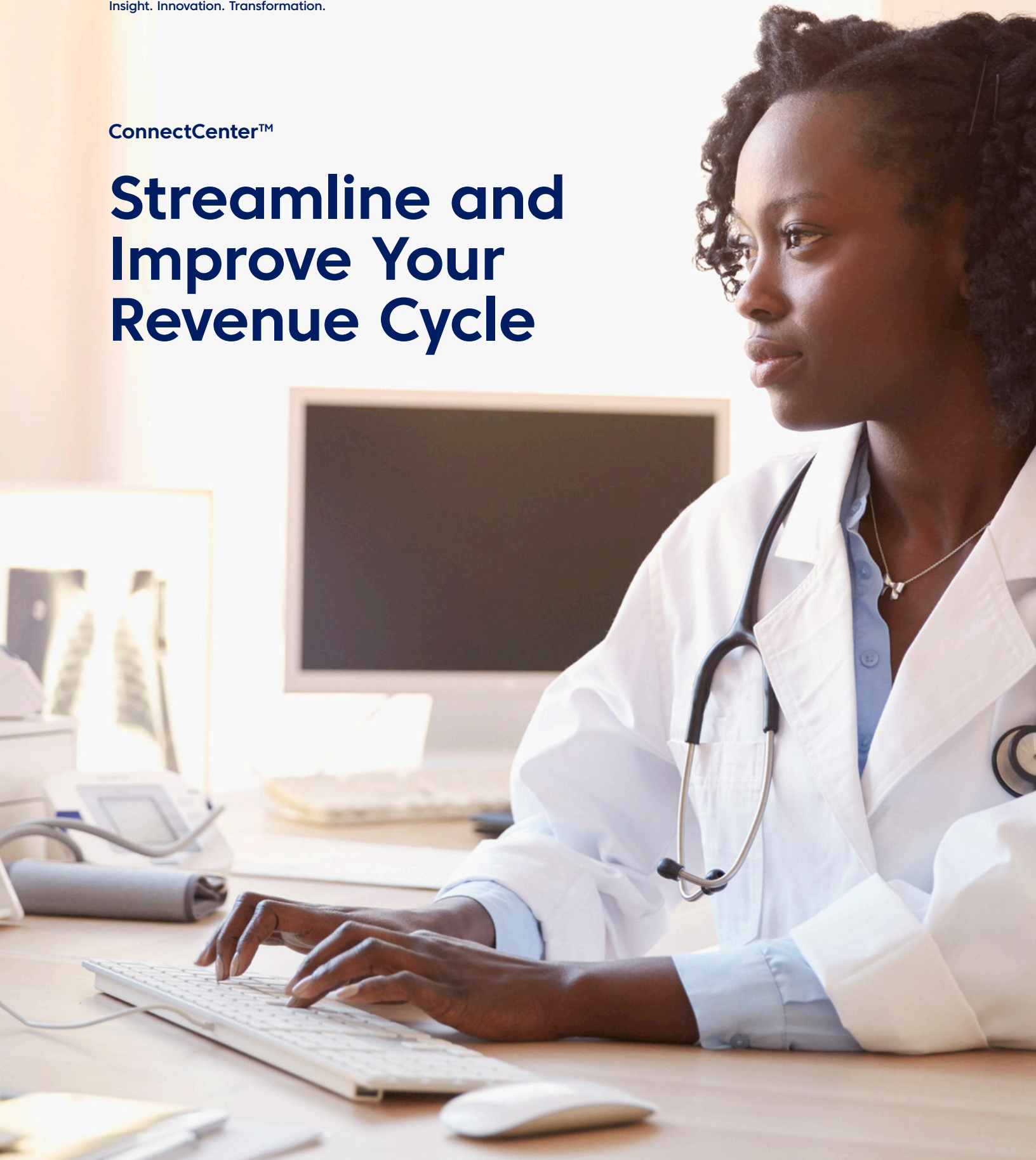


**CHANGE**  
HEALTHCARE

Insight. Innovation. Transformation.

ConnectCenter™

# Streamline and Improve Your Revenue Cycle



# Accelerating Your Healthcare Transformation

As the claims you handle and the systems you use to handle them continue to grow and diversify, it can be difficult to manage claims all the way through to payment.

