

# 5 RCM CHANGES TO 3X YOUR RETURNS

*A Bite-Sized Guide for  
Big Wins in Healthcare  
RCM*



1 Your billing system should work for you—not slow you down

2 If your SOPs are solid, you've already won half the battle

3 Keep asking 'why?' until denial trends start making sense to you

4 Prioritize the claims that matter. That's where your actual money lies

5 Ditch the "one-size-fits-all" tech approach in RCM

These are the gospel truths we, as healthcare revenue cycle management (RCM) experts, often tell our customers. Having worked with hundreds of providers, we've realized that most of them are sitting on untapped revenue without even realizing it.

That's why we often encourage them to think beyond claim processing and dive deep into their RCM systems—to *unlock revenue opportunities they never knew existed*.

Sometimes, all it takes is a critical eye and a few smart moves to change the game. And this bite-sized guide will help you do exactly that. It'll walk you through **five high-impact strategic RCM changes** that can help boost your efficiency and triple your returns—without breaking your back or budget.

Let's dive in

# 01 Optimize Your Billing System

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*Your billing system should work for you,  
and not slow you down*

Before expecting your system to boost your collections, assess whether it's even built for the job to meet your needs.

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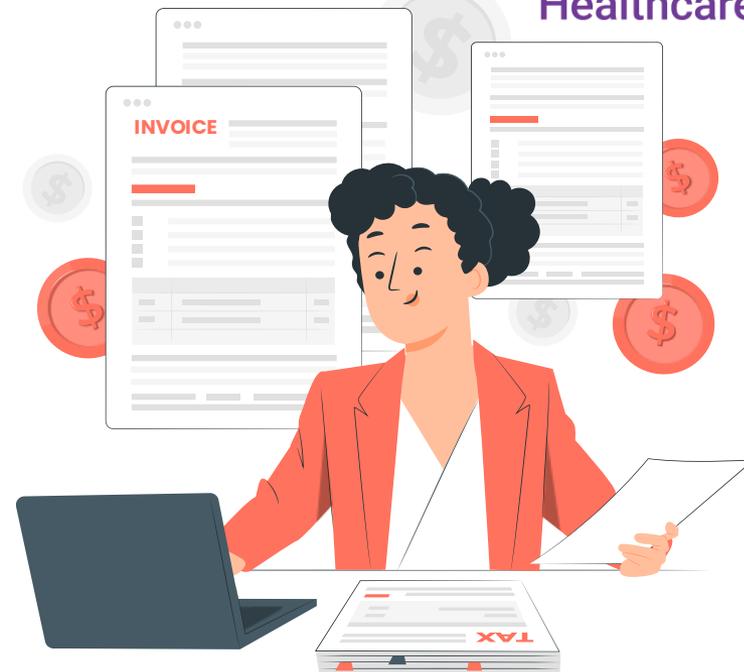
Audit your touchpoints and review the steps in your billing cycle that can be eliminated to reduce lags.

Review your rules, edits, scrubs, and workflows for gaps. Patch the holes to set your system up for optimal efficiency.

Automate manual handoffs to reduce errors leading to inefficiencies and high denial rates.

## Pro Tip:

By fine-tuning your billing system, you can have cleaner claims, fewer denials, and faster reimbursements—for maximized revenue.



# 02

## Build Your SOPs



### *Your own playbook for efficient RCM*

Whether you're a 5-bed clinic or a 500-bed hospital, RCM standard operating procedures (SOPs) are non-negotiable to keep your team on the same page—especially when payer rules keep shifting.



Document payer-specific nuances and exception handling for standardized execution and fewer “I didn’t know” mistakes.

Use your custom RCM playbook to optimize workflows and reduce the training time for your staff members.

Regularly update your SOPs with regulatory and payer shifts to keep your costs in check, staff burden low.

