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Interventional Radiology Practice

THE CHALLENGE

A six-physician, hospital-based **interventional radiology practice** thought their denial rate was typical among their provider type. After a value assessment from Aptarro, it was clear revenue cycle process improvement was needed. For this practice, **medical necessity denials** comprised the majority of their coding issues. Medicare and Medicaid coverage determinations (LCD/NCD) and commercial payer policy guidelines were frequently changing and required a manual review of the policies for updates. Printed versions of policies specific to the services they performed were maintained, but keeping the most recent policy available was time consuming and often resulted in missed updates.

THE SOLUTION

With Aptarro's hosted, SaaS-based platform, the full suite of edits and content are updated as often as necessary. Our Medicare, Medicaid, commercial, and proprietary medical necessity edits are updated monthly, **ensuring** the most recent version of a payer's coverage guidelines are available for editing. In addition, our medical policy viewer links a PDF of the coverage policy in question to the edit, allowing the coder to view the payer's coverage guidelines for the service in question. Knowing they don't have to visit a payer's website to access the most recent coverage guidelines was a time-saving revenue cycle improvement for this practice.

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*Total billed errors refer to denial intervention, including claim level and/or line-item level errors, rejections, underpayments, or other revenue loss from June 2024 - June 2025.

THE RESULTS

Through their partnership with Aptarro, this practice was able to identify and rectify potential revenue loss for services they frequently performed. In addition to our suite of medical necessity edits, being able identify issues with units of service, bilateral service validation, diagnosis validation, and correct modifier usage has resulted in a lower overall denial rate and increased revenue.





