



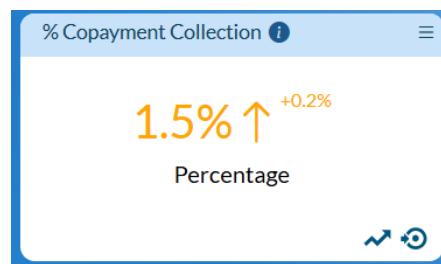
Revenue Cycle Module

Turn insight into foresight across your revenue cycle

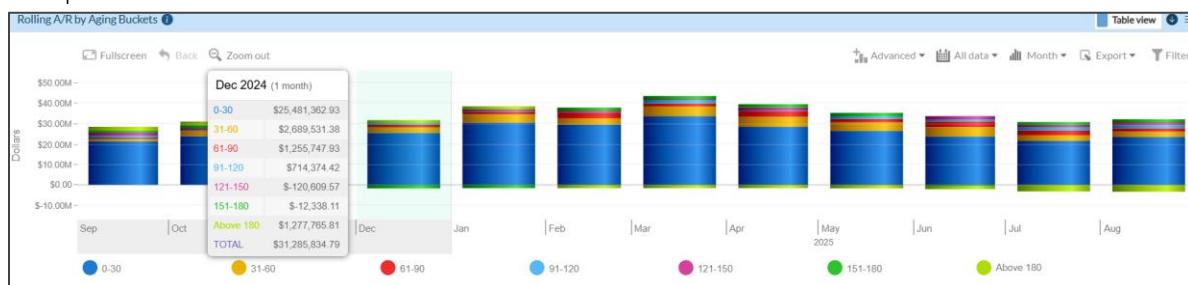
The WhiteSpace Health Revenue Cycle Module applies advanced artificial intelligence and machine learning to deliver real-time visibility, operational clarity, and prescriptive guidance across the end-to-end revenue cycle. By transforming fragmented data into actionable intelligence, health systems gain transparency into RCM performance, reduce management overhead, and consistently focus resources on the highest-value opportunities.

Build Transparency Into the Health of Your RCM Workstreams

Healthcare revenue cycles span dozens of interconnected workstreams—front-end access, coding, billing, denials, and collections—often managed across siloed systems and teams. WhiteSpace Health uses AI to unify these data sources into a single, trusted view of RCM performance. The WhiteSpace Health AI platform delivers real-time performance monitoring across claims, accounts, and work queues. It identifies bottlenecks and areas of revenue leakage impacting cash flow and productivity. The platform also delivers data-driven metrics replacing hours of manual reporting and anecdotal insights with fresh, actionable insights.



AI automatically transforms your data to deliver clear visibility into what is working –and what is not – across every RCM function. Dashboard that are refreshed daily fully unlock the power of your data, and support a data driven culture of decision making. And most clients only need about 10 weeks once connectivity is established to go live with a comprehensive RCM suite of dashboards.



Understand the Levers Affecting Performance – And Where to Act First

Not all RCM issues are equal. WhiteSpace Health AI continuously analyzes operational, financial, and payer-specific data to surface the variables that most directly influence outcomes such as denials, rework, and days in A/R.

AI reveals performance levers affecting performance. It identifies revenue leakage, finds trends, and quantifies reasons for delays so you can understand the financial impact of specific workstreams, payers, providers and more. AI automatically prioritizes opportunities based on value, risk, and time to impact so leadership can focus attention on the highest-priority opportunities. As a result, teams move from reactive firefighting to proactive optimization and resources are allocated where they deliver the greatest financial return.

