

EMDEON REVENUE CYCLE MANAGEMENT SOLUTIONS



Simplifying the Business of Healthcare

Simplifying the Business of Healthcare

One partner for integrated, end-to-end Revenue Cycle Management Solutions

Managing the revenue cycle is more challenging than ever. Minimizing costs. Improving operational efficiencies. Providing transparency of cost of care. Managing the increased self-pay and underinsured patient population. Handling the complexity of claim payment reconciliation. Eliminating denied claims. Overcoming the burden of mounting bad debt.

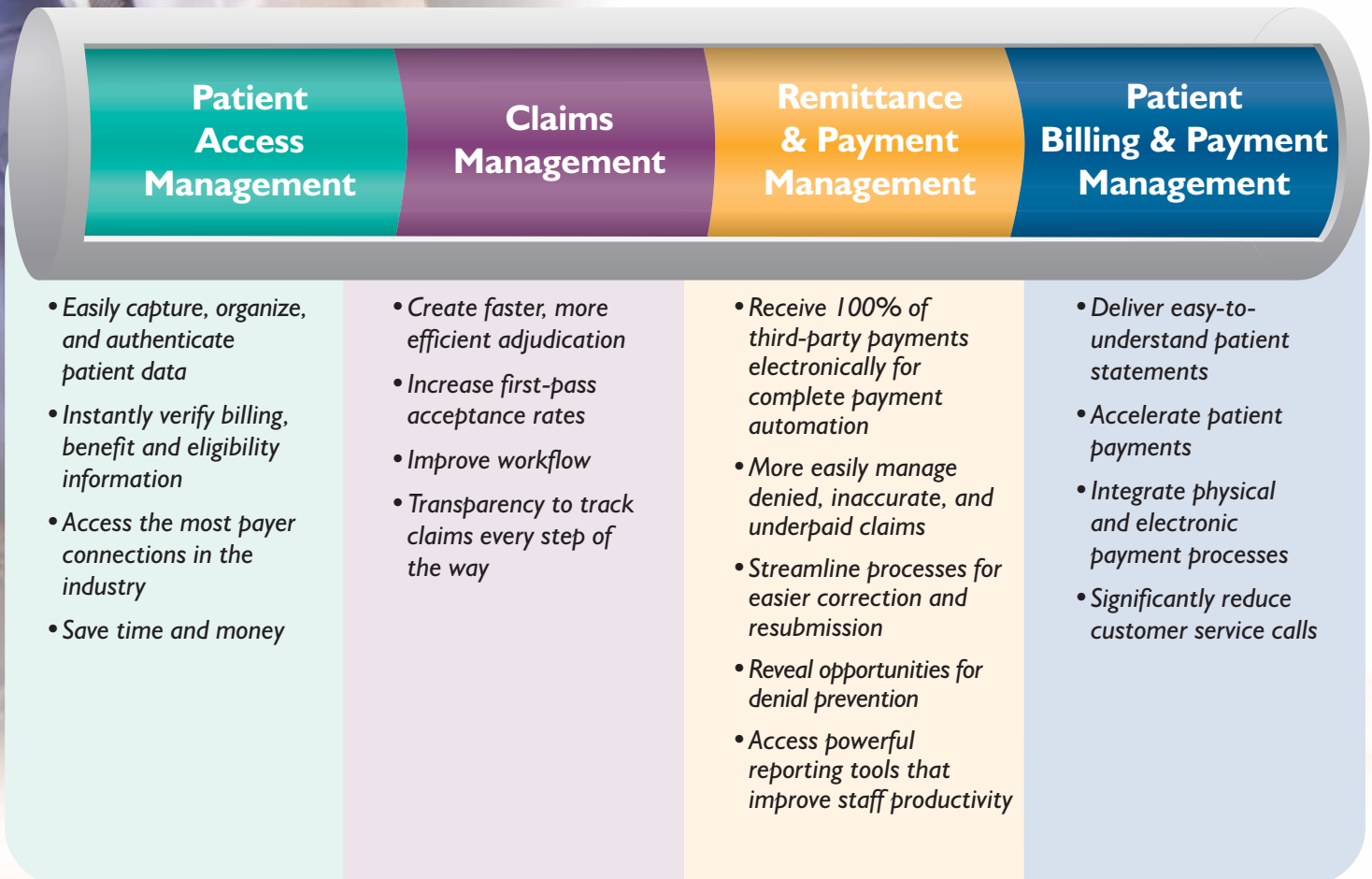
Emdeon's end-to-end Revenue Cycle Management Solutions are the answer. Emdeon is committed to simplifying the business of healthcare and is your single partner for solving revenue cycle challenges to help you run the most cost effective, efficient healthcare business possible.

