



AppRev

Denials Intelligence

Work the denials that matter.

AppRev's Denials Intelligence solution gives hospitals and physicians an intelligent workflow and a clear view of the Big Picture.

Key Features

- ✓ All Payer Dashboard
- ✓ Payer Scorecard
- ✓ Detailed Work Environment
- ✓ Rules-driven methodology to work the most important issues first

Methodology

AppRev has developed the industry leading method of analyzing and understanding payer remits. Using both the claims actually submitted to payers and the corresponding remittances, AppRev creates a complete picture of provider performance and opportunities.

Once data is received, AppRev posts the results on the provider's AppRev web portal.

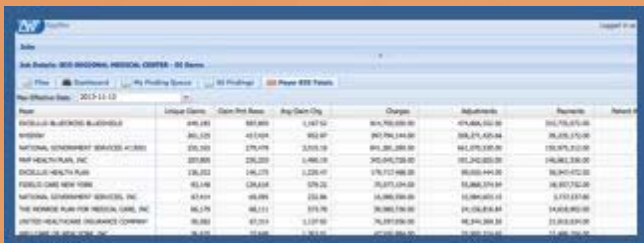
AppRev has developed technology to help you organize and intelligently work denials issues.

- Do you know when responses to denials are time sensitive?
- Can you identify undercharging?
- How do you manage bundling and splitting?

Client Portal

AppRev's Denials Intelligence solution combines software with expertise to deliver the most effective denials management solution available.

Dashboard Key Metrics and Payer Statistics



Payer	Unique Claims	Claim Pct Ratio	Prp/Claim Ctg	Charges	Adjustments	Remits	Revol P
AMERISOL-BLUESHIELD	446,183	881,853	1,957.52	954,765,000.00	474,864,532.00	379,767,675.00	
ANTHEM	260,125	491,024	888.07	892,794,244.00	398,171,437.04	36,228,275.00	
NATIONAL GUARANTEE BENEFITS ASSOC	255,153	270,049	2,039.18	461,267,289.00	442,970,000.00	122,074,510.00	
MAP HEALTHPLAN, INC	233,898	236,233	1,466.18	320,045,728.00	182,242,820.00	148,361,130.00	
EXCELIA-HEALTH PLAN	136,032	146,173	1,228.47	178,712,968.00	93,889,444.00	76,947,410.00	
PERULIA-COME NEW YORK	85,146	124,634	579.26	75,071,024.00	15,868,374.00	16,891,730.00	
NATIONAL GUARANTEE BENEFITS ASSOC, INC	47,414	69,269	232.36	34,095,700.00	10,969,410.44	1,710,837.00	
THE HEMLOCK PLAN FOR MEDICAL CARE, INC	36,278	48,111	328.26	26,965,170.00	19,258,818.84	14,658,400.00	
UNITED HEALTHCARE (INSURANCE COMPANY)	36,260	47,124	1,297.00	76,291,000.00	48,244,260.20	23,818,834.00	
UNITEDHEALTHCARE, INC	36,258	47,122	1,297.00	76,291,000.00	48,244,260.20	23,818,834.00	

Understand how each payer is performing:


- % of Patient Responsibility
- Adjustment %
- Claims/Remits ratio
- Timeliness



Intelligent work lists allow for optimization of workflow and management of overall results.

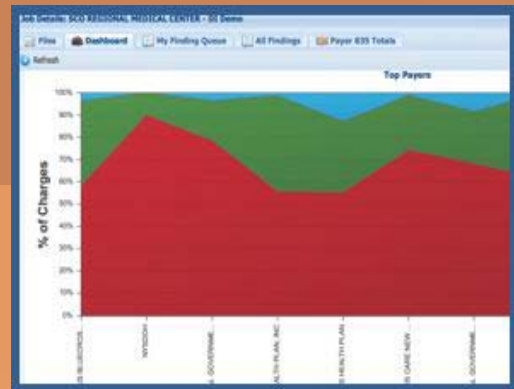
AppRev Difference

- ✓ Customizable rules to meet providers' unique needs
- ✓ Expert help to understand findings and implement solutions
- ✓ Ongoing measurement and communication
- ✓ Easy start: only standard data required
- ✓ No software to install
- ✓ Simple user environment



Notes	Priority	Finding Type	Group Claim Num	Finding Status	Finding Status
	Low	LessOf	H0300522004		
	High	LessOf	H0001988200		
	Normal	LessOf	H03037559605		
	Normal	Zero	H0112492709		
	Normal	Zero	H01150993501		

Creates the ability to produce, assign and report on key denial variables



Graphs and Charts: Easy to read, easy to use

Rules-Driven Workflow

Rules are created by Payer and Denial Reason to provide a workflow to address the issues. To avoid filing deadlines, Alerts are created to indicate where immediate response is needed.



Client Name	Market Code	Year Of Data	Charges	Reason	Market Code	Flag Indicator	Year	Year Of Data
ABC COMPANY	1	2012-01-01	1,234,567	1001	1001	1001	2012	2012-01-01
ABC COMPANY	2	2012-01-01	1,234,567	1002	1002	1002	2012	2012-01-01
ABC COMPANY	3	2012-01-01	1,234,567	1003	1003	1003	2012	2012-01-01
ABC COMPANY	4	2012-01-01	1,234,567	1004	1004	1004	2012	2012-01-01
ABC COMPANY	5	2012-01-01	1,234,567	1005	1005	1005	2012	2012-01-01

Details at your fingertips with pop-up descriptions

