

7 Criteria for Clearinghouse Success

Does your Clearinghouse Measure up to Change Healthcare Metrics?

1 Quality

- 99% first-pass clean claim acceptance rate
- Real-time claims editing to accelerate error resolution and expedite processing
- Actionable eligibility: EDI plus access to over 500 payer websites for service line detail

2 Connectivity

- 2,200 payers, more direct connections, less delays in processing

3 Regulatory and Payer Change Management

- 90,000 regulatory and payer initiatives occur each year to proactively streamline processing
- Involvement with key standards groups, such as CAQH / CORE Rules, and CAQH / CORE Payer Certification and Training

4 Quick Start-Up

- Patented enrollment technology expedites enrollment with payers
- APIs for direct integration of financial processing within practice management and HIS systems

5 Experience

- 3.3 billion acute and ambulatory financial transactions each year
- \$1.8 trillion in annual healthcare billing on behalf of healthcare providers
- 2,400 health systems, 630,000 providers and 21 clearinghouses rely on us for financial processing

6 Support

- 12-year recipient of the world-class Service Capability and Performance Standards (SCP) certification
- Real-time support and context-based help with ConnectCenter™
- Delivery of eligibility verification faster than the CAQH CORE standard

7 Technology

- The ConnectCenter portal provides visibility into overall transactions performance
- Patented throughput solution automatically routes transactions to speed processing
- Patented load-balancing ensures performance and scalability for rapid processing
- Performance benchmarking and drill down capabilities for more insight