied claims.

Aspirion Becomes Part of Your Denials Team

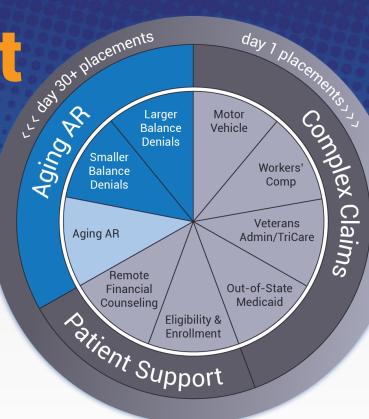
Aspirion is committed to integrating with providers' denial teams to become the ultimate backstop and point of escalation. We are the go-to resource for complex denials, 2nd-level appeals, exhausted claims, and denial resolution knowledge.

When you partner with Aspirion, you get:

- A team of more than 100 attorneys and clinicians dedicated to your reimbursement
- · 12% more cash
- 49% greater collections during the first 90 days of placement
- 30% fewer write-offs for uncollectible accounts
- Detailed feedback to increase denial prevention
- Training focused on effective denial resolution practices

Maximize Your Denial Management

Our highly educated professionals will help you achieve your financial goals so you can focus on what really matters: your patients. **Contact us today to eliminate write-offs and collect the reimbursement you're missing.**



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