

Unmasking Denials

The Hidden Costs of Revenue Recovery

Claim denials are nothing new. Most healthcare organizations know they're a big issue, but the true cost often goes unnoticed. You see the clues every day: dashboards, workflows, reports. Yet, the full impact remains hidden. Look closer, and the real cost of denials becomes clear. **It's time to uncover the truth.**

Clue #1 The Problem Is Bigger Than It Looks

At first glance, denial rates may seem manageable. But digging deeper tells a different story.

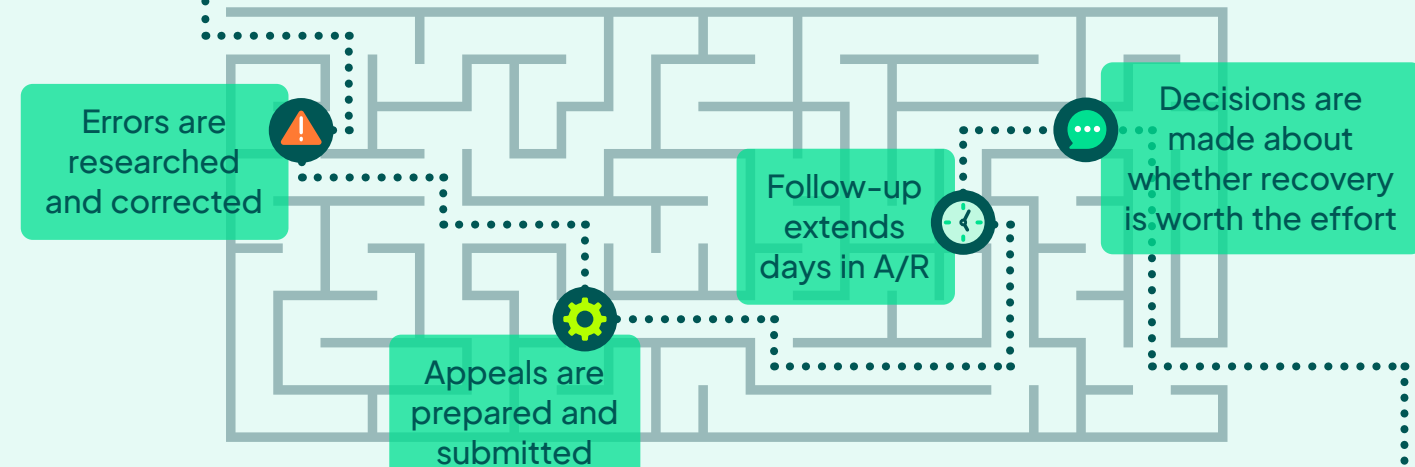


Individually, these numbers may not raise alarms. Multiplied across thousands of claims, they signal a system issue.

Clue #2 A Denial Doesn't End the Story

A denied claim doesn't disappear. It leaves a trail.

Once a claim is denied:



What looks like a single denial often becomes weeks of manual work.

Clue #3 The Real Costs Aren't on the Claim

The unpaid balance is only part of the story.

Hidden behind each denial:

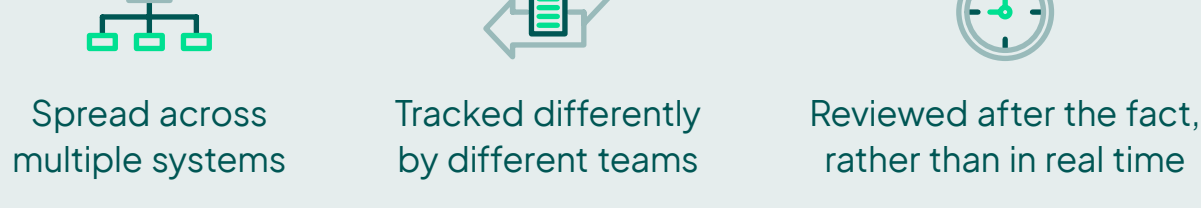


Over time, the cost to collect can rival—or exceed—the value of the claim itself.

Clue #4 Patterns Are Being Missed

Most organizations don't lack denial data. They lack visibility.

Denial data is often:

