

How IDS Healthcare Helped  
a Multispecialty Clinic  
Recover Over \$1.3M in  
Claims in Just 7 Months



Introduction

A multispecialty clinic group in the Midwest U.S. faced mounting aged accounts receivable due to high patient volume and a shortage of in-house billing resources. With their internal team stretched thin, unresolved claims over 90 days began to disrupt cash flow and strain operations.

Challenges

- Over **14,000 commercial claims** aging past **90 days**
- \$1.3M** in unresolved receivables
- Staffing gaps** made follow-ups inconsistent
- Denials and underpayments** were going unnoticed
- No automation or tracking tools for **timely filing alerts**



Our Solution



IDS deployed a **dedicated A/R Recovery Taskforce** supported by our **AI-powered revenue cycle engine**. Our process included:

- Early-win strategy:** We targeted claims between 90–120 days nearing timely filing deadlines
- Payer contract intelligence:** Our AI-assisted system flagged claims with potential underpayments based on contract variances
- Denial root cause resolution:** We spotted common patterns in denials and worked with the client’s front-end team to fix those issues at the root
- Automated worklists:** Automated worklists helped us prioritize daily—the highest-value accounts were given top priority

Result

Through a focused approach, deep domain expertise, and smart automation, IDS Healthcare delivered measurable improvements in both operational efficiency & financial outcomes in just 7 months.

- Resolved **87%** of aged A/R from the original \$1.3M inventory
- Reduced days in A/R by **13%** across all payers
- Identified **\$250K** in missed revenue due to underpayments
- Client scaled partnership:** Now outsourcing all denial management and aging follow-up to IDS

