



STREAMLINE CLAIMS. INCREASE COLLECTIONS. DRIVE RESULTS.

MAKE YOUR COLLECTIONS EASIER &
MORE PROFITABLE.

As the pioneer of web-based practice management, we have spent over two decades developing billing software that effectively unifies practice workflow and improves collections outcomes. Our goal has been to automate as much of the billing and A/R process as possible with an intuitive, flexible design, allowing you to maximize revenue while driving practice efficiency.

Our proprietary Claims Center gives you auto-generated worklists, claims status tracking, and editable review screens. With Central Billing Office (CBO), you can manage your entire claims process in one place with a single sign-on, ideal for multiple providers and sites.

Connected to over 1,800 payors, our robust clearinghouse automates manual submission processes saving time and money.

Our Claim Inspector automatically scrubs claims for potential errors, so you can easily identify claim issues before submission. It runs 3.5 million edits on each claim for CCI, HIPAA, LCD, and carrier-specific requirements prior to submission. (We're so confident about its effectiveness, we guarantee first-pass claim acceptance of 95% or better.) And our functional A/R Control Center features collections worklists, denial tracking, and prioritized daily tasks to ensure your practice is getting the revenue you've worked hard to earn.

COMPREHENSIVE

Claims Center handles everything from end to end, with automated checks and balances to ensure maximum revenue.

PRODUCTIVE

A/R Control Center lets you track and manage receivables with collection worklists and denial tracking as well as prioritized daily tasks.

SEAMLESS

Charges automatically pass from EHR and mobile apps allowing the billing process to start immediately without double data entry.

MEDICAL BILLING SOFTWARE FOR OPTIMIZING PRACTICE REVENUE.



CENTRALIZED BILLING OFFICE

Manage each provider and practice location from a single system with a single sign-on. Automatically run day closes and ease end-of-month processes. Easily create, save, and schedule centralized performance reports. Manage patient communications through a global patient list.



REPORTING & ANALYTICS

Turn data into actionable insights with smart dashboards and easy-to-create reports for better informed strategic planning. Quickly evaluate reimbursement trends, top ten carriers, and other KPIs to identify opportunities, improve decision making, and optimize workflow.



CLAIMS CENTER

Easily manage and automate key claims processes in one place. Get collection worklists, track claim status, and enable batch processing. Submit claims electronically to 1,800 payors through an integrated clearinghouse. Our proprietary Claim Inspector scrubs claims for potential errors, running 3.5 million edits prior to submission with a 95% first-pass acceptance guarantee.



A/R CONTROL CENTER

Gain visibility, identify problems, and leverage staff expertise with intuitive dashboards, automated worklists, denial tracking tools, and easy-to-run reports. Quickly see where collections stand and what needs to be done, then allocate tasks based on staff competencies. Pinpoint and resolve problem accounts using custom reports and collection letter templates.



PATIENT PAYMENTS

Make patient payments more convenient with all-in-one processing solutions to collect more and collect faster. Automatically charge credit cards kept on file or offer our online self-service portal for easy payment. Use bill-pay reminders, online statements, and payment plans to help reduce days in A/R.



CHARGE CAPTURE

Have charges automatically populate directly from your EHR or use an online charge slip to make the capture process as simple as point and click. Reduce data entry and minimize errors for improved workflow, happier staff, and optimal collections results.