

Driving Operational Efficiency in Patient Access and Front-End Revenue Cycle Management

A strategic partnership focused on optimizing patient access, improving up-front collections, and streamlining front-end Revenue Cycle Operations.

Executive Summary

Enhancing Patient Access

A leading pediatric healthcare organization partnered with The Wilshire Group to optimize its patient access processes and front-end revenue cycle operations. Over the course of this engagement, The Wilshire Group designed and implemented outbound call structures, performance tracking frameworks, and automated estimate solutions.

These initiatives resulted in measurable improvements, including a significant increase in scheduled appointments, improved financial clearance efficiency, and a drastic increase in Time of Service (TOS) patient collections.

Results of the Engagement

2,000+ NEW appointments scheduled above the Call Center's monthly average

- Estimated Savings of 1.8 FTE's due to improved authorization workflows
- Created and delivered educational materials for registration and patient service staff members

Automated Estimates lead to a ~50% increase in patient collections

\$1.7 Million Collected in 2024

About the Client

The client is a nationally recognized pediatric healthcare system providing comprehensive care to children through a network of outpatient centers, specialty clinics, and a flagship hospital. With a mission centered on delivering high-quality, family-centered care, the organization is known for its commitment to clinical excellence, innovation, and community health.

The Challenge

The client's leadership identified growing inefficiencies in appointment scheduling, authorization workflows, and point-of-service collections, which were impacting both staff productivity and the overall patient experience. As patient volumes increased and expectations around access and transparency continued to rise, the organization recognized the need for outside expertise to assess, optimize, and support sustainable improvements.

The Objective

The key objective of the project was to improve patient access and front-end revenue cycle performance through workflow redesign, performance transparency, and automation. The Wilshire Group was engaged to lead the initiative, bringing strategic guidance and hands-on expertise to drive measurable and sustainable improvements.



The Approach

The Wilshire Group partnered closely with the client to assess challenges, align on goals, and co-develop practical solutions tailored to patient access and front-end revenue cycle needs. Together, they implemented outbound call workflows, real-time KPI tracking, and estimate automation pilots. The approach emphasized collaboration, transparency, and phased implementation to ensure strong adoption and sustainable results.

The Research

To inform its strategy, The Wilshire Group conducted thorough research into the client's existing workflows, staffing models, performance data, and patient access metrics. This included a deep dive into referral volumes, authorization timelines, time-of-service collection trends, and estimate generation processes. Wilshire also held cross-functional interviews with operational leaders and front-line staff to understand pain points and identify opportunities for impact. The combination of quantitative data analysis and qualitative insight ensured that all recommendations were grounded in real-world operational context and aligned with the organization's goals.

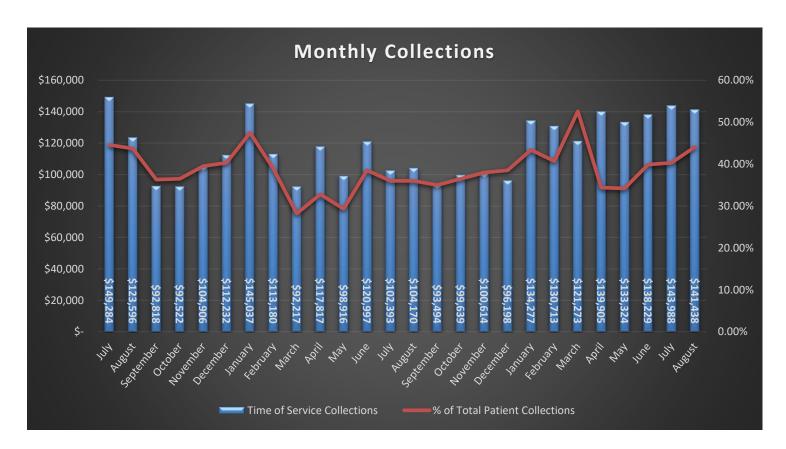
The Solution

The Wilshire Group delivered a comprehensive solution aimed at strengthening critical aspects of the client's patient access operation. This included launching a structured outbound patient calling program, establishing transparent and actionable KPIs, optimizing financial clearance processes with improved data visibility, and implementing estimate automation across strategically selected locations.

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Wilshire-Driven Outcomes

The partnership delivered measurable results across key performance areas. The implementation of Finalized Estimate Automation led to a dramatic increase in the estimate volume – rising from just 49 in November to 895 by the following August. This contributed to a ~50% increase in Time-of-Service (TOS) collections at the pilot sites, with overall ambulatory collections growing from ~\$92,000 in March 2023 to over \$141,000 by August 2024. Additionally, the percentage of total patient payments collected by front-end teams improved from 36% at the start of the project to 44% by fiscal year-end. Beyond financial gains, the project also delivered significant improvements in financial clearance workflows, increased transparency through real-time Tableau dashboards, enhanced KPI tracking, and a streamlined outbound call structure that drove over 2,000 additional scheduled appointments per month to the organization. These outcomes reflect the value of The Wilshire Group's collaborative, data-driven strategy and its ability to deliver sustainable, organization-wide impact.



Why Wilshire Works

Expertise. Partnership. Results.

The success of this project highlights why The Wilshire Group is a trusted partner for organizations seeking to elevate their patient access and front-end revenue cycle performance. With deep industry expertise, a collaborative mindset, and a commitment to measurable outcomes, Wilshire delivers tailored strategies that drive operational efficiency, financial improvement, and a better patient experience. Our ability to quickly assess complex challenges, engage cross-functional teams, and implement sustainable solutions makes us uniquely positioned to support healthcare organizations navigating change. Whether optimizing call center workflows, streamlining financial clearance, or advancing estimate automation processes, The Wilshire Group brings the insight, structure, and hands-on support needed to turn strategic goals into lasting results.

Thank You, Let's Chat!

Your solution needs a personal touch.

Good thing we're personal people.

Reach out and talk to a real person.

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