

PATIENT ACCESS

# Registration QA

Minimize denials and increase cash flow by driving accurate patient registration information

Claim denials can have a negative impact on a health organization's revenue cycle with an average cost of \$25 per claim.<sup>1</sup> Some of these claims are never worked again as rework is costly, confusing and time-consuming. However, claim denials are avoidable when patient information is accurate and complete during intake so that benefits are correctly verified and attached to patient accounts.

With Experian Health's Registration QA you can minimize denial exposure and drive registration data accuracy by highlighting pre-service and point-of-service registration errors as soon as they occur and proactively mitigating potential denials with real-time actionable insights.

## Benefits to you



1. Reduce denial exposure by gaining visibility into issues early on that could potentially cause denials and hurt your revenue cycle.
2. Standardize benchmarks and implement best practices by understanding underlying trends across disparate departments.
3. Empower yourself with powerful decision-making enabled with superior reporting and robust KPIs.
4. Drive positive patient experiences through seamless patient information capture.
5. Improve patient retention and registration efficiency as returning patients are less likely to have errors attached to their accounts.

## How we do it

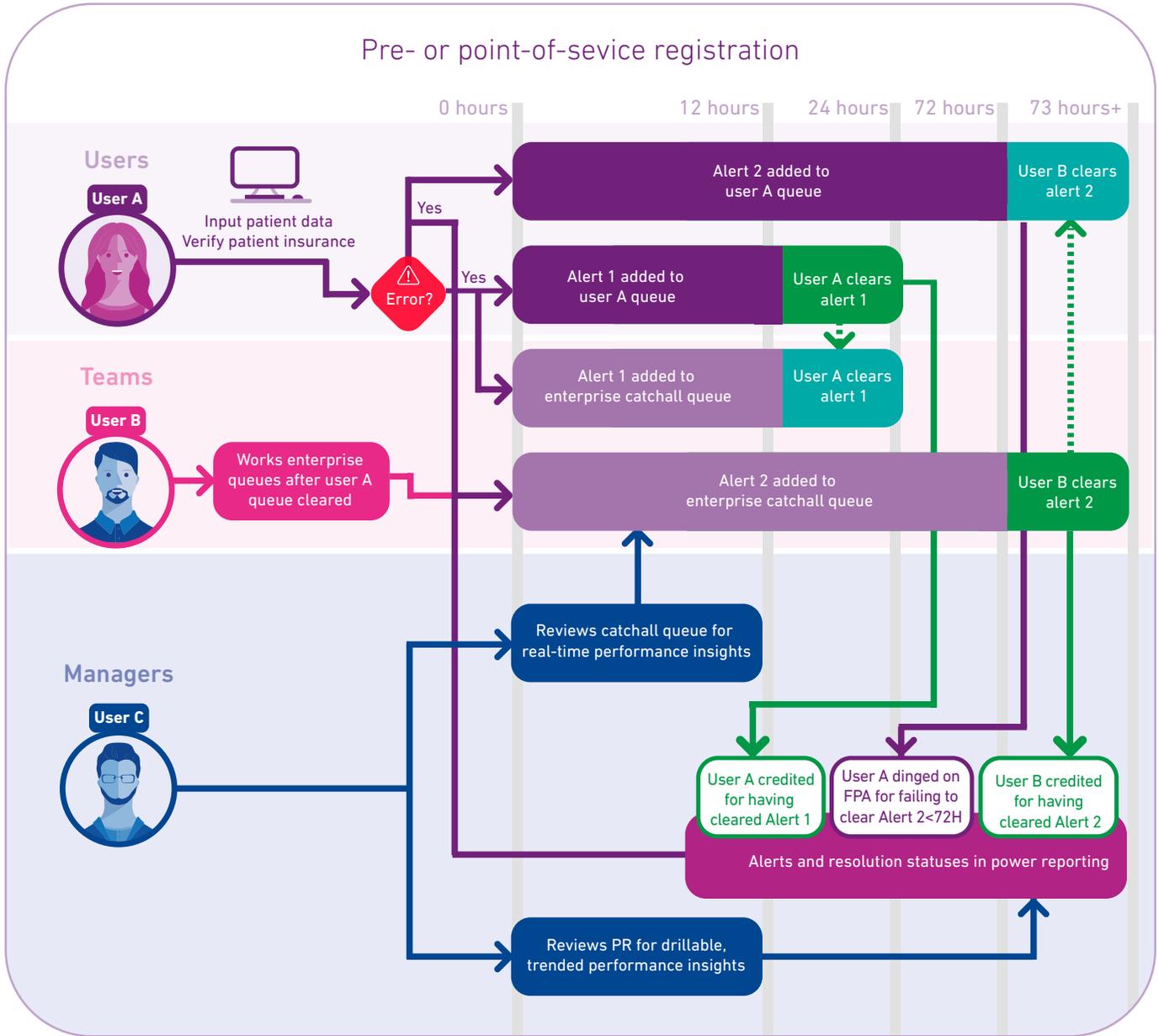
- Registration QA monitors traffic from your registration systems and eligibility feeds using configurable rules. When a rule is triggered, an alert is generated and assigned to a user.
- The user's activity resolving the alert is exhibited in the Power Reporting Portal and KPIs are created to help managers assess performance at an enterprise, facility, department or user level.
- Get real time access to alerts in the eCare NEXT® bar for immediate resolution.
- Alerts are also available to users and managers in custom work queues.
- Extract your data on-demand into other reporting environments as needed.
- Perform queries by accessing the nation's largest and most capable insurance eligibility clearinghouse.

**Let's help you gather accurate registration data and get paid faster.**

Visit our [website](#) to learn more or email us at [experianhealth@experian.com](mailto:experianhealth@experian.com) to schedule a demo.

<sup>1</sup>You might be losing thousands of dollars per month in 'unclean' claims. MGMA® MEDICAL GROUP MANAGEMENT ASSOCIATION.

Example: front-end patient data capture quality assurance workflow



**Best practice notes:**

While this diagram is focusing on how alerts flow through the work queues, it is recommended that the NEXT Bar be leveraged to address data capture issues in real time while the patient is being registered.