



## **XiFin® Empower AI**

Activating Intelligence and Automation  
Where Revenue Operations Need It Most



## Making Revenue Cycle Management Simply Smarter

Revenue cycle management is no longer a back office function. It is a high stakes operational system under constant pressure: rising denial volumes, expanding documentation requirements, faster payor adjudication cycles, and complexity that outpaces manual capacity.

**XiFin® Empower AI** is an AI RCM ecosystem built on trusted encounter, financial, and payor data. It activates intelligence and automation **where needed across the revenue cycle**—reducing manual touches, coordinating workflows, accelerating customer innovation, and improving financial outcomes.

Rather than forcing organizations to adapt to isolated tools or custom projects, Empower AI delivers intelligence directly into revenue operations—so teams can increase predictability, speed, and performance at scale.

# \$25.7B

Claims adjudication costs providers **\$25.7B (2023)** and administrative denial labor costs reached **\$57.23 per claim<sup>1</sup>**

<sup>1</sup> Premier Inc., *National Denials Research*, 2023

## The Economic Reality

Denials aren't just rising—they're structural

Denials have always existed, but the economics have changed. Premier reports denial rates remain near **15%**, while the cost to fight those denials continues to rise—driven primarily by labor. In the same research, Premier found that **70% of denials are ultimately overturned and paid**, but only after repeated rounds of manual review—representing up to **\$18B in unnecessary administrative waste**.<sup>2</sup>

This creates a compounding problem: revenue teams are spending more time, effort, and cost to recover revenue that should have been paid correctly the first time.

At the same time, payors are accelerating automation. Industry analysis shows that **85% of payors now use AI in operations**, increasing denial velocity and shifting the burden of interpretation and response onto providers.<sup>3</sup>

**85% of payors** use AI in operations, accelerating denials at scale.

**70% of denials** are overturned—but only after costly, repeated review.

## Built for Revenue. Governed for IT.

XiFin Empower AI operates inside existing RCM workflows with enterprise grade governance, security, and auditability—so revenue teams gain speed and predictability without creating integration, compliance, or data control risk.

<sup>2</sup> Premier Inc., *National Denials Research*, 2023

<sup>3</sup> Aspirion, *HFMA First Illinois Speaks*, 2023

## What's Broken

### Why more people and more tools don't solve systemic complexity

When work enters the system faster than humans can interpret and resolve it, the result is inevitable: backlogs, delayed cash, and widening variance between expected and actual reimbursement.

Many organizations respond by adding staff or layering on point solutions. Over time, this increases operational fragmentation, strains IT resources, and slows innovation—without changing the underlying economics.

**XiFin Empower AI addresses this by activating intelligence and automation where work accumulates**, not by adding more worklists or systems. The platform coordinates decisioning, routing, and execution across workflows—reducing manual touches and enabling teams to focus on exceptions that truly require human judgment.

What is your average revenue per claim and can you absorb this cost increase?

Administrative costs rose to **\$57.23 per claim in 2023**<sup>4</sup>

AI enablement of the revenue cycle could reduce cost to collect by **30–60%**<sup>5</sup>

