



FINDING SOLUTIONS TO EOB PROCESSING

Payment automation solutions can help simplify accounts receivable administration



TODAY'S CHALLENGES
Like other industries, healthcare struggles with improving dated business processes. A hospital business office is challenged to be more efficient in its transactions. Most are challenged with the paper files, and need to convert the paper EOBs (explanation of benefits) to ANSI X12 835 files.

***ONLY 6%**
OF HEALTHCARE CLAIM ATTACHMENTS ARE SUBMITTED TO MEDICAL HEALTH PLANS ELECTRONICALLY

(USING THE ASC X12N 275 TRANSACTION STANDARD); OTHERS ARE SENT VIA FAX, MAIL OR EMAIL.



MANY HEALTH PLANS REPORT

100%
OF CLAIM ATTACHMENTS ARE SUBMITTED MANUALLY.

EVERY MANUAL CLAIM ATTACHMENT **COSTS NEARLY \$6 MORE** TO SEND AND RECEIVE THAN AN ELECTRONIC CLAIM ATTACHMENT.



ADOPTING AUTOMATED PROCESSES FOR JUST THESE SEVEN TRANSACTIONS COULD **SAVE HEALTH PLANS OVER \$1.4B ANNUALLY.**

THE **SEVEN STANDARD TRANSACTIONS** INCLUDE:

- CLAIM SUBMISSION/RECEIPT
- ELIGIBILITY AND BENEFIT VERIFICATION
- PRIOR AUTHORIZATION
- CLAIM STATUS INQUIRY
- CLAIM PAYMENT
- CLAIM REMITTANCE ADVICE
- CLAIM ATTACHMENTS



FOR THE SEVEN TRANSACTIONS, AN ESTIMATED

2.3 BILLION
MANUAL

AND

7.7 BILLION
ELECTRONIC

TRANSACTIONS WERE CONDUCTED BY PROVIDERS IN 2015. **ADDING AUTOMATION COULD RESULT IN AN ESTIMATED \$7.9B SAVINGS FOR PROVIDERS.**



EFFICIENCIES GAINED THROUGH ELECTRONIC TRANSACTIONS

Automated EOB, remittance, and claims processing is the answer to a prominent obstacle for healthcare organizations' profitability. In healthcare, 24 cents of every dollar is spent on administrative and billing costs, illustrating the need for a more efficient way to collect and process payments from patients, insurers, and providers alike.

THE GREATEST SAVINGS OPPORTUNITY FOR HEALTH PLANS IS **ELIGIBILITY AND BENEFIT VERIFICATION**, WHICH ACCOUNTS FOR

\$649M

IN POTENTIAL **COST SAVINGS.**

PROVIDERS COULD SEE OVER

\$4.3B

IN POTENTIAL **COST SAVINGS.**



THE HEALTHCARE INDUSTRY COULD SAVE **\$9.4 BILLION ANNUALLY**

***WITH ELECTRONIC TRANSACTIONS**

ONE EXPERIENCED, HIGHLY EFFICIENT DATA ENTRY PERSON CAN POST APPROXIMATELY 4,000 REMITTANCES PER MONTH. **AUTOMATING THE PROCESS EASILY INCREASES THAT SAME PERSON'S OUTPUT BY 300%***



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NAVIGANT OFFERS A SOLUTION

The clear solution is to find an electronic workflow to process correspondence and create an organized repository of documents, facilitating staff efficiency. Navigant Cymatrix offers payment automation services to reduce paper and streamline paper remittance and correspondence processing.



HEALTHCARE PAYMENT AUTOMATION SERVICES

- IMAGE / PAPER CLAIM / PATIENT PAYMENT TO 835 CONVERSION
- LETTER CORRESPONDENCE CATEGORIZATION AND INDEXING
- CLAIM SPLITTING
- RE-ASSOCIATION OF PAYMENT TO REMITTANCE
- RECONCILIATION TO BANK DEPOSIT
- PAYMENT POSTING TO PROVIDER PRACTICE MANAGEMENT SYSTEM
- CLEARINGHOUSE SERVICES



NON-HEALTHCARE PAYMENT AUTOMATION SERVICES

- BACK OFFICE PROCESSING AUGMENTATION
 - LOCKBOX COUPON AND REBATE CONVERSION
 - NON-NATIVE LOCKBOX PROCESSING
 - REMITTANCE EXCEPTION PROCESSING AND POSTING

Findings from 2016 CAQH Index