



8-12% higher reimbursement rates on average

New Client On-boarding Process

- Dedicated implementation team to ensure nothing falls through the cracks
- Structured meetings/checklists/milestones for seamless transitions
- Client revenue projections for accurate and actionable financial planning
- Fast provider enrollment for uninterrupted reimbursements
- Little or no disruption to normal cash flow during transition process.
- Tenured auditors and coders to hand-hold the coding transition
- 24 hour client services touch point to handle all needs
- E&M coding feedback consultations to identify trends and maximize reimbursements

- Unique process of reconciling patient demographics with all records received as well as hospital ED log to ensure optimal reimbursement opportunity for 100% of billable visits
- Pended chart process to ensure all services are documented for billing purposes
- Patient demographics matched with physician documentation to maximize clean claims
- Seamless IT interface into hospital systems

- Proprietary MDM methodology minimizes subjectivity resulting in higher reimbursement rates on average than others
- Scalability of resources at multiple locations to handle all client needs
- Auditing safeguards (internal and external) with highest compliance standards
- Focused audit requests to quickly identify trends and increase cash flow

- Unique protocols and processes for patient pay balances that produce collection recoveries 4x the industry standard
- 3 times the number of billing and A/R resources as others
- Persistence of collection efforts results in 98% of accounts resolved within first six months and 100% within first year
- Financial reconciliation and payment posting to empower clients with real-time financial details
- Hold on to accounts longer and work them harder than others

Patient Pay Process