340,000 Providers
 5,000 Hospitals
 600 Channel Partners
 1,200 Payers
 150,000,000 Patients

Emdeon Revenue Cycle Management Solutions

Emdeon is transforming the industry with a 360 degree approach to revenue cycle management enabling providers to get paid more, faster. Emdeon does this by automating the four components of the revenue cycle: Patient Access, Insurance and Third-Party Claims, Insurance and Third-Party Remittance & Payment and Patient Billing & Payment. Our end-to-end offerings are designed to work together to meet your needs and simplify almost every aspect of the business of healthcare. With our tremendous connectivity and the power of the Emdeon network, patient information is more easily shared and costly errors are reduced.

Time is one of the most important resources a provider can give a patient, and at Emdeon, we understand that. Our solutions give you a single relationship that makes your entire healthcare business more efficient and easy to manage. From the initial patient encounter through reimbursement and final payment, Emdeon is *Simplifying the Business of Healthcare*.



Patient Access Management

Emdeon's robust suite of solutions simplifies and organizes the critical information you need from your patients

Powerful Patient Access Management Solutions from Emdeon help health systems, hospitals and healthcare professionals efficiently verify eligibility and benefits information. Both stand-alone or integrated solutions are available for processing inquiries in real-time or in batch formats. In addition to automating eligibility, benefits and demographic information, Emdeon empowers providers with patient financial responsibility estimation, medical necessity evaluation and collection tools to improve upfront payment collections.

Connectivity

With connectivity to 1,200 payers, inquiries tap the largest Healthcare Revenue and Payment Cycle Network in the industry, and collected patient information can easily be coordinated across multiple facilities, saving providers time and money.

"I would 100% of the time recommend Emdeon for any of the solutions I currently have and many of the solutions I know I'll be getting in the future. I would challenge any of my peers to put their vendor options up against Emdeon. I can just promise you there aren't many companies out there that can provide the whole package."

– Carol Plato Nicosia,
Administrative Director of
Corporate Business Services
Martin Memorial Health System



CAPABILITY	DESCRIPTION	COMMUNICATIONS					SERVICES			
		Dial-up	Internet	Network / VPN	Secure File Transfer Protocol (SFTP)	Secure Shell (SSH)	Real-Time	Batch Inquiry	Integrated	Stand Alone
Eligibility & Benefits Verification	Simplifies patient registration by interfacing with existing HIS to automate patient eligibility, benefits and information verification tasks before the start of business or during scheduling, pre-registration and registration.	■	■	■	■	■	■	■	■	■
Patient Responsibility Estimation	Helps give patients a clear picture of their financial responsibility to increase revenue, reduce write-offs and increase patient satisfaction.	■	■	■	■	■	■	■	■	■
Medical Necessity Evaluation	Simplifies the process of evaluating medical necessity for certain procedures with Government and Commercial Payers to proactively and efficiently reduce write-offs caused by procedures deemed medically unnecessary by third-party payers.	■	■	■	■	■	■	■	■	■
Upfront Collections	Provides convenient, real-time processing of physical and electronic patient payments in Patient Access.	■	■	■	■	■	■	■	■	■



Patient Access Management

Instantly verify personal and financial information for maximum reimbursement

With the rise in self-pay and underinsured patient population, Emdeon Patient Access Management Solutions can confirm a patient's ability to compensate you for services rendered. Our solutions allow you to immediately validate a patient's current address, potential eligibility for Medicaid or other payer programs and potential qualification of any available charity care programs.

Evaluation

Instant access to this information can greatly aid the process of assessing your patient's ability to pay for any services you perform. By having access to this information, your facility can "triage" patients' financial needs and stave off fees resulting from uncollected debts before they are incurred.