<sup>4</sup> Premier Inc., *National Denials Research*, 2023

<sup>5</sup> McKinsey & Company, *AI in Revenue Cycle Operations*

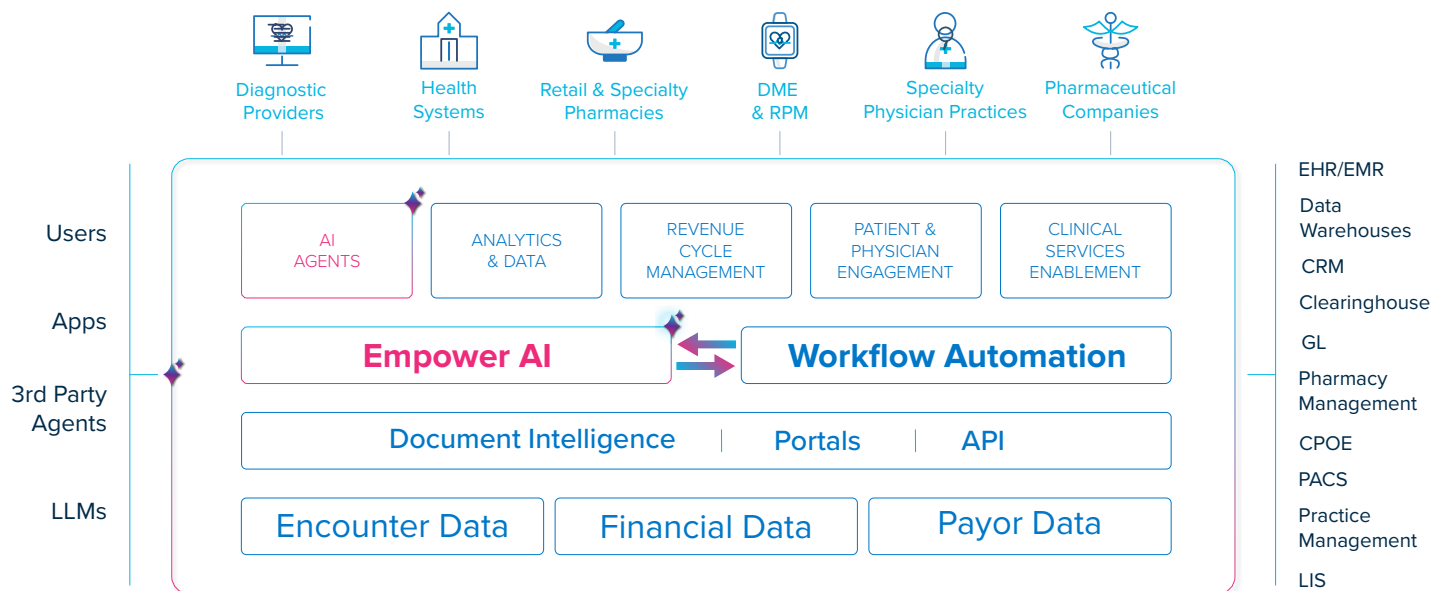
## How XiFin Activates AI Where It's Needed

AI creates value only when it's delivered at the point of work

In revenue cycle management, AI is often discussed as a single capability—a document reader, a prediction model, an appeal generator. But performance does not improve through isolated intelligence. It improves when **the right form of intelligence is activated at the right moment in or outside the workflow.**

**XiFin Empower AI is an AI RCM ecosystem designed to activate intelligence and automation where revenue operations need it most, operating on trusted data within enterprise grade governance and compliance guardrails.** This allows different forms of intelligence—decisioning, automation, and agentic execution—to be coordinated across workflows while meeting the exacting standards required in healthcare financial operations.

### XiFin® | EMPOWER



### Secure Cloud-based Healthcare Ecosystem

## AI is Not A Feature. It's An Operating Model.

AI in RCM is often reduced to isolated use cases: drafting appeal letters, reading documents, flagging errors. But sustainable performance gains don't come from disconnected wins—they come from **coordinated intelligence across the lifecycle**.

XiFin Empower AI applies intelligence where revenue teams struggle most:

- Capturing and handling documentation or correspondence effortlessly
- Offering accurate patient out-of-pocket expense estimates
- Interpreting ambiguous or unstructured payor responses
- Figuring out which claim errors to work on first to have the greatest impact
- Creation of policy-aligned appeal packets that are most likely to be successful
- Forecasting based on actual payor behavior



These capabilities are activated across critical moments:

- When claims must be clean at submission
- When payor responses are ambiguous or unstructured
- When exceptions and denials must be prioritized
- When appeals require patient-specific and policy aligned evidence
- When forecasting depends on how payors actually adjudicate

Because intelligence is at the core of XiFin's RCM infrastructure and based on industry-trusted data, it can coordinate across and beyond workflows rather than function as disconnected tools that may not be built for healthcare rigor and regulation.

