PREDICTIVE INTELLIGENCE RESEARCH REPORT

Transforming Denial Management into Denial Avoidance





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ABOUT QUADAX

Quadax is a unique clearinghouse – they're family-owned, privately held, and focused on responsible, client-centered growth. That means they invest in long-term partnerships, not shareholder returns. With a 99.7% first-pass rate, tailored service & support, and a Best in KLAS track record, they help providers get paid faster and with less effort.



SERVICES

Quadax delivers intelligent revenue cycle solutions, including claims management, denial resolution, patient access, and Al-driven analytics to help healthcare organizations boost performance and get paid faster.

- 01. Claims Management
- 02. Reimbursement Management
- 03. Patient Access
- 04. Decision & Predictive Intelligence

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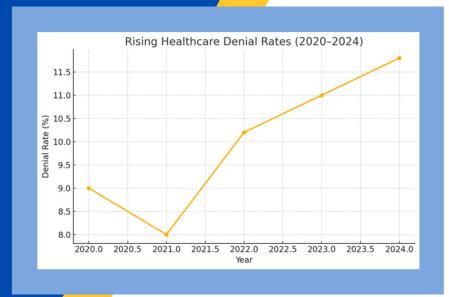
EXECUTIVE SUMMARY

Quadax's Predictive Intelligence (PIQ) is a next-generation solution that uses machine learning to proactively identify and prevent claim denials. By integrating PIQ into claims management workflows, providers can significantly reduce errors before submission, optimize reimbursement, and enhance operational efficiency. This research highlights the powerful impact of PIQ through a case study with Crisp Regional Hospital, as well as measurable results that include a 125% increase in reimbursement, 60% reduction in denial codes, and over \$120,000 in return on investment.



STATISTICAL REPORT

According to Becker's Hospital Review, 65% of denied claims are never reworked, leading to significant and unnecessary revenue loss for healthcare organizations.



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MARKET CONTEXT

The healthcare industry continues to face mounting pressure to reduce administrative burdens and increase revenue capture. Denials remain a top challenge, with up to **20% of claims denied** and significant revenue left uncollected. Traditional denial management is reactive, labor-intensive, and costly. The future of revenue cycle optimization lies in predictive, data-driven solutions.

Quadax's PIQ answers this call by shifting the paradigm from denial management to denial avoidance, enabling organizations to resolve issues before claims are submitted, preventing downstream delays and improving overall financial performance.

PRODUCT OVERVIEW: PREDICTIVE INTELLIGENCE BY QUADAX

Powered by machine learning, PIQ is seamlessly built into Quadax's claims and remittance engine to drive smarter processing. It intelligently analyzes claim data, payer behavior, and historical denial patterns to flag and prevent errors **before** claim submission.

KEY FEATURES:

- Predictive Analytics Engine Learns from claims and remittances to forecast likely denials.
- Customizable Rule Sets –
 Automates claim flagging and correction based on client-specific trends.
- Seamless Integration –
 Works within Quadax's existing claims management workflow.
- Staff Training Tool –
 Aids onboarding and process improvement by showing cause-and-effect of corrections in real time.





CASE

CRISP REGIONAL HOSPITAL

Client Overview

Crisp Regional Health Services operates a comprehensive care network, including Crisp Regional Hospital, a Level III trauma center. The organization supports a wide range of specialties and services across southern Georgia.

Challenge

As a longtime Quadax client, Crisp sought to proactively reduce denial rates by targeting specific coding and non-covered error categories that accounted for the majority of denied claims.

Solution & Implementation

Quadax implemented PIQ tailored to Crisp's denial trends. The solution flagged patterns in error codes 182 and 96, enabling Crisp to:

- Automate predictive flags using XpressBiller rules.
- Correct claims before submission.
- Recover previously written-off revenue.

"Implementing PIQ into our existing workflow has exceeded our expectations and recovered

money."

Marilee Bruns, Director of Patient Financial Services, Crisp Regional Hospital

REAL RESULTS:

- 125% increase in reimbursement
- 60% reduction in denial codes 182 and 96
- \$120,000+ in return on investment
- \$93,000+ recovered from previously denied claims
- Reduced manual workload due to fewer staff touches on flagged claims

STRATEGIC VALUE

PIQ delivers across multiple business dimensions:

- Financial Impact Directly improves cash flow and revenue recovery.
- Operational Efficiency Reduces staff workload and accelerates claim turnaround.
- Risk Mitigation Decreases exposure to denials and payer delays.
- Scalability Customizable to hospital systems, labs, and specialty providers.
- Client Satisfaction Demonstrates high ROI and strong outcomes in real-world use.





CONCLUSION

Predictive Intelligence by Quadax empowers healthcare providers to take control of their revenue cycle like never before. With proven success at Crisp Regional Hospital and strong quantifiable results, PIQ represents a pivotal innovation for organizations seeking smarter, faster, and more profitable RCM outcomes.

As healthcare continues to evolve, PIQ stands at the forefront by delivering predictive accuracy, denial avoidance, and bottom-line impact.

FOR MORE INFORMATION

- Visit www.quadax.com
- 7500 Old Oak Boulevard, Cleveland, OH 44130
 Phone: 440.777.6300 | Fax: 440.777.2330
 quadax@quadax.com