CAPABILITY	DESCRIPTION	COMMUNICATIONS					SERVICES			
		Dial-up	Internet	Network / VPN	Secure File Transfer Protocol (SFTP)	Secure Shell (SSH)	Real-Time	Batch Inquiry	Integrated	Stand Alone
Address Validation	Verifies patient address information during the registration or admission process. This helps ensure accurate patient information, prompt payment and minimizes return mail on the front-end.		■	■			■	■	■	
Propensity to Pay	Empowers staff with the knowledge of a patient's ability or inability to pay prior to rendering service. Allows provider staff the opportunity to develop a payment plan that each party can agree to, as well as ensure proper patient classification.		■	■			■	■	■	
Medicaid & Charity Care Pre-Qualification	Delivers efficient identification of possible eligibility of Medicaid, charity care, COBRA and many other public programs to non-discriminately determine any available discounts prior to rendering service to save staff time, ease patients' financial burden and reduce write-offs by capturing otherwise lost reimbursement opportunities.	■	■	■	■	■	■	■	■	
Comprehensive Pre-Qualification & Enrollment	Automates, manages and accelerates the entire financial assistance program process including application submission, tracking and required reporting.	■	■	■	■	■	■			■

Claims Management

Faster, more cost-effective claims management that leads to higher first-pass acceptance rates

Managing billing to insurance and third-party payers is a critical function within the healthcare revenue cycle. Emdeon offers the broadest claim processing and management solutions with connectivity to the largest Healthcare Revenue & Payment Cycle network in the industry.

Flexibility

Tracking claims through every stage, from submission to reimbursement, is made easier with powerful, flexible and easy-to-use solutions. Claims can be monitored across multiple facilities with helpful tools providing 360 degree visibility of the claim lifecycle to enhance tracking and ensure accuracy every step of the way.

Claim processing is enhanced with up-to-date payer edits, often making the first submission the only one required. The addition of electronic attachments, automated secondary claim processing, 72-hour rule check capability and Medicaid Follow-up services rounds out our complete suite of claims management solutions.



CAPABILITY	DESCRIPTION	COMMUNICATIONS					SERVICES							
		Dial-up	Internet	Network / VPN	Secure File Transfer Protocol (SFTP)	Secure Shell (SSH)	Institutional Claims & Encounters	Professional Claims & Encounters	Remittance/Posting	Multi-Institutional Support	Edits	Claim Printing	Claim Archive	Reporting
Primary Claims Submission	Enables health systems, hospitals and healthcare professionals to manage their entire billing process across all facilities. Includes interactive, graphical reports to view the full lifecycle of a claim and valuable trending capabilities.		■		■	■	■	■	■	■	■	■	■	■
Electronic Attachments	Allows electronic attachments for Workers Compensation and Auto Medical Claims for participating payers.		■		■	■	■	■	■	■	■	■	■	■
Automated Secondary Claim Processing	Automatically generates secondary claims with Remittance Advice (RA) to be submitted electronically. For payers that cannot accept secondary claims electronically, the secondary claim and primary payer RA can be printed and collated.		■		■	■	■	■	■	■	■	■	■	■
Medicare Secondary Billing	Automates the Medicare Part A secondary claim process. Payment information is extracted from the Electronic Remittance Advice (ERA) and matched against locally stored UB04/CMS 1500 Medicare claims data enabling secondary claims to be billed the same day the ERA is received.	■					■	■	■		■	■	■	■
Medicare Secondary Billing Accelerated	Processes secondary claims 12 days before payment is received on primary claims. Stored UB04/CMS 1500 primary claims are compared with corresponding claims from the Medicare online system. Data is automatically updated and the secondary claim is produced.	■					■	■	■		■	■	■	■
72-Hour Rule Check	Provides a means of checking Medicare claims for 72-hour billing conflicts before submission of the claim or after adjudication.	■							■					■
Medicaid Follow-Up Services	Outsourcing and follow-up services for providers processing Medi-Cal claims. Solution to populate and submit Illinois Medicaid proprietary forms.		■				■	■	■	■	■	■	■	■

“Any executive or administrator that is looking for a revenue cycle management tool should seriously consider Emdeon. Their solutions are the best we’ve seen with tools allowing an executive to know exactly where cash flow management is and claims processes are because of reports that can be generated within a matter of minutes. To have those tools and that information available at your fingertips on a day-to-day basis is extremely valuable.”