**Practically, this results in fewer queues, fewer handoffs, fewer manual touches, and more predictable cash flow—without increasing operational, regulatory, or technology risk.**

**63%** of organizations report AI/automation use in the revenue cycle.<sup>6</sup>

<sup>6</sup> Aspirion, *HFMA First Illinois Speaks*, 2023



## ROI Snapshot: How AI RCM Pays Back

Why an integrated ecosystem and trusted data—changes the economics

**XiFin's AI RCM ecosystem and trusted data activate intelligence and automation where needed to reduce manual touches, coordinate workflows, accelerate customer innovation, and improve financial outcomes.**

The ROI of this approach does not come from any single AI capability. It comes from **changing how work moves through the revenue cycle**—reducing rework, accelerating time to payment, and improving throughput across the most expensive and friction heavy processes.

The opportunity: activate intelligence where work accumulates

Rather than adding staff or layering on point solutions, AI RCM creates value by **activating intelligence at the moments that generate the most rework and delay**—such as ambiguity, prioritization, documentation readiness, and policy alignment.

Industry analysis suggests AI enablement across the revenue cycle can reduce cost primarily by:

- reducing manual touches
- eliminating redundant work
- accelerating downstream resolution
- increasing payment velocity

XiFin customer outcomes show how this plays out operationally:

- **45% of claims paid within 8 weeks vs. 26% manually** (73% improvement)
- **~46% productivity improvement and ~40% reduction in time to fix** in exception processing

These gains are not isolated improvements—they are the **compound effect of coordinated intelligence across workflows.**

## A Practical Way to Model ROI

Most organizations realize ROI from AI RCM ecosystem through a combination of four **reinforcing value levers**:

### 1. Recovered revenue

Fewer missed appeals, faster resolution, and reduced write offs on collectible claims

### 2. Lower cost to collect

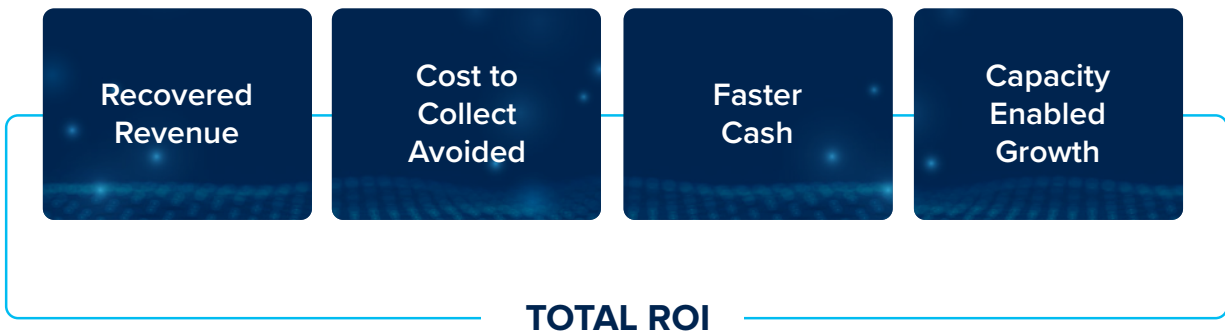
Reduced rework, fewer manual reviews, and lower administrative labor per claim

### 3. Faster cash realization

Shorter time to payment for affected claim populations, improving cash flow predictability

### 4. Increased patient access and scalable volume

By reducing administrative friction, manual bottlenecks, and downstream rework, organizations can support **higher patient and claim volume with the same operational footprint**—enabling growth without proportionally increasing staffing or cost



## Empower AI Solutions: Activating Intelligence and Automation Where It's Needed Most

**XiFin's AI RCM ecosystem and trusted data activate intelligence and automation where needed to reduce manual touches, coordinate workflows, accelerate customer innovation, and improve financial outcomes.**

Empower AI delivers a portfolio of AI solutions that activate intelligence at specific points in the revenue lifecycle—front end accuracy, patient financial transparency, payor interpretation, exception prioritization, documentation readiness, pricing and forecasting, and appeals execution. Together, these capabilities reduce rework, improve predictability, and accelerate payment velocity without adding operational complexity.



