

The Revenue Recovery Playbook: Finding Hidden Revenue in your Healthcare Payer Correspondence.

A Practical Guide to Automating Payer
Correspondence and Protecting Revenue
in Healthcare RCM

Buried in the Backlog

Healthcare providers are drowning in paper and PDF correspondence from payers. From appeals and audits to contract changes and denial letters, these critical documents too often get lost in the shuffle, resulting in delayed payments, compliance risks, and increased operational costs.

The impact? Revenue is left on the table, and staff are stuck chasing paper instead of closing the books.

This guide shows how healthcare revenue cycle and finance leaders can identify, recover, and protect revenue that's hiding in payer correspondence.

The Hidden Cost of Paper and PDF Correspondence

Most correspondence is still handled manually: opened by hand, read by someone on staff, and manually sorted, categorized, or routed to the right team. Even digital PDFs are often dropped into shared folders or inboxes without structure or urgency.

“You can’t collect what you can’t see.”

The Risks:

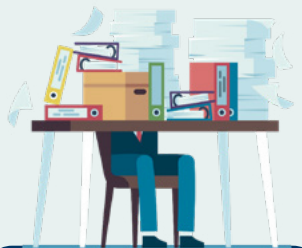
- Missed appeal deadlines from delayed reviews
- Denial letters overlooked or routed incorrectly
- Payer notices (e.g., fee schedule changes) not actioned in time
- Increased staffing costs to chase and reprocess documents



By the Numbers:



80%
of providers still receive
paper correspondence



68%
of payers reimburse
with paper checks¹



\$18B
wasted annually on
manual handling²



Over \$12
in overhead per paper-
based transaction³



How to Spot Revenue at Risk

Ask yourself:

- ☐ Do we know how many payer letters we receive each month?
- ☐ Are we manually sorting PDFs from payer portals or emails?
- ☐ Can we respond to audit or appeal letters in a timely manner?
- ☐ Is staff time being spent filing, organizing, or hunting down documents?

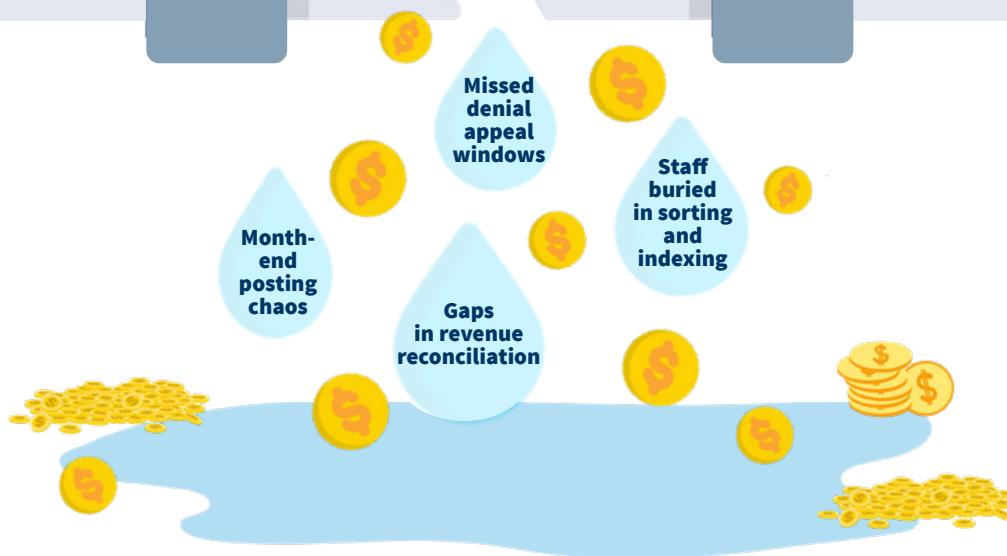
If you can't confidently answer these, chances are you're losing time and money.



Common Signs of Buried Revenue:

- Month-end chaos trying to post everything
- Staff working overtime to process documents
- Surprise denials from letters that were missed
- Delayed reconciliations and aged A/R

Signs You're Leaving Money in the Stack



How MediStreams Helps You Uncover and Recover

MediStreams automates the capture, indexing, and delivery of paper and digital payer correspondence. It takes what used to be manual chaos and turns it into clean, categorized data fast.



WHAT IT DOES:

- Captures scanned mail, PDFs, and lockbox outputs
- Uses OCR + NLP to identify and classify over 30 correspondence types
- Delivers 99% accurate, searchable documents within 24 hours
- Routes indexed files directly to Epic, OnBase, or your DMS
- Maintains 10 years of searchable archives with advanced search and filtering tools
- Supports custom file and image export to practice management systems for electronic posting



WHY IT WORKS:

- Built for healthcare workflows
- Works with your existing banks and systems
- No portal-hopping or manual uploading
- Intelligent categorization (e.g., appeals, credentialing, audits)
- Configurable workflows for specific users or teams to streamline routing
- Full audit trail ensures compliance, with original scanned images always accessible alongside indexed data

REAL-WORLD EXAMPLE:

One client uncovered \$4M in missing payments after MediStreams re-indexed correspondence that had been misfiled by their bank's OCR system.



Building a Revenue Recovery Workflow

- ☐ **Step 1: Centralize Incoming Correspondence**
Route all paper, email, portal downloads, and lockbox output through a single intake process.
- ☐ **Step 2: Automate Indexing and Categorization**
Use AI-driven tech like MediStreams to identify document type, payer, and patient info automatically.
- ☐ **Step 3: Deliver to Work Queues, Not Shared Drives**
Push documents into systems your teams already use (e.g., Epic, OnBase) for immediate action. Configure routing by user role or department.
- ☐ **Step 4: Monitor for Exceptions and Audit Readiness**
Track turnaround time, categorize backlog, and flag time-sensitive documents. Audit trails and original scanned images are accessible anytime.
- ☐ **Step 5: Measure and Refine Review key metrics like:**
 - Days to post correspondence
 - Staff hours per 100 documents
 - Denial rate improvement



Stop Leaving Money in the Stack

Manual correspondence handling doesn't scale. It hides revenue, delays payments, and drains your team's productivity. With the right automation partner, you can uncover that buried revenue and put it to work faster.

MediStreams is the trusted solution built specifically to eliminate this hidden cost in healthcare RCM.

Want to see how much revenue is hiding in your correspondence?

REQUEST A DEMO

**DOWNLOAD THE INFOGRAPHIC:
"From Paper to Posted Cash in 24 Hours"**

About MediStreams

MediStreams is a premier provider of automated revenue management systems for healthcare. Purpose-built for the complexity of remittance data, MediStreams ingests remits from any source (lockbox, PDF, EDI), converts them into standardized, posting-ready outputs, and delivers fast, accurate cash application with deep operational visibility. Healthcare providers, clearinghouses, and financial institutions choose MediStreams to automate manual tasks, expedite reconciliation, and protect margins, all with premium-level customer support. Follow us on [LinkedIn](#) and learn more at www.MediStreams.com.



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