



Feature	Pain without this feature	Gain with this feature	Costs Savings & Supporting Information
RTE (eligibility)- Verify patient insurance benefits with a single mouse click	High percentage of claims denied and rejected = lost revenue, expensive manual process of calling the insurer, lack of insight into co-pay/deductible during check-in results in fewer point-of-care collections	Submit cleaner claims which reduces rejections/denials, reduces administration costs of rebilling rejections, or appealing denials. Increase front-end collections with insight into co-pay/deductible, accelerate time-to-payment	<ul style="list-style-type: none"> • Save \$2.95 per patient (pg 7) • Insurance Eligibility Video
ERA (Electronic Remittance Advice) - post insurance payment with a single mouse click + automatically transfer funds electronically into bank account	High labor costs, data entry errors, slow time to payment, must drive to bank to deposit check, having paper check in office increases risk of theft, slower reimbursement cycle	Reduce approximately 30-35% of manual data entry requirements, accelerate payment cycle as EFT includes prompt payment laws. Auto- deposit eliminates need to drive to bank for manual deposit, reduced risk of employee theft	<ul style="list-style-type: none"> • Save \$9,424 per year • Electronic Remittance Video
Primary + Secondary E-Claims	Slow reimbursement, high materials + labor costs, no claims scrubbing increases denials/rejections	Faster re-imbusement, dramatic cost/labor reduction, claims scrubbing reduces denials/rejections	<ul style="list-style-type: none"> • Save \$3.73 per claim (pg 7) • Claim Submission Video
Automatic Claim alerts	Biller relies on manual reminders, sticky notes, and lengthy A/R Aging reports, easy to lose sight of overdue claims, increases timely filing denials and loss of revenue	Automatic alerts with hyperlinks to all claim rejections, denials, and overdue claims	<ul style="list-style-type: none"> • Thousands per year • Collections Management Video
Integrated EMR/PM	Biller/billing service manually re-enters patients/claims into billing system without integrated PM/EM which can costs thousands of dollars per year	Automatic feed of patient demographics, automatic claims eliminates manual data entry, faster collections	<ul style="list-style-type: none"> • Thousands per year • Collections Management Video
Powerful Dashboards	Lack of insight into practice	Transparency about practice economics	<ul style="list-style-type: none"> • Peace of Mind • Reporting Video
Automated Payment Audits	AMA states that in 2010, Anthem, the nation's largest payer, only paid accurately 77% of the time. This means there's a good possibility that they're under paying their contracted rates...without an automatic underpayment tracking capacity, they will never know to appeal these payments	Automatically track insurance underpayments with alerts on the payment, and detailed contract management reporting that displays payment trends broken down by CPT, and filtered by payer with stats such as expected & actual payments, and expected & actual allowed amounts	<p>One practice in Chicago implemented an auditing & appeals process, and within 5 months, they were recovering as much as \$100,000 per month</p> <ul style="list-style-type: none"> • AMA - Appeal that Claim.pdf (pg. 9) • Contract Management Video