Partner

Revenue Cycle Management

RelayAssurance™ EDI Streamlined Claims, Remittance and Claim Status Processing

Healthcare providers need reliable connectivity to government and commercial payers to exchange claim and remit data. With multiple file formats, different standards and other compatibility issues, meeting the unique requirements of each payer is challenging. But failure to meet these requirements means rejected claims, delayed reimbursement and manual remittance management — all of which hurts the bottom line.

The Solution

RelayAssurance EDI offers professional and institutional claims processing via electronic exchange with more than 2,200 payers nationwide. Our Electronic Healthcare Network Accreditation Commission (EHNAC)-accredited clearinghouse helps you and your clients by formatting, tracking and reporting claim information for clean claims submission and processing.

Superior Service and Connectivity

RelayAssurance EDI delivers standard ANSI 837 professional and institutional formats to payers and returns the 835 remittance for compatibility with HIPAA standards. RelayAssurance EDI also offers claim status (ANSI 266/277) transactions for increased visibility while the claim is in process with the payer.

Accelerate Your Cash Flow

Claims can be reviewed and processed in real-time or batch. Claim errors are identified so issues can be resolved before claims are sent to payers. By reducing claim submission errors, reimbursement can happen more quickly and more accurately. By reducing claim submission errors, you can get reimbursed more quickly and more accurately. Leveraging RelayAssurance EDI helps to eliminate the need to maintain connectivity to multiple payers and keep track of payer specific edits.

Key Functionality:

- Single solution for claims, remittance and claim status
- Can be integrated with practice management and hospital information systems
- Reconciliation reports for claims tracking
- Includes payment, contractual adjustment and adjustment reconciliation posting
- Export electronic remittance data for additional reporting



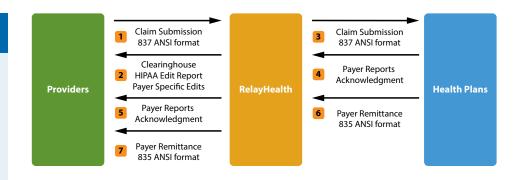
RelayAssurance EDI Helps:

- Reduce reimbursement errors and rejections
- · Reduce days in A/R
- · Accelerate cash flow
- Speed payment through enhanced electronic claims reimbursement
- · Improve visibility into claim status
- Improve accuracy of patient accounting data
- · Increase staff productivity

RelayHealth is CAQH-CORE Phase II certified and accredited by the Electronic Healthcare Network Accreditation Commission (EHNAC).







Automation to Save Time and Resources

RelayAssurance EDI also streamlines the entire remittance process from retrieval to processing for posting of the actual remittance advice within your billing system. It captures the remittance advice data from payers and assimilates it into your system for faster payment processing.

Additional Tools to Enhance Results

The ConnectCenter™ business management portal provides increased visibility into claims transactions and helps guide corrective action in addressing processing delays. Extensive claim and payer search options are available to help pinpoint issues, and accelerated enrollment capabilities help improve efficiency in on-boarding new clinicians.

To learn more, contact a RelayHealth Solutions Advisor at 800.752.4143.

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