**XiFin Empower AI  
DocExtract**



**XiFin Empower AI  
Appeals Agent**



**XiFin Empower AI  
Expect Pricing &  
Forecasting**



**XiFin Empower AI  
Insurance Snap & Map**



**XiFin Empower AI  
Claim Error & Denial  
Prioritization**



**XiFin Empower AI  
Patient Responsibility  
Estimation**



**XiFin Empower AI  
Payor Response Interpretation**



## Intelligent Documentation & Correspondence Handling

# XiFin Empower AI DocExtract

Transform inbound documentation into workflow ready documents

Document handling is a quiet but significant driver of cost to collect: scanning, sorting, indexing, validating, attaching, and chasing missing elements. Empower AI DocExtract automates how inbound documentation and correspondence are processed so they are immediately usable across revenue workflows.

### Key Capabilities

- Extracts, classifies, splits, and labels documents using AI enabled OCR
- Routes documents into DocStore for operational use
- Supports downstream workflows including prior authorization, claims, denials, appeals, and audits
- Automatically routes exceptions that require human review

### Value Delivered

- Reduces manual handling of inbound documentation
- Accelerates availability of documents for revenue teams
- Improves readiness for audits and documentation requests



## Appeals Modernization

# XiFin Empower AI Appeals Agent

Coordinating multiple agents to create policy-aligned, patient-specific appeals

### Scaling appeals without scaling labor or risk

Appeals are among the most labor intensive workflows in RCM due to constantly changing policies and documentation requirements. The Empower AI Appeals Agent coordinates multiple AI agents to interpret policy, identify supporting documentation, draft patient-specific narratives, and assemble compliant appeal packages—while maintaining governance and human oversight where required.

#### Key Capabilities

- Ingests appeal cases and normalizes patient, encounter, payor, and plan data
- Evaluates payor, plan, and policy intent to determine the optimal appeal strategy
- Retrieves and applies relevant policy and medical necessity criteria
- Drafts appeal letters with appropriate citations
- Assembles supporting evidence and flags cases requiring human review

#### Value Delivered

- Creates payor formatted appeals using policy data and patient records
- Automates the assembly of supporting documentation
- Reduces manual appeals workload by up to 90% in initial deployments



# Payor Response Interpretation

Translate ambiguous payor responses into actionable work—fast

Payor acknowledgments often include generic status codes paired with unstructured free text messages that require manual interpretation. Empower AI uses natural language intelligence to decode these responses, translate them into actionable reasons, and route tasks directly into the appropriate workflows.

## Key Capabilities

- Reads large volumes of free-text payor messages
- Categorizes messages into specific, actionable reasons
- Routes tasks directly into downstream workflows
- Eliminates manual interpretation and guesswork

## Value Delivered

- 73% improvement in payment velocity
- Fewer delays caused by vague or conflicting payor messages
- Reduced manual “human translation” of payor responses
- 45% of claims paid within 8 weeks vs 26% of claims paid when worked manually



# AI Powered Patient Responsibility Estimation

More accurate estimates when eligibility alone isn't enough

Patient financial transparency is essential, yet real time eligibility data often lacks the detail required for accurate estimates. XiFin's machine learning models close these gaps by combining eligibility signals with historical adjudication patterns to produce more reliable patient responsibility estimates.

## Key Capabilities

- Combines eligibility data with historical adjudication patterns
- Predicts allowed amounts for procedures
- Calculates copays, deductibles, and coinsurance
- Identifies likely coverage limitations
- Flags claims at risk of rejection due to inaccurate insurance information

## Value Delivered

- Reduces patient surprise billing
- Improves upfront collections
- Enhances confidence in patient estimates
- Accelerates reimbursement through improved front end accuracy



## Claim Error or Denial Prioritization

Prioritize exceptions by reimbursement likelihood and route work to the best-fit teams

Exception Processing is one of the most labor intensive areas of RCM when work is prioritized manually. EP Workgroups assess payment likelihood, prioritize claims by value and urgency, and intelligently route work to the team members most likely to resolve each issue successfully.

