



Revenue Performance Advisor

# Optimize your revenue cycle

Getting paid for the services you provide is increasingly complex and challenging. With hurdles to submitting clean claims, obstacles to collecting patient payments, and continuously changing rules, it's no surprise many providers struggle to collect what they're owed.

Automating the revenue cycle enables you to gain control of the financial aspects of your practice. Revenue Performance Advisor helps you with every facet, from patient check-in to payment posting. Get paid faster with real-time visibility into eligibility, claim status, rejections, denials and so much more.

**Optum**

# Automation and innovation drive efficiency and faster payments



Streamline claims workflows, improve productivity, and facilitate faster reimbursement and patient payments.

## Eligibility

- Generate eligibility requests via approximately 1,500 payer connections
- Use our solution to create batch requests or real-time requests at the point of service
- Rely on our easy-to-code API that integrates with your EHR. The API can be automated to deliver a continuous stream of real-time responses and to update the practice's patient files in bulk. Responses are also stored in our solution for additional workflow tasking or reporting

## RESTful Eligibility API

Our RESTful Eligibility API gives you direct access to hundreds of payers via the Optum Intelligent Healthcare Network™, one of the largest financial and administrative network in the U.S. health care system.

Our solution is also easy to implement. It handles 270 and 271 transactions behind the scenes to provide you with copay, coinsurance and deductible information in JSON format that is easy to read and use – no ANSI X12 expertise is required. Plus, you can quickly and easily plug benefits data into your platforms and products to build richer, more powerful user experiences and data flows.

## Connectivity

Our solution can be integrated into your existing EMR with a standard X12 EDI connection.

## Workers' compensation and medical claims attachments

Fortunately, there's a much better way to collect, attach and send the documents that support your claims: point and click.

This streamlined approach to document attachment helps deliver multiple benefits, including:

- Faster adjudication and reimbursement
- Faster responses to payer solicited and unsolicited document requests
- Reduced risk of denials due to missing and/or incorrect attachments
- Less time spent reworking claims
- Scalable capacity to fulfill the growing volume of document demands from payers
- Reduced labor costs
- Reduced cost of postage and mailing supplies

## Claims management/ERA

With Revenue Performance Advisor Claims Management, you get:

- Real-time edits and corrections on rejections and resubmissions
- Routing mechanisms that assign claims rework to specific staff
- Automatic creation of secondary claims based on initial file and primary ERA

## Denials management

With RPA Denials Management, you'll receive enhanced visibility into the claims process so your staff can work smarter, not harder.

RPA Denials Management allows you:

- To see group denials by reason code
- To manage denials more quickly and easily by utilizing pre-populated appeal letters
- To view explanation of benefits/CMS1500 forms on a single screen and create appeal letters
- In-depth drilling/exporting of denial detail for critical analysis
- To add workflow status, assign claims and add notes to single or multiple claims
- To access comprehensive analytics and reporting by reason code, billing NPI, tax ID and payer
- And more

## Robust analytics and benchmarking

Help improve financial performance through enhanced reporting, with actionable, real-time analytics that drive informed, proactive decisions. Real-time access to key performance indicators spans the entire revenue cycle, with the ability to measure performance throughout. Customizable reports help identify problem trends before they impact the bottom line – for example, “identify the top 10 rejections by payer.”

## Patient payments

Help drive prompt payments and reduce the risk of bad debt by:

- Giving patients an estimate of out-of-pocket costs to drive upfront collections
- Offering multiple, modern payment options that make it easy and convenient for patients to pay
- Delivering easy-to-understand patient statements customized to your practice



[Contact us](#) to explore the solution



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