

Claims Status Advanced

Streamline A/R management and follow-up processes to accelerate cash flow with easy access to detailed claim adjudication status

Which claims will be paid by the payor and which will not?

This is a simple but complex and time consuming question, with many challenges in today's environment that prevent staff from accessing accurate claim adjudication status:

- **Prevent manual status checks and reduce staff productivity** – Multiple payors bring multiple phone numbers, websites and logins for your collections staff to manage. Endless hours are spent placing calls or logging into websites to obtain status data, negatively impacting productivity, driving up A/R days and increasing the cost-to-collect.
- **Eliminate payor status complexity** – Status updates vary in frequency and method, being delivered through HIPAA electronic transactions (277), payor websites and by phone. Our tool helps combine these different methods to a one-stop follow-up shop.
- **Simplify collection efforts only on accounts needing attention** – With limited data available, collections staff waste time researching status information on accounts that will be paid without intervention. Lack of quality data eliminates the opportunity for exception-based workflow.

When empowered with detailed status data before final adjudication, your collections staff can work an exception-based workflow to follow up only on outstanding claims, leading to faster issue correction and accelerated revenue.

Detailed claims status at your fingertips

nThrive provides a solution that removes roadblocks to create a positive impact on staff productivity, reduce the cost-to-collect and increase cash flow. Claims Status Advanced provides more accurate, complete and current data than what is typically available through standard HIPAA transactions (277).

By acquiring claims adjudication status from payor websites, nThrive Claims Management clients are able to:

- **Automate** the capture of detailed status information to allow collectors to focus on cash collections
- **Access** status information several days earlier than HIPAA transactions are typically provided
- **Focus** collection efforts on accounts that need manual intervention through exception-based workflow
- **Streamline** staff processes and **increase capacity**
- **Accelerate** cash collections, **decrease** A/R days and **reduce** the cost-to-collect



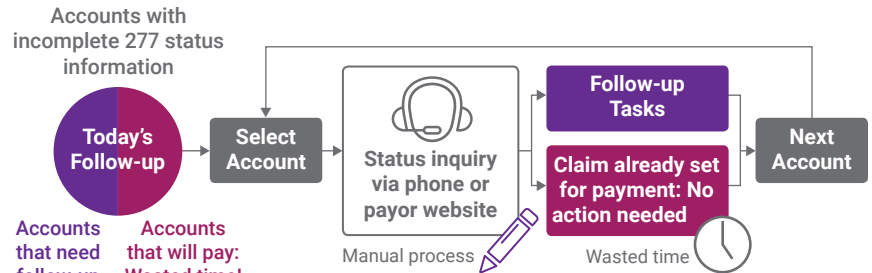
Streamline staff
processes and
increase capacity

Empower staff with exception-based A/R follow-up

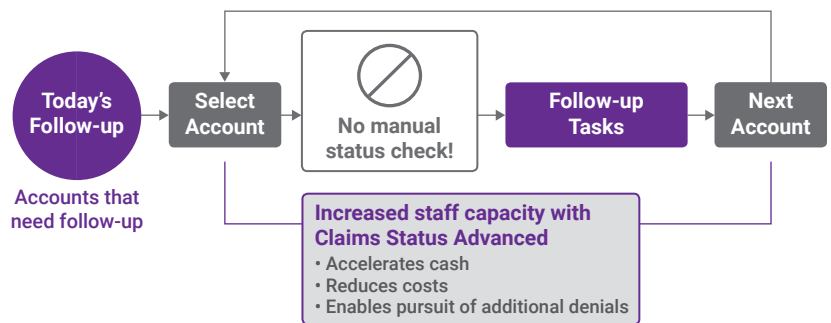
The nThrive Claims Status Advanced tool eliminates the manual processes of checking payor websites through web-bot technology. After automatically retrieving status details from the website, the information is sent to the nThrive Claims Management system and packaged in posting files. The files can be delivered to the your follow-up or collections system to drive exception-based workflow. Smart worklists leverage the status information to present your collections staff with only those accounts requiring following-up.

The result is a more comprehensive and accurate reflection of your accounts and follow-up needs. Staff members are presented with better information faster and the tool provides a new, more efficient and systematic way to complete claims review and your denial follow-up processes.

Traditional electronic status isn't enough to identify accounts that need focus and to determine actions needed.



nThrive eliminates wasted time and manual processes to boost productivity.



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