Denial Resolution and Denial Impact													
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Denial Metrics	Sep-2024	Oct-2024	Nov-2024	Dec-2024	Jan-2025	Feb-2025	Mar-2025	Apr-2025	May-2025	Jun-2025	Jul-2025	Aug-2025	Sep-2025
Denied Charge Amount	\$2,392,689	\$2,812,367	\$2,888,229	\$3,835,531	\$2,956,769	\$4,713,662	\$4,314,052	\$3,863,308	\$4,159,477	\$2,931,298	\$3,334,506	\$3,187,132	\$542,693
Denial Count	9210	9846	10422	12818	11286	14080	11710	11838	14115	10118	11078	11580	2011
Pay After Denial	\$578,784	\$800,834	\$940,326	\$1,226,839	\$1,429,622	\$1,333,133	\$1,742,068	\$1,510,610	\$1,306,897	\$1,284,858	\$1,372,506	\$1,211,479	\$142,294
Adjustments After Denial	\$1,121,290	\$1,781,503	\$1,275,733	\$2,161,179	\$2,317,530	\$2,772,052	\$3,033,270	\$3,240,441	\$4,343,439	\$2,955,313	\$2,469,989	\$2,650,526	\$314,325
Pending AR	\$692,614	\$230,030	\$672,170	\$447,513	(\$790,383)	\$608,476	(\$461,285)	(\$887,743)	(\$1,490,859)	(\$1,308,873)	(\$507,989)	(\$674,873)	\$86,075
Average Denial Lag	7	15	20	16	22	19	24	23	39	38	38	36	41
Delay in Revenue Due to OS AR	\$332,732	\$110,805	\$322,507	\$210,600	(\$372,744)	\$285,010	(\$215,743)	(\$413,511)	(\$696,679)	(\$617,919)	(\$240,736)	(\$323,669)	\$41,393

Confidentially Resolve Claims with Machine Learning Intelligence

WhiteSpace Health's ML algorithms learn which resolution strategies work best by payer, denial reason, and claim type by culling through your historical claims to uncover patterns associated with successful resolutions. ML is augmented with a library of CCI edits, best practices, and other guidelines to further enhance the probability of successful claim resolutions. ML recommends steps so your team can confidently resolve issues based on patterns with the highest probability of success, and it continuously improves as new data and outcomes are captured.

Ongoing learning and adaptation results in lower cost to collect. Reliance on uneven training by "tribal knowledge" results in faster resolution cycles, improved cash velocity, and the reduction of trial-and-error by new staff. When staff consistently act using best-practice recommendations, operating expense is lower and collections as well as operating profit increase.

The screenshot shows a software interface for managing AI recommendations. At the top, there are tabs for 'Overview', 'AI Recommendation Scenario Summary', 'Transactions Details', 'Paid History', 'PM Notes', 'EDI Eligibility', and 'EDI Status'. Below these tabs is a dark blue header bar with the word 'Recommendations' in white. To the right of the header, it says 'Matched Workables 14 \$34609.05'. Underneath the header, there is a section titled 'Knowledge Hub Recommendation' with a light blue background. It contains a list of three items, each with a green checkmark and a blue box containing a number (1, 2, or 3). The items are: 1. Recommendation Summary: I. Reprocess the claim, using Authorization OP0773485186. Authorization valid from 09/19/2023 to 12/18/2023. II. As per WSH Algorithms Open Denials >90 Days. AR supervisor intervention required to address the denial in TAT. Please initiate necessary action as per Denial. 2. PotentialReimbursement: Potential reimbursement for CPT J3490IZ by payor AARP WellMed Medicare HMO would be approximately \$ 5560.50 based on historic payments review. 3. PayerAppealLimitValidation: Payor AARP WellMed Medicare HMO appeal limit is 120. Claim has exceeded appeal limit by more than 3 months.

Quantifiable Outcomes

AI is the best tool for managing the complexities of the revenue cycle and driving improved cash collection and efficient use of cash for healthcare organizations. Transparency is automatically created through the creation of dashboards. The levers that affect performance are clearly depicted for optimal understanding. ML then prioritizes tasks and recommends actions with the highest probability of successful cash recovery.

Our clients consistently enjoy a lower cost to collect and an increased velocity of cash collections. This elevated level of performance is sustained by the insights and intelligence created by machine learning that supports an essential cultural shift in your organization that values and acts on high quality intelligence.

The revenue cycle is a highly complex ecosystem and AI is no longer optional. It is essential to not only survival - but to thrive. For more information on how our AI platform can transform your business, we invite you to visit our website to view our blogs, podcasts and other tools that have been purposefully created by our RCM and healthcare IT subject matter experts to help you get the most from your AI investment.

<https://whitespacehealth.com>.