

AI Medical Billing Automation System

Wealth Horizons Academy | \$1497

AUTOMATE YOUR MEDICAL BILLING WITH AI

AI is transforming medical billing — reducing errors, accelerating payments, and enabling smaller teams to handle larger volumes.

MODULE 1: AI IN REVENUE CYCLE MANAGEMENT

Where AI Is Making the Biggest Impact

- 1. **Prior Authorization:** AI predicts authorization requirements and automates submission
- 2. **Coding Assistance:** AI suggests codes from clinical documentation
- 3. **Claim Scrubbing:** AI catches errors before submission (reducing denials by 30-40%)
- 4. **Denial Prediction:** AI identifies claims likely to be denied before submission
- 5. **Payment Posting:** AI auto-posts payments from ERAs
- 6. **Patient Eligibility:** AI verifies insurance in real-time at check-in

ROI of AI Implementation

Metric	Before AI	After AI
Denial rate	12%	5%
Days in AR	45	28
Staff hours/claim	25 min	8 min
Collection rate	87%	94%

A \$3M revenue practice: AI improvement captures \$210,000 in previously lost collections.

MODULE 2: AI CODING TOOLS

Computer-Assisted Coding (CAC)

CAC tools read clinical documentation and suggest appropriate codes.

Leading Platforms: - 3M 360 Encompass - Nuance (now part of Microsoft) - Zynx Health - Optum360

Best For: High-volume coding environments, complex specialties

AI Coding Workflow

1. Provider completes clinical documentation in EHR
2. AI analyzes documentation and suggests codes
3. Coder reviews and approves suggestions
4. Coder corrects any inaccurate suggestions
5. Final coded claim submitted

Critical point: AI assists coders — it does not replace them. Human review and responsibility remains essential.

MODULE 3: AUTOMATION TOOLS BY FUNCTION

Prior Authorization Automation

- Availity Preauth: Checks authorization requirements automatically
- CoverMyMeds: Pharmacy and medical prior auth automation
- Myndshft: AI-powered auth with payer-specific rules

Eligibility Verification Automation

- Eligibility checked at time of scheduling (not just day of service)
- Real-time verification API integrations
- Automated batch verification the night before appointments

Payment Posting Automation

- 835 ERA auto-posting eliminates manual payment entry
- Exceptions flagged for human review
- Automatic balance forward to patient statements

MODULE 4: BUILDING YOUR AI-ENABLED WORKFLOW

The Automated Billing Day

6:00 AM: Automated eligibility verification runs for next-day patients
7:00 AM: Staff arrives to review eligibility exceptions
8:00 AM: Providers begin documentation with AI coding assistance
12:00 PM: Morning charges released, AI scrubs claims
2:00 PM: Clean claims submitted electronically
4:00 PM: Prior day ERAs auto-posted
5:00 PM: Denial queue reviewed and worked

Staff focus shifts from data entry to exception management and patient communication — the high-value activities that require human judgment.

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