– Adil Khan,
Chief Administrative Office
Clark & Daughtrey Medical Group

Remittance & Payment Management

The solutions you need to automate third-party payment and Remittance Advice processing and posting

Emdeon Remittance & Payment Management Solutions provides third-party payment and reconciliation tools that enable providers to receive all third-party payments electronically, manage Remittance Advice, both print and electronic, and automate the arduous task of posting payments from Government and Commercial payers.

Payment Automation

Eliminate paper and significantly simplify your billing and payment process by receiving 100% of third-party payments electronically with Emdeon Remittance & Payment Management Solutions. Emdeon's unique and innovative technology provides automated processing of all paper and electronic Remittance Advice, including payer direct 835s and Emdeon generated 835s, as well as comprehensive paper to 835 conversion and corresponding 835 normalization. In addition, providers can elect to use Emdeon for a third-party lockbox to eliminate mail handling, electronically deposit funds into any bank account and provide check and Explanation of Benefits imaging and management- all from one partner. Standard reports provide a centralized location to obtain details on all payments including the amounts and payer specific information so your reconciliation process is simplified.

Emdeon Remittance & Payment Management Solutions also equips providers with a set of self-service tools to easily manage enrollment, delivery preferences and access to all remittance and payment information. Based on provider defined enrollment preferences, our solutions gather remittance data from payers and present it in an electronic format that is easy to read and understand eliminating paper Explanation of Benefits. Providers can then search, view and print the remittance information as needed.

CAPABILITY	DESCRIPTION	COMMUNICATIONS					SERVICES					
		Dial-up	Internet	Network / VPN	Secure File Transfer Protocol (SFTP)	Secure Shell (SSH)	Institutional Claims & Encounters	Professional Claims & Encounters	Remittance/Posting	Multi-Institutional Support	File Delivery	Reporting
Payment Automation	Receive 100% of third-party payments electronically with payer direct 835s, Emdeon generated 835s, paper to 835 conversion, 835 normalization and third-party lockbox capabilities.		■		■	■	■	■	■	■	■	■
Remittance Management	Automatically interprets ERAs received from government and commercial insurance carriers, thereby eliminating paper Explanation of Benefits (EOBs), quickly providing expected payments, enabling secondary billing as well as expediting re-bills for denials.		■		■	■	■	■	■	■	■	■
Automatic Posting to HIS/Patient Account	Automates the manual process of payment, contractual and note posting, saving countless hours of staff time while improving accuracy. Customized to client's business rules.	■	■	■			■	■	■	■	■	■

Remittance & Payment Management

Streamline the denial management process by proactively managing denied, inaccurate and underpaid claims

Emdeon Remittance & Payment Management Solutions also makes managing denied claims simpler. Our suite of solutions automates the acceptance of Remittance Advice and helps organize denials for easier correction, resubmission and prevention. These tools centralize remittance into intuitive and powerful work queues that reveal the trends which lead to repetitive claim denials. To improve workflow, these work queues can be easily grouped for resolution by type or class across multiple payers.

Understanding

By building understanding, providers can begin to take the preventative steps needed to reduce future denials. Providers are able to streamline the denial management process by determining root causes, patterns and process breakdowns responsible for denials and establish corrective steps to prevent future revenue loss or delay.

