

Countless Challenges. One Solution. Emdeon One™

Emdeon One is the only solution you need to manage your entire revenue cycle, from patient check-in to payment posting.

As healthcare organizations strive to operate more efficiently and improve cash flow, it's often difficult to identify where to start. Automating the revenue cycle process presents a clear opportunity to make changes that will quickly impact your bottom line. Emdeon One, our easy-to-use web portal, makes it easy.

- Check eligibility in real time
- Submit and track claims
- Manage your rejections and denials
- Take patient payments in the office, online or over the phone
- Receive easy-to-understand business performance reports

And it's all available in one place with one solution: Emdeon One.



ELIGIBILITY

Real-time, nationwide connectivity to thousands of government and private payers allows your staff to verify eligibility prior to service, without time-consuming phone calls or multiple visits to payer websites. Some office managers prefer to verify eligibility all at once. With Emdeon, you can run eligibility in large batches, simplifying the process of checking the next day's patient roster. Just set it to run before you leave the office and it's ready when you return the next day.

CLAIMS AND TRACKING

Our real-time transaction platform uses a sophisticated claims scrubbing engine to validate nearly every aspect of a claim before it gets to the payer. As a result, payers receive the cleanest, most accurate claims possible, resulting in faster payment times for you. And because we process claims and remittances throughout the day, you'll have the most up-to-date information at all times. For any claims that are flagged during the validation process, Emdeon One provides intuitive, easy-to-use tools to update and resubmit the claim within minutes. Once a claim is submitted you can run customizable status queries based on the most meaningful criteria, providing valuable reports on the information you find most helpful to proactively manage your business.

REJECTIONS AND DENIALS

Eliminating the delay in cash flow associated with denied claims, Emdeon One enables you to work by exception, quickly see if a claim is rejected, determine the reason for the rejection, validate edits and resubmit. Robust workflow tools allow you to assign claim reworks to specific staff members for improved efficiency, create pre-populated timely filing and appeal letters and correct claims online in real time.

With our Advanced Denials Management service, you'll enjoy additional features such as the ability to export claim details for in-depth analysis, add notes to any claim, and access advanced reporting to help you identify and correct recurring issues.

THE SIMPLICITY OF "MY TASKS"

You'll appreciate how easy it is to set up your own personal workflow shortcuts for the common tasks you do every day ultimately saving you time and improving efficiencies:

Save custom queries and reports.

Easily update, rename and delete tasks as needed.

Simple 1-click access to reports and queries you use most often.

All Emdeon One users have their own MyTasks inbox and can set up their own customized tasks.

Automated tasks are available in several workflows, including enrollment, real-time revenue cycle management, reporting and analytics.



PAYMENTS AND BILLING

With patients now responsible for a larger percentage of their own healthcare costs, and much of this before insurance even pays, it's more important than ever to collect co-pays and deductibles up front, before they leave the office.

From pre-service collections to final patient billing, you'll be able to:

- Collect patient payments quickly through Emdeon One at check-in and check-out with credit card swipe technology
- Create paper or electronic statements to be sent to patients after insurance has paid
- Utilize a patient payment portal, branded to your office, where patients can easily view their statements and pay their balances online
- Accept and post checks received in the mail using ACH check conversion, eliminating a trip to the bank
- Offer the option of extended payment plans or recurring payments to patients as necessary
- Establish a protocol around collecting past and current patient account balances at the time of service in order to reduce days in A/R

REPORTING AND METRICS

Using Emdeon One's simple reporting features you get in-depth insight into issues impacting your bottom line, such as:

- Top 10 Emdeon-related claim rejections
- Top 10 payer-generated rejections
- Top 10 remittance denials
- Zero-paid claims
- Overview of accepted and rejected claims with associated dollar figures

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.