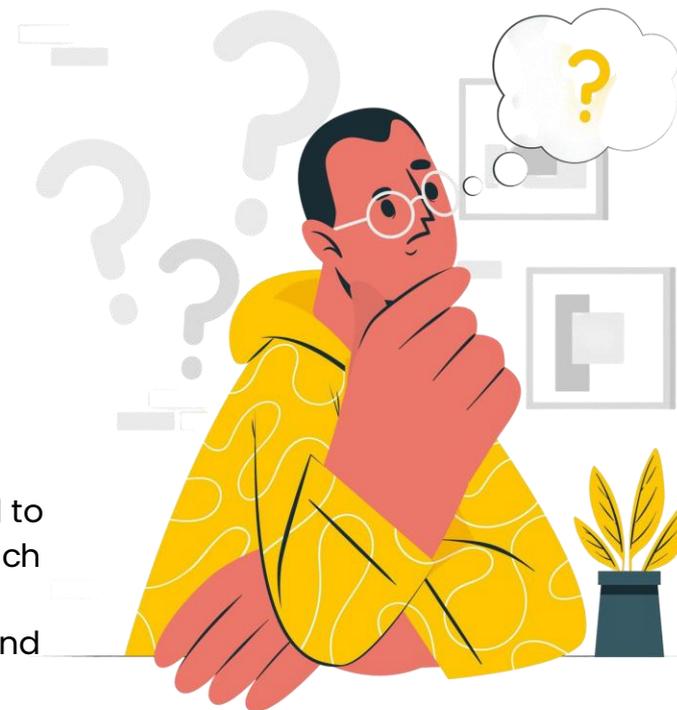
### **Pro Tip:**

With clear SOPs in place, you can turn operational chaos into clarity to boost efficiency, enhance RCM compliance, and reduce burden—driving better performance.

# 03 Question Denials

***Questioning denials is just as important as resolving them***

Every denial *has* a story; every denial *tells* a story. All you need to do is channel your inner detective to ask the “why?” behind each one. Don’t stop at the surface—dig deep to uncover the root cause behind revenue leaks to boost your denial prevention and AR performance:



Understand denial patterns across payers and plans to eliminate denials at the source.

Perform thorough root cause analysis and establish a feedback loop to address systemic errors before they turn chronic.

Leverage RCM analytics and actionable insights to push back and improve payer negotiations.

## Pro Tip:

By consistently leveraging analytics and asking the “why?” behind your denials, you don’t just resolve them—you start preventing them proactively and improving your cash flow.

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# Prioritize AR That Moves the Needle

*Because not all claims are created equal*

Not all claims are worth chasing, and focusing on the wrong ones means wasting your time, money, and resources. Thus, focus and prioritize your AR where it counts and where the payoff is real.



Segment your AR based on claim size, payer history, and payment likelihood; use AI tools to prioritize high-value opportunities.

Avoid chasing low-dollar, high-effort claims and accounts that don't contribute significantly to your revenue.

Minimize efforts on claims that have been overworked and have little to no chance of payout.

## Pro Tip:

Smarter AR optimization in RCM helps you to recover more, faster and with less effort.

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# 05 Invest in the Right Tech

## *Ditch the “one-size-fits-all approach” in RCM*

Healthcare RCM is multifaceted, and no single tech or tool addresses every issue. What might work for one process might not work for another. Thus, to maximize efficiency, assess your needs and tailor your tech stack to meet those unique needs.



Use automation for repetitive tasks (think: eligibility checks, status updates). Implement it in areas where manual intervention is least or not required.

Leverage AI where decision-making and judgment are needed (think: propensity to pay tool for claim prioritization and NLP for coding assistance)

Integrate RCM technology wisely—align it with your goals, get stakeholder buy-in, and clean up your data, so your tech drives results, not chaos.

### **Pro Tip:**

The tech done right eliminates chaos, reduces RCM inefficiencies, and fast-tracks collections, lowering your costs and yielding you higher returns.

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# Make Small Smart Moves for Big Gains

RCM success isn't about an overhaul—it's about making small, smart tweaks. By fine-tuning your system, building SOPs, asking the right questions, prioritizing your AR, and using the right technology, you can 3X your returns without burning out your team.

**Ready to make these RCM wins?**

**Jindal Healthcare can help you get there—fast.**

[Schedule Expert Consultation Today](#)