Easy Management of Medicare Part A Claims

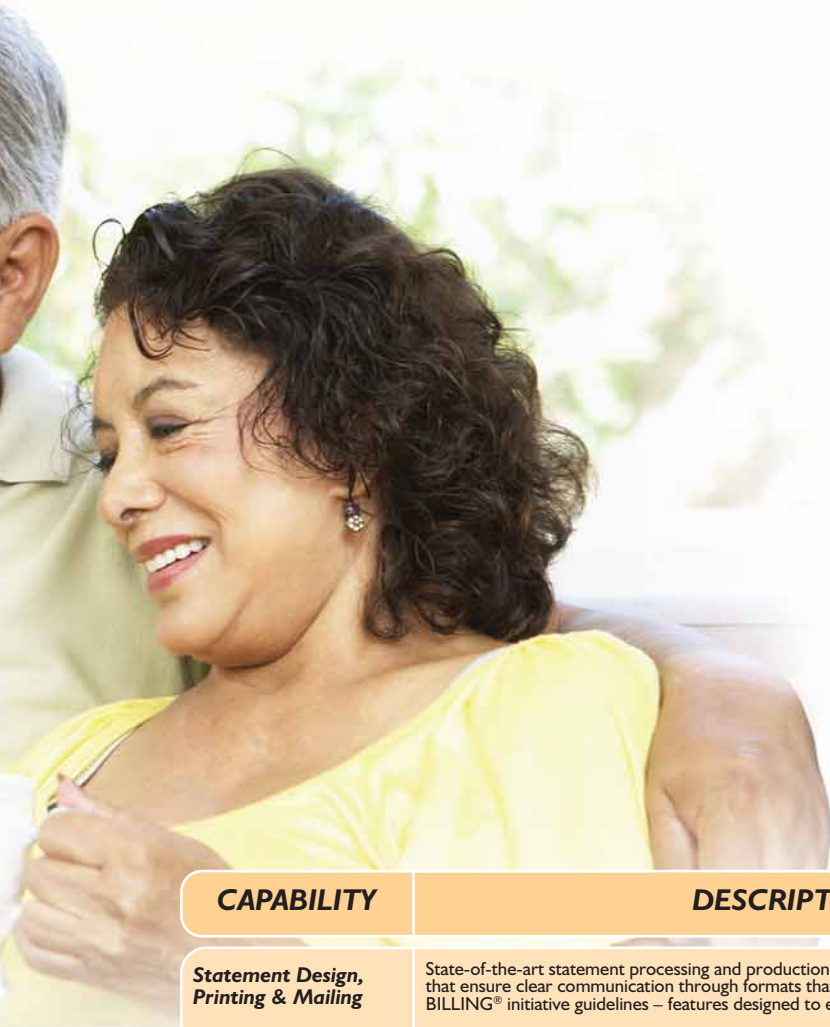
Denied claims are even easier to manage. You can view, prioritize and sort Suspended, Rejected, Returned-to-Provider, Paid and Denied claims by numerous methods including highest dollar amount to identify those that generate the greatest value. These claims can be easily corrected at the point of error through a direct connection to the Medicare Direct Data Entry (DDE) system.

“We really enjoy our partnership with Emdeon. I would tell anyone that if they would like a partnership for best-in-class solutions that are user-friendly and supported with great customer service they should choose Emdeon.”

– Kelli Dore’
Revenue Cycle
Manager Acquisitions
LHC Group

CAPABILITY	DESCRIPTION	COMMUNICATIONS					SERVICES			
		Dial-up	Internet	Network / VPN	Secure File Transfer Protocol (SFTP)	Secure Shell (SSH)	Institutional	Professional	Multi-Institutional Support	Reporting
Third-Party Payer Denial Management	Organize and manage remittance inventory; arrange, prioritize and monitor denials and underpayments; report and view net denied amounts. Streamlines the denial management process enabling providers to quickly determine causes and patterns of denials which allows for immediate action to prevent future revenue loss or delay.		■	■	■	■	■	■	■	■
Medicare Denial Management	Overall management (viewing, prioritizing and sorting) of Suspended, Rejected, Returned-to Provider, Paid and Denied Medicare Part A claims.		■		■	■		■	■	
Medicare Claim Correction	Allows for easy correction of claims within the Medicare DDE system via the Internet.	■	■	■			■	■	■	■





Patient Billing & Payment Management

Comprehensive print, online and point-of-service solutions to accelerate patient payment

Emdeon Patient Billing & Payment Management Solutions offers expert tools for collecting and accelerating patient receivables. Through Emdeon, providers can integrate paper and electronic billing and payment processes in a way that's efficient for staff and easy-to-understand for patients. Billing and payment processes that improve providers' workflow help increase efficiency and profitability while increasing patient satisfaction.

Efficiency

With Emdeon Patient Billing & Payment Management Solutions, providers get a comprehensive billing and payment solution that automates the patient payment process. We can meet providers' print, online and point-of-service needs while making it easy to confirm addresses and billing information. The more correct your patient information is – the more you will be able to see the results in your staff efficiency and your bottom line.

