National medical claim denial trends and the impact on providers

A Change Healthcare Report

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Welcome to the Change Healthcare Healthy Hospital Revenue Cycle Index

Denials. They erode providers’ bottom lines, impede timely reimbursement, and sap time and money to appeal.

But how much provider revenue is put at risk by denials annually? How much does it cost to rework a claim? And how much are providers losing to administrative expenses for appeals?

Change Healthcare analytics experts worked to answer those questions. As one of the largest independent healthcare technology companies in the United States, Change Healthcare processes billions of provider transactions worth trillions annually.

Using our revenue cycle analytics tools—the same tools we provide to customers—our data scientists revealed the state of denials nationally.

In addition to providing the first birds-eye view of national denials data trends, providers can access this data online to benchmark their organizations against peers.

Find out how your organization’s denials management program compares at MyHealthyHospital.com.

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Methodology

The Change Healthcare Healthy Hospital Revenue Cycle Index data was culled from a sample of more than 3.3 billion hospital transactions valued at $1.8 trillion.

Change Healthcare analysts used primary institutional inpatient and outpatient claims processed by Change Healthcare in 2016, and the average charged amount and first denied amount for the 724 hospitals included in the claims sample.

The total claimed charges and denied amounts for the nation’s 5,683 hospitals was then extrapolated from this sample data. An appeal success rate of 63%¹ and average reimbursement rate of 29%² were used to calculate the amount denied. The $118¹ per claim average appeal cost is based on Change Healthcare statistical averages for hospital customers.

The data used for the analysis is based on internal Change Healthcare data, and may or may not be representative.

¹ Based on Change Healthcare statistical averages for hospital customers.
² Based on Change Healthcare RelayAnalytics Pulse national average reimbursement rate.
Hospitals can speed cash flow and cut administrative costs by using analytics to measure and improve revenue cycle processes and performance.

But you can’t fix what you don’t understand. See what you’re missing with our free revenue cycle self-assessment tool, now available online.

With a few clicks, you can benchmark your hospital’s fiscal fitness against peers nationwide, using the same Change Healthcare national claims database that was used to produce this report.

Visit [MyHealthyHospital.com](http://MyHealthyHospital.com) to get your free revenue cycle health report today.
Of an estimated $3 trillion in claims submitted by hospitals in 2016, an estimated 9% of charges ($262 billion) were initially denied. For the typical health system, as much as 3.3% of Net Patient Revenue, an average of $4.9 million per hospital, was put at risk due to denials.

All numbers are based on extrapolation methodology detailed on slide 3.
Appeals Are Costly

While 63% of denied claims are recoverable on average, appeals cost providers roughly $118 per claim, or as much as $8.6 billion in administrative costs nationally.

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Denial Rates by Region

- **Pacific**: 10.89%
- **South Central**: 10.5%
- **Mid-West**: 10.32%
- **Southeast**: 9.33%
- **Southern Plains**: 8.6%
- **Northeast**: 8.3%
- **Mountain**: 6.99%
- **Northern Plains**: 6.64%

All numbers are based on extrapolation methodology detailed on slide 3.
Denial causes span the entire revenue cycle, although the largest percentage are associated with front-end processes.

- Registration/Eligibility: 23.9%
- Missing or Invalid Claim Data: 14.6%
- Auth/Pre-Cert: 12.4%
- Medical Documentation Requested: 10.8%
- Service Not Covered: 10.1%
- Other: 9.6%
- Medical Coding: 5.8%
- Medical Necessity: 5.8%
- Untimely Filing: 3.7%
- Appropriateness of Care: 3.4%

All numbers are estimates based on extrapolation methodology detailed on slide 3.
One More Thing …

Ask yourself if your denial management program is performing as well as it could.

Is your hospital leading the way, hanging with the pack, or falling behind?

Visit MyHealthyHospital.com to run a fast revenue cycle health check. Benchmark your organization’s KPIs against peers nationwide and know where you stand.
For more information on patient access automation, denials management, claims management, and revenue cycle analytics, visit www.ChangeHealthcare.com.

Inspiring a Better Healthcare System