### Key Capabilities

- Assigns a payment probability score for each claim error
- Prioritizes by value, aging, and timely filing deadlines
- Routes work to team members with the strongest historical success for each claim type
- Learns continuously from outcomes to improve routing decisions
- Replaces spreadsheets, manual queues, and supervisor triage

### Value Delivered

- 46% increase in productivity (resolved exceptions)
- Up to 49% reduction in time to fix errors across customer cohorts
- Rapid gains within the first 30–60 days
- Measurable backlog reduction and sustained throughput improvement



## Front-end Accuracy and Patient Financial Transparency

# Empower AI Insurance Snap & Map

Capture accurate insurance data—without manual entry or patient contact

Empower AI Insurance Snap & Map is an API that automatically extracts, validates, and maps insurance information from patient submitted insurance card images or subscriber ID data. It improves insurance accuracy at intake—before errors cascade into eligibility delays, denials, rework, and delayed reimbursement.

### Key Capabilities

- Identifies payor names, even when cards include only logos or partial/incomplete text
- Reads member ID, group number, plan details, and other critical fields
- Maps extracted data to the correct payor contracts
- Validates accuracy using eligibility data and historical claim patterns
- Integrates into existing workflows to return structured, usable payor data in real time

### Value Delivered

- Eliminates manual data entry
- Reduces eligibility and payor mismatch delays
- Improves claim accuracy and reduces downstream rework
- Speeds reimbursement
- Improves patient experience by minimizing follow up for missing or incorrect insurance information



# Intelligent Expect Pricing and Forecasting

Forecast reimbursement with greater precision—  
especially when payor behavior varies

Accurately forecasting reimbursement is complicated by dynamic payor behavior, particularly for non-contracted payors. XiFin can accelerate loading of expect pricing and provide negotiated rate adherence by payors by comparing actual payments to expected amounts and modeling reimbursement patterns where contract clarity is limited.

## Key Capabilities

- Accelerates loading of expected and/or contracted rates
- Compares actual payments to expected allowed amounts
- Uses historical modeling to predict reimbursement for non contracted payors
- Provides real-time insight into underpayments, variance, and payor performance

## Value Delivered

- Sharpens forecasting and financial reporting
- Strengthens payor negotiations
- Helps organizations model profitability by test, encounter, or procedure

## For Finance, IT, and Clinical Leadership

### Innovation without the backlog

For Finance and Revenue Cycle leaders, the question is how to improve outcomes without increasing cost or complexity.

For IT and clinical leadership, the question is how to support that innovation without expanding backlog or risk.

HFMA reports **63% of healthcare organizations use AI or automation in the revenue cycle**, while integration and infrastructure limitations remain common barriers<sup>7</sup>

XiFin Empower AI addresses both—activating intelligence through infrastructure rather than custom projects, enabling progress without creating downstream technical debt.

**63%** of healthcare organizations use AI/automation in the revenue cycle

<sup>6</sup> HFMA poll, *Revenue Cycle Automation Trend*



## From Labor-Driven RCM to Intelligent RCM

Revenue cycle performance is no longer defined by how many people touch a claim—but by how intelligently systems interpret, coordinate, and act.

**XiFin's AI RCM ecosystem and trusted data activate intelligence and automation where needed to reduce manual touches, coordinate workflows, accelerate customer innovation, and improve financial outcomes.**

Learn more at [www.XiFin.com/empower-AI](http://www.XiFin.com/empower-AI), or call us at **1-866-935-6364** to speak with a XiFin RCM expert or to schedule a demo.

## About XiFin

XiFin is a healthcare information technology company that empowers organizations to navigate an increasingly complex and evolving healthcare landscape. The XiFin Empower AI RCM ecosystem and trusted data employ active intelligence and automation to reduce manual touches, coordinate workflows, accelerate customer innovation, and improve financial outcomes. Our comprehensive set of solutions—spanning revenue cycle management, clinical workflow enablement, laboratory information systems, and patient engagement—provides healthcare organizations with the tools they need to achieve financial strength, optimize operations, and implement industry-leading strategies. XiFin Empower solutions deliver THE POWER TO DO GOOD® so that healthcare organizations can do more good for more patients.

For more information, visit [www.XiFin.com](http://www.XiFin.com) or follow XiFin on [LinkedIn](#).



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