CAPABILITY	DESCRIPTION	COMMUNICATIONS				SERVICES					
		Internet	Network / VPN	Secure File Transfer Protocol (SFTP)	Secure Shell (SSH)	Institutional	Professional	Multi-Institutional Support	Printing	Posting	Reporting
Statement Design, Printing & Mailing	State-of-the-art statement processing and production. Services include customized statements that ensure clear communication through formats that encompass HFMA's PATIENT FRIENDLY BILLING® initiative guidelines – features designed to encourage faster payments from patients.	■	■	■	■	■	■	■	■	■	■
Return Mail Handling & Elimination	Save time and speed collections by automating the skip tracing and re mailing process for undeliverable mail eliminating 100% of return mail handling. Instead of receiving returned mail at your facility, each piece is returned directly to Emdeon's processing center for comprehensive management.	■	■	■	■	■	■	■	■	■	■
Patient Lockbox Services	Automates processing, depositing and managing patient payments received in the mail to get you paid faster, cut costs and virtually eliminate payment posting errors. Staff no longer wastes time sorting mail, opening and posting patient payments, creating deposit tickets or making trips to the bank, freeing them to focus on other business matters.	■	■	■	■	■	■	■	■	■	■
Digital Storage & Retrieval Index	24/7 desktop file retrieval and viewing capabilities allow you to easily view statements and documents online that mirror those sent to your patients. Instantly retrieve patient statements from your online browser to accelerate patient response time, reduce file maintenance and streamline record storage.	■	■	■	■	■	■	■	■	■	■
Online Patient Billing & Payment	Self-service patient application that provides comprehensive and secure online billing and payment tools that yield faster collection of patient-owed amounts, improved cash flow and reduced billing costs, all with less effort and paperwork. Patient billing will always be current, accurate, and accessible, 24 hours a day, 7 days a week.	■	■	■	■	■	■	■	■	■	■
Automated Voice Collections	Automated, interactive phone service that allows patients to make payments towards their outstanding balance from virtually anywhere, anytime over the phone. Helps improve patient satisfaction by providing more payment flexibility. Patients can use their credit card, debit card or checking account information to make a payment.	■	■	■	■	■	■	■	■	■	■
Point-of-Service Collections	Simplify the payment process while improving operational efficiencies by providing an enterprise-wide approach to collecting patient payments. Authorized users now have the ability to accept co-payments, deductibles and pre-payments while simultaneously accepting payments for outstanding patient balances improving point-of-service collection workflow.	■	■	■	■	■	■	■	■	■	■
Credit Card Processing*	Secure and reliable debit and credit card processing that can actually reduce the cost of accepting patient payments. Superior service with systems that have virtually 100% uptime and direct access to the leading credit card networks. Transactions are routed more efficiently to help providers keep more of what is collected.	■	■	■	■	■	■	■	■	■	■
Statement Inserts	Enhance patient communication and public relations with a statement insert or special mailing.	■	■	■	■	■	■	■	■	■	■

* Capabilities listed are applicable when selecting Chase Paymentech's credit card processing systems and network.