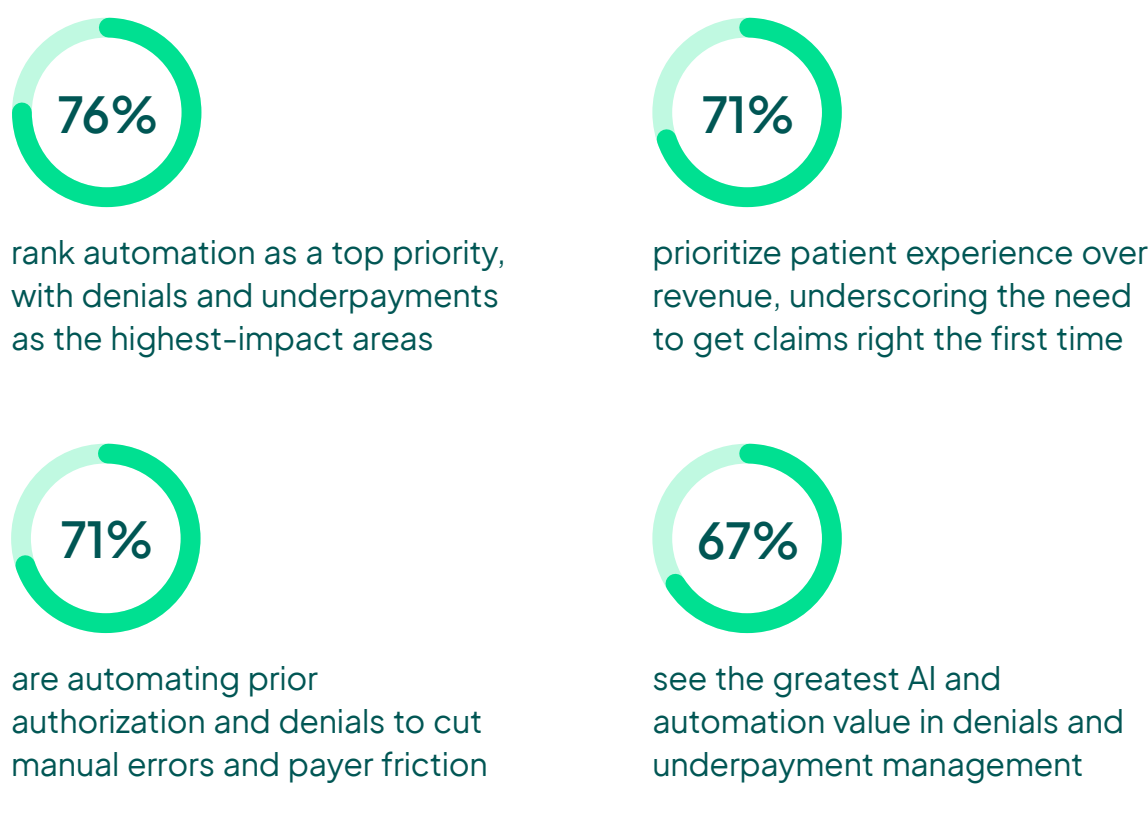


Without clarity, the same denial reasons repeat. The same payer behaviors go unchallenged. And the same costs continue to accumulate quietly.

Clue #5 Prevention Is Becoming the Priority

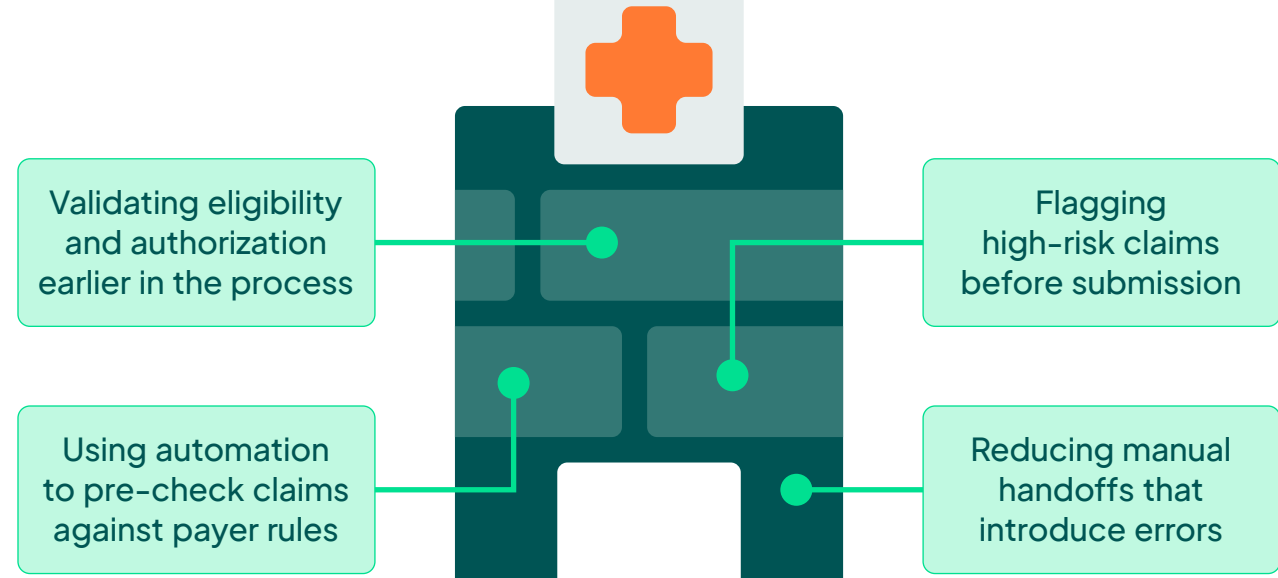
Many organizations are shifting their focus on denials upstream—treating prevention as a strategic imperative rather than a recovery task.

Across the industry, [revenue cycle leaders](#):



This shift reflects a growing understanding that every preventable denial adds cost, delays cash flow and creates unnecessary patient friction.

Organizations are responding by:



Prevention lowers the cost to collect and eliminates friction before reaching the patient.

The Breakthrough

When the Patterns Come Into Focus

The investigation changes when denials are treated as signals, not isolated events.

When organizations begin to:

- Examine [denial patterns](#) by payer, service line and reason code
- Separate high-impact denials from noise
- Surface underpayments alongside denials
- Shift attention upstream to prevent errors before submission

The hidden story becomes visible.

Case Findings

What Becomes Possible



With clearer insight and the [right tools](#):

- Preventable denials decline
- Appeals focus on claims that truly matter
- Underpayments are identified and recovered
- Staff time is spent where it delivers the highest return

The outcome isn't just better recovery—it's a lower cost to collect and a more sustainable revenue cycle.

Case Closed

The Bottom Line

Denials aren't just lost revenue. They're hidden cost. Until you uncover them, they'll keep eroding performance.



Learn how you can partner with FinThrive to [prevent denials and lower your cost to collect](#).