Understanding why a claim is accepted, rejected, or flagged for review helps you address any issues more proactively— saving time and money, and improving your relationships with your patients.

**With ConnectCenter, you can:**

- Gain visibility into claims transactions
- Manage claims and remittance processing
- Correct and resubmit rejected claims
- Submit attachments for Medicare claims electronically• Expedite enrollment with multiple payers
- Verify eligibility and review historical eligibility transactions
- Keep abreast of payer information and news
  - Submit and review claim status in real time
  - Submit and review authorization and referrals in real time

# Effectively Manage Your Claims To Take Control of Your Revenue Cycle

Focus your efforts on current claims issues and accelerating claims processing by giving your team the right tools throughout the revenue cycle.

## **Simplify Claims Management**

ConnectCenter leverages Change Healthcare's clearinghouse and real-time claim submission and editing capabilities to quickly highlight claims issues. It provides detailed error information to expedite corrections so the claim can be revalidated and promptly resubmitted. The ConnectCenter claim management solution offers the support and tools needed to create, track, and manage claims in an intelligent workflow.

Reduce time-consuming, manual work and the costs associated with sending paper documentation (labor, postage, paper, copying) by using Attach Assist for processing solicited Medicare attachments. Attach Assist allows you to create, submit, and track your attachments within ConnectCenter. Submitting and tracking attachments within ConnectCenter reduces the risk of lost attachments and possibly claim denial from not responding in the designated timeframes.

## **Strengthen Your Denial Strategy**

Despite all efforts to prevent denials across the revenue cycle, whether by pre-service eligibility check or pre-submission claim edits, denials inevitably still occur and should be managed as efficiently as possible and appealed when appropriate.

ConnectCenter offers denial management throughout the claim workflow, enabling all claim monitoring in one location. The Claim Health Vitals dashboard and Claim Tracker indicate in near real time when a claim is denied.

## **Simplify Tedious Enrollment Applications**

Completing and submitting forms to enroll providers across payers can be a very time-consuming task. Each payer has its own requirements, format, and rolling deadline for submission. Regardless of the size of your practice, managing this process can be a challenge.

ConnectCenter offers a simple solution to better manage the payer-enrollment process – Enrollment Central. While other enrollment applications require that you provide overlapping information for each payer multiple times, Enrollment Central streamlines this process by collecting information once and using it on multiple payer-enrollment forms.

## **Benefit From Automation**

By automating the long process of filling out form after form for each provider, Enrollment Central reduces the task from hours to minutes. Features allow users to:

- Save an enrollment form and return later to complete it
- Enroll with multiple payers and complete multiple transactions at one time
- Auto-populate provider data on future agreements with data from past enrollments
- Easily access enrollments in progress, submitted enrollments, and completed enrollments

## **Start Improving Operational Efficiency Today**

Access Enrollment Central directly through the ConnectCenter application to immediately begin easing the administrative burden of payer enrollment. Start a new form right from the homepage simply by entering a provider's ID can be a challenge.

# End-To-End Coverage of Your Revenue Cycle

## Accelerate Enrollment

Our payer-enrollment technology helps eliminate redundant data entry by utilizing one data set to complete multiple payer-enrollment forms.

Eliminate the hassle of manually completing enrollment forms for every payer with enrollment automation that helps improve productivity and speeds implementation for new providers.

## Stay Informed

Keep up-to-date with current information on payers and other issues that may cause delays in processing. Notifications related to the payers that process your claims are pushed directly to your dashboard.

## Access Help Online

ConnectCenter features an online help system, targeted help videos, and downloadable documents. The help videos are short clips targeted around specific features and the online help system is contextual to the user's activity, eliminating the need to search a list of help topics.

**3.3**  
billion

Change Healthcare processes **3.3 billion** healthcare financial transactions between providers and payers annually. We are driven to **provide innovative solutions that help customers succeed** in the business of healthcare.



Insight. Innovation. Transformation.

## About Change Healthcare

Change Healthcare (Nasdaq: CHNG) is a leading healthcare technology company, focused on insights, innovation and accelerating the transformation of the U.S. healthcare system through the power of the Change Healthcare Platform. We provide data and analytics-driven solutions to improve clinical, financial, administrative, and patient engagement outcomes in the U.S. healthcare system.

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