

## REVENUE CYCLE MANAGEMENT

# Improving Revenue Cycle Performance for an Internal Medicine Practice

How Office Beacon transformed billing operations and unlocked significant cash flow improvements within 90–120 days.

## \$450 K+

Recovered in aged AR within 4 months

## 95%

First-pass claim acceptance rate

## 18 days

Reduction in avg. reimbursement turnaround

## CLIENT PROFILE

A mid-sized Internal Medicine Practice in the United States was facing significant challenges with its Revenue Cycle Management (RCM) operations. The practice had a growing patient base but struggled with aging accounts receivable, delayed reimbursements, and claim denials, which were impacting their overall cash flow.

To address these issues, the practice partnered with Office Beacon to streamline their billing operations and improve collections.

## KEY CHALLENGES



High Accounts Receivable (AR) aging, with a large percentage of claims outstanding beyond 60–90 days



Limited internal resources to follow up on high-value unpaid claims



Frequent medical necessity denials



Diagnosis (DX) coding issues causing claim rejections



Lack of systematic follow-up on 30–60 day and 60+ day unpaid claims



Front-office errors during patient intake lead to claim submission issue



These compounding challenges were creating a revenue leakage cycle — delayed cash flow, rising AR balances, and increasing administrative burden — that required an expert partner with proven RCM workflows to reverse the trend.

## BEFORE VS. AFTER OFFICE BEACON

## BEFORE

- ✗ AR >90 days at 42%
- ✗ First-pass acceptance at 82%
- ✗ High denial rate from coding errors
- ✗ No systematic AR follow-up workflow
- ✗ Slow reimbursement turnaround

## AFTER

- ✓ AR > 90 days reduced to 27%
- ✓ First-pass acceptance at 95%
- ✓ Denial rate cut by 28%
- ✓ Structured 4-pillar AR management system
- ✓ Turnaround time reduced by 18 days



## OFFICE BEACON'S APPROACH

The Office Beacon RCM team implemented a **structured and proactive AR management strategy** built on four interconnected pillars — ensuring every dollar owed to the practice was systematically pursued, recovered, and protected from future leakage.



### High-Value Claim Prioritization

The team focused on higher dollar-value claims and escalated them for immediate payer follow-up to ensure faster reimbursement and maximize revenue recovery.

- Segmented claims by dollar value and payer type
- Escalated high-priority claims for same-day follow-up
- Tracked resolution timelines per claim tier
- Dedicated specialists for high-value payer negotiations



### Aging AR Management

A systematic workflow was implemented to address all outstanding AR buckets with diligent payer follow-ups through calls, portals, and documentation tracking.

- 30–60 day outstanding claims workflow
- 60+ day unpaid claims escalation
- Older AR buckets requiring special handling
- Regular payer portal audits and call logs



### Root Cause Analysis

Office Beacon specialists reviewed denied and delayed claims to identify and eliminate recurring issues at the source, preventing future revenue leakage.

- Medical necessity documentation gaps
- Diagnosis coding errors and corrections
- Incorrect patient insurance details
- Payer-specific denial pattern tracking



### Front Office Collaboration

The RCM team worked closely with the client's front office staff, providing continuous feedback to prevent errors during patient intake and claim submission.

- Insurance eligibility verification errors
- Missing documentation identification
- Diagnosis and coding corrections
- First-pass submission accuracy training

## WHY OFFICE BEACON



#### Proven Expertise

Specialized RCM teams with deep payer knowledge and denial management experience across all major insurance carriers.



#### Rapid Deployment

Fully operational within days — no lengthy onboarding. Our teams integrate seamlessly with your existing practice management system.



#### Measurable ROI

Transparent reporting with real-time dashboards. Every dollar recovered and every denial prevented is tracked and reported.

## IMPLEMENTATION TIMELINE

1

#### Assessment

Full AR audit & denial pattern analysis

2

#### Prioritization

High-value claim segmentation & workflow setup

3

#### Execution

Active follow-up, resubmissions & appeals

4

#### Optimization

Root cause fixes & front-office alignment

## RESULTS ACHIEVED

# 35%

↓ REDUCED

AR &gt; 90 Days

From 42% down to 27%

# 28%

↓ REDUCED

Denial Rate

Medical necessity &amp; DX coding

# 95%

↑ INCREASED

First-Pass Claim Acceptance

Up from 82%

# 22%

↑ INCREASED

Overall Collections

Month-over-month growth

# 30%

↑ IMPROVED

High-Value Claim Recovery

Via targeted follow-ups

# 18 days

↓ FASTER

Avg. Reimbursement Turnaround

Significant cycle acceleration

## FINANCIAL IMPACT

# \$450 K+

 Recovered in aged AR  
within 4 months

# \$120 K+

 Improvement in monthly  
cash flow

# ↓ Leakage

 Revenue leakage reduced through  
better coding & follow-up

## KEY OUTCOMES

By implementing a disciplined AR follow-up strategy and addressing root causes of denials, Office Beacon helped the internal medicine practice improve revenue cycle performance, reduce outstanding AR, and stabilize cash flow — delivering measurable results in under 120 days.

## PERFORMANCE IMPROVEMENT AT A GLANCE





*Office Beacon's team brought structure and accountability to our billing process. Their focus on high-value claims and consistent follow-up significantly improved our cash flow in a short period of time. We've seen a noticeable reduction in denials and faster reimbursements.*

**Practice Administrator**  
Internal Medicine Group (USA)

By combining structured AR workflows, denial analytics, and front-office alignment, Office Beacon delivered measurable financial impact and operational efficiency within a short timeframe.

#### OTHER OFFICE BEACON SERVICES

Medical Billing & Coding

Prior Authorization

Denial Management

Patient Scheduling

Credentialing

Healthcare IT Support

Virtual Medical Assistants

Revenue Cycle Analytics

READY TO TRANSFORM YOUR REVENUE CYCLE?

## Let's Recover What's Yours

Join hundreds of healthcare practices that trust Office Beacon to maximize collections, reduce denials, and accelerate cash flow.



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