DISCOVER THE DIFFERENCE OF GETTING MORE FROM ONE PARTNER

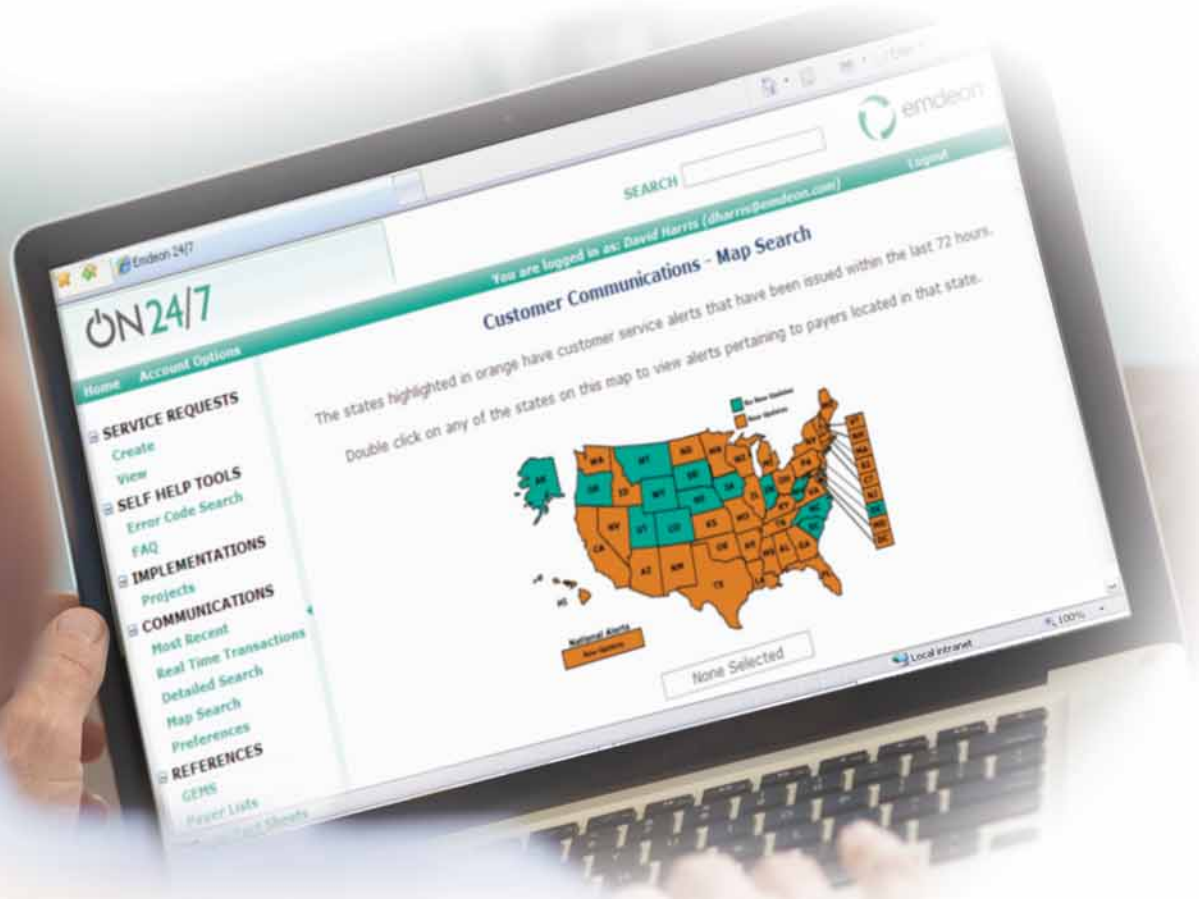
With Emdeon you get more than just solutions, you get a partner. Our solutions are designed to work together to improve your entire revenue cycle. We're constantly striving to stay a market leader in business efficiency and Healthcare Information Exchange for the long-term. That means we deliver the best solutions to the market today, and they're solutions designed to evolve and improve as the industry changes.

Once you start an Emdeon partnership, our highly trained staff is ready to work with you to ensure a smooth installation and training process. Should issues occur down the road, you can rest assured that Emdeon will be ready to help: Emdeon ON24/7, our online customer service and support tool, allows you to communicate and monitor issues via the Internet any time, day or night so you stay informed on what's being done to help.

Emdeon solutions automate key tasks and simplify what you do every day so that you can focus on what's really important: your patients.

"Emdeon has tremendous follow-through. They provide great customer service during the sales process, in implementation and ongoing. They really partner with their clients to offer support and understand our business and our business needs."

– Al Payne,
Revenue Cycle Manager
Martha Jefferson Hospital





Discover The Power Of An Emdeon Partnership

Automation. Productivity. Simplicity.
Connectivity. Convenience.

Emdeon provides end-to-end Revenue and Payment Cycle Solutions that enable providers to get paid more, faster through one partner. Our unique approach helps you manage the business of healthcare in every way, so you save considerable time and money while you focus on, as it should be, providing the best healthcare possible.

Emdeon is a leading provider of revenue and payment cycle solutions that connect payers, providers and patients to improve healthcare business processes.

To learn more about our company, our services and our commitment to improving healthcare, visit our website at www.emdeon.com/hospitals.



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