

Precision Beyond Imaging

How a Texas Radiology Group Unlocked \$5M in Additional Annual Revenue with Jindal Healthcare's AI-Powered RCM

About the Client: _____

A multi-site radiology group serving patients across Texas faced persistent financial friction, with denials and AR delays constraining its growth and causing \$150K–\$300K in lost revenue each month.

Impact at a Glance:

36%

Increase in Monthly Collections

61%

Reduction in Denials

~15%

Improvement in Clean Claim Rate

The Challenge: _____

High Denials, Hidden Leaks, Slow Collections:

For this multi-site radiology group in Texas, patient volumes were steady but revenue wasn't.

Despite consistent patient throughput, the group's revenue was losing steam, resulting in \$150K–\$300K in monthly losses from denials and eligibility misses. Denials not only affected their first-pass success rate but also turned their collections into a guessing game, with no predictable cash flow.

Inconsistent AR follow-ups due to limited staff capacity further left a significant amount of their earned revenue uncollected every month:

The Diagnostic Snapshot:

18% Denial Rate

Over half tied to eligibility and coding errors, resulting in excess handoffs and avoidable write-offs.

81% Clean Claim Rate

Manual submissions without scrub intelligence led to avoidable rework and additional costs.

Inaccurate Payer Mapping

Claims were billed to incorrect payers, resulting in processing delays.

Fragmented Workflows

Lack of denial root cause analysis (RCA) and feedback loops resulted in recurring denials & reactive fixes.

Slow AR Recovery

Limited bandwidth meant delayed follow-ups and payments & missed revenue opportunities.

The Turning Point: _____

RCM Precision with AI That Sees Through Every Claim Like a Scan

The radiology group partnered with Jindal Healthcare to not just fix revenue cycle gaps but give their RCM the same precision and foresight their MRIs delivered every day—to prevent denials, accurately map payer behavior, and create a self-learning ecosystem.

And here's how AI re-engineered their RCM for operational and financial excellence:



AI-Powered Eligibility Verification

Like a contrast-enhanced scan, API-driven eligibility engine brought visibility where it was missing, validating payer data and capturing appropriate benefits in real time, eliminating 90% of eligibility misses.

Contextual Coding Intelligence

AI-driven decision trees and expert coding audits auto-flagged mismatched CPT and ICD codes before submissions, boosting the clean claim rate from 81% to 93%.



Predictive Denial Intelligence

Self-learning AI for RCM forecasted which claims were most at risk based on contextual intelligence, claim history, and payer behavior patterns.

Smart Claim Prioritization

Claims were automatically triaged and prioritized by propensity to-pay and ROI potential, ensuring high-impact, time-sensitive claims were worked first to boost collections.



AI-Guided AR Recovery

Adaptive AI workflows learned from payer responses and patterns, adjusting follow-up intervals and appeal strategies for reduced AR cycles and maximized revenue recovery.



Closed-Loop Learning

Every claim became data that fed insights into the system and feedback to the teams, creating a continuous self-learning RCM engine that grew smarter, faster, and more precise with each cycle.

Intuitive, Intelligent Dashboards



Agentic AI-powered smart dashboards delivered real-time visibility on KPIs and RCM performance, providing the right answers and corrective actions for process improvement.



Leaner Workflows

SOP-driven standardization slashed redundancy across the RCM board, cutting handoffs and costs.

The Impact: _____

From Reactive to Proactive Revenue Cycle

Key Metric	Before Partnership	After Partnership
Monthly Collections	\$1.1M	\$1.5M
Denial Rate	18%	7%
Clean Claim Rate	81%	93%
Coding Denials	11%	3%
Eligibility Denials	4%	<1%

Results That Mattered:

36% Boost in
Monthly
Revenue

AI-driven AR
prioritization unlocked
high-impact
collections.

61% Reduction
in Denials

Continuous RCA and
the feedback loop
eliminated the risk of
recurring denials.

~15% Improvement
in Clean
Claim Rate

Leaner AI workflows
and expert edits
improved the clean
claim rate.

Why It Worked: _____

Adaptive, Autonomous AI + Domain Expertise at Work



AI for Autonomous Execution: Predictive modeling, smart routing, and proactive denial prevention built a self-learning, autonomous RCM engine.

Expertise for Edge Cases: Experts fine-tuned payer-specific SOPs and claim edit templates and scrubs for cleaner submissions.



This hybrid, **human-in-the-loop** AI RCM engine transformed the radiology group's revenue cycle from reactive to resilient, turning unpredictable cash flow into predictable financial health.

The Big Picture: _____

Building a Predictive, Precision-Driven Radiology RCM

The radiology group's turnaround shows how AI-powered RCM goes beyond fixing denials to enable intelligent process optimization that prevents them altogether.

With Jindal Healthcare as their RCM partner, the group went from a reactive revenue cycle to a predictive one that learns, adapts, and drives sustainable financial growth.

Ready to Build Revenue Cycle Resilience with AI?

At Jindal Healthcare, we combine AI precision with expert oversight to create resilient revenue cycles that deliver real ROI by accelerating cash flow, cutting RCM costs, and staying financially resilient in the face of payer and regulatory shifts.

**Your Imaging Doesn't Guess.
Your RCM Shouldn't Either.**

Scan the QR code or click on the link below to start your AI-powered RCM journey with Jindal Healthcare.

<https://www.jindalhc.com/contact-us>



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