

CONIFER DENIALS & APPEALS MANAGEMENT



Helping You:

- Keep clinical resources focused on patient care
- Reduce your administrative and clinical denial backlog
- Apply best practices that will reduce denial rates over the long term
- Support your compliance activities and mitigate the effect of regulatory changes on your reimbursement
- See net revenue benefit through recoveries and successful appeals

Preserve Revenues and Prevent Future Denials and Underpayments

Effectively overturn improper denials, recover underpayments and reduce future denials with unmatched expertise focused on results

YOUR BUSINESS CHALLENGE

Claim denials and underpayments have impacted revenues and resources since the dawn of third-party reimbursement. As soaring denial rates and expanding compliance requirements combine with reimbursement reductions, an effective denial reduction and management program is crucial to a provider's financial health. Today, the challenge confronting many healthcare organizations is how to match the resources and focus of payers' massive utilization management operations at a time when staff is too overburdened to appeal improper denials and underpayments, as well as uncover and correct the root causes of denials.

WHAT WE OFFER

Conifer Denials & Appeals Management provides a comprehensive, scalable approach focused on payment recovery, denial avoidance, and reducing the cost to overturn denials. We provide an efficient solution to providers who need to manage denial volume, reduce the burden on clinicians to address denials, and unlock revenue. Our team applies specialized expertise to seamlessly work all levels of appeals from any payer, allowing your case management team to focus on concurrent reviews and delivering quality care.

As the single source of accountability for all denials and underpayments, our expert team of licensed clinical staff works remotely, using your existing system or leveraging Conifer Health's proprietary ConiferCore® Revenue Performance platform. Conifer Denials & Appeals Management maximizes collection of earned revenue by:

Conifer Health helps organizations transition from volume to value-based care, enhance the patient experience and improve quality, cost and access to healthcare.

CONIFER HEALTH SOLUTIONS®

Hospitals & Health Systems
ConiferHealth.com/Hospitals

Physician Groups
ConiferHealth.com/Physicians

Employers
ConiferHealth.com/Employers

- Using proven best practices and denial prevention methodology
- Recapturing underpayments resulting from conflicting interpretations of clinical documentation, payer policy, or other reasons
- Reviewing and appealing adverse findings received from government payer audit contractors and programs
- Working with every major commercial and government payer and understanding the complexities of their systems and processes
- Providing monthly, quarterly and annual reports about denial volume, trending, processing and resolution

HOW WE'RE DIFFERENT

Deep domain expertise

Conifer Health brings you the benefit of years of knowledge gained from working with every major commercial and government payer on behalf of hospital clients in more than 40 states. We understand the complexities of their systems and processes which we leverage to avoid denials and streamline operations.

Dedicated denials management team

Instead of using your case management team to handle denials, you'll have a full-time team of knowledgeable registered nurses with deep understanding of commercial and government payers. Our registered nurses undergo rigorous quality management reviews so that they meet or exceed standards.

Flexibility

We structure our denials management and prevention services to meet your organization's needs and revenue performance goals—giving you access to Conifer Health's dedicated denials management clinicians and implementation choice.

Actionable insight

We layer continuous feedback on denials trends with monthly, quarterly, and annual reports about your denial volume, processing, and resolution to guide process improvements, address causes of denials, and support future managed care contract negotiations. Our team can turn this visibility into focused staff education to improve front-end processes and support clean claim submissions.

Solutions by hospital operators for hospital operators

Our denials management and prevention services are responsive to hospital operational needs because our revenue cycle management solutions were developed, tested and proven in one of the nation's largest healthcare systems. Healthcare is in our DNA; we're not owned by payers, consultants, venture capitalists or technology companies.

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