

## Why Choose Greenway Clearinghouse Services?

Changes in healthcare delivery and payment models have helped improve the quality and reduce the cost of care, but the impact on practice finances hasn't been as positive. Practices are experiencing increases in lost claims, days in accounts receivable and administrative costs.

Many practices turn to clearinghouses to electronically submit claims, but to keep up with payment reform without experiencing a drop in profits, practices need more than that — they need a true clearinghouse partner that helps them succeed in the face of complex financial challenges.

Greenway Clearinghouse Services (GCS) has helped thousands of practices improve clean claims ratios, reduce accounts receivable cycles, maximize revenue and increase operating efficiency. Continue reading to learn how our business-process improvement approach eliminates lost transactions and generates an industry-leading first-pass accuracy rate so practices can spend less time correcting claims and more time caring for patients.

### Integrated solutions for convenient, complete claims visibility

The Greenway Clearinghouse is fully integrated with PrimeSUITE's practice management module. That means customers do not have to log in to an external website to search for a certain patient or check the status of their claims. With only one login, practices can view all their electronic remittance advice (ERAs) and explanation of benefits (EOBs).



**"I love how I can print EOBs straight from PrimeSUITE. I don't have to hunt for them like I did with our last clearinghouse."**

**Terry Dunlap, Accounts Manager**  
Omega OB-GYN, Arlington, Texas

### Real-time eligibility verification saves time, reduces payer rejections

Checking a patient's insurance eligibility is often a time-consuming process fraught with billing errors, insurance coverage concerns and delays. Greenway Clearinghouse Services automates eligibility verification so providers can accurately determine coverage prior to treating patients.

Eligibility verification features include:

- Look-up screen that consolidates all payer details to one simple view
- Batch patient verification requests that can be sent prior to appointments to reduce payer rejections
- Bi-directional integration with scheduling software to improve patient service

### Powerful claims management tools simplify billing complexities

Whether your organization is a large group enterprise, hospital, lab, billing operation, standalone surgery center or physician practice, Greenway Clearinghouse Services' intuitive, web-based solution can help significantly reduce the time and resources it takes to turn claims into cash.

Our clearinghouse services deliver real-time visibility through the entire life cycle of each claim: submission, receipt, file and claim acceptance, and payment. Enhanced tools for correcting claim errors prior to submission generate an industry-leading 98 percent first-pass accuracy rate. If a practice does receive a rejection, users can easily find and correct rejected claims directly in the GCS portal, which leads to faster payments and improved staff efficiency.

### Efficient electronic remittance advice and reconciliation

Greenway Clearinghouse Services helps increase efficiency with electronic remittance advice (ERA). Through denial management reporting in the ERA, billing teams have online visibility into denied claims and can take timely corrective action. The intuitive, standardized view of the explanation of benefits (EOB) for all payer types further equips teams with essential tools for efficient revenue cycle management.

Once claims are paid, ERA information is available for searching, sorting and printing individual EOBs. The ERAs can then be automatically posted into the billing system. The full financial picture that emerges helps practices identify opportunities to refine their claims-management process and build efficiencies over time.

### Dynamic analytics and reporting

Greenway Clearinghouse Services includes analytics and evaluation tools that provide detailed insight into patterns and trends and gives practices a comprehensive look into their aggregated data.

Report dashboards provide insights and easy-to-understand graphs on key business metrics such as payer mix, procedure mix, claims utilization and demographics. At both the enterprise and the facility level, executives and managers have the option to quickly glance or dive deep into their revenue cycles so they can determine trends in their business.

### Key benefits

- Elimination of rejected claims
- Predictable cash flow
- Reduced time and resources required to turn claims into cash
- Increased sync percentage and reduced rejections
- Industry-leading 98 percent first-pass accuracy rate
- Reduced denials and quickly resolved claim rejections
- Detailed insights into relevant business trends



**"Since switching to GCS, I have been very happy with the personal service I receive, and my life as a billing supervisor has been much easier!"**

**Wanda Garza, Billing Supervisor**

Washington Orthopaedic Center, Centralia, Washington

### For more information

To learn more about how we can help your organization reduce accounts-receivable cycles, maximize revenues and increase operating efficiencies, contact Greenway Health at [info@greenwayhealth.com](mailto:info@greenwayhealth.com) or 877-537-9597.