

Real-Time Benefits Check and Electronic Prior Authorization

Myndshft moves revenue cycle up to the time of service by automating eligibility and benefits verification, coordination of benefits, insurance discovery, patient financial responsibility, and prior authorizations.

Why Myndshft

Myndshft enables seamless, end-to-end care while meeting the revenue cycle challenges you need to manage.



IMPROVE PATIENT CARE

Self-learning automation and fewer clicks mean more time to focus on a better patient experience

Reduce manual effort by up to 70% for patient intake and prior authorizations



GET PAID FASTER

Reduce turnaround time to referring physicians and patients by as much as 93%

Reduce claim denials and rework by 90% by scrubbing errors prior to submission



MAXIMIZE COLLECTIONS

Increase collections by more than 20%

Identify a patient's financial responsibility at the time of care

Solutions & Benefits

BENEFITS VERIFICATION & ELIGIBILITY



Automated, real-time benefits and eligibility verification



Connects to 600+ payers to capture member-specific health insurance data



Access to 93% of covered U.S. lives

COORDINATION OF BENEFITS



Automated identification of primary and secondary payer (if one exists) when benefits verification & eligibility check is run



Will add/correct primary & secondary payer within client's system even if not provided initially

INSURANCE DISCOVERY



Identify active coverage for more than 10% of self-pay accounts



Recognize up to 12% increased revenue



Reduce operational costs with increased margins. Minimize write-offs and third-party agencies

PATIENT FINANCIAL RESPONSIBILITY



Automated real-time determination of patient financial responsibility



Most accurate solution in market for both pharmacy and medical benefits

PRIOR AUTHORIZATION



Instantly identifies whether prior authorization is required, and determines the optimal submission route between EDI/278, fax, and payer portals



Enables them to submit it directly to the Payers to receive instant decisions on PA submissions



Case Study

How Myndview helped a national specialty pharmacy grow

Problem

Our client was struggling with flat revenue caused by process inefficiencies and accuracy problems that significantly slowed speed to therapy. As a result, they were leaking revenue and unable to grow market share.

Challenge

They doubled the team assigned to the manual tasks. They applied traditional process improvement strategies. They even evaluated whether to build their own solution. But none of those options solved their challenge.

Solution

With Myndshft, our client is able to directly connect to over 700 payers, representing 93% of the U.S. covered population. So they can seamlessly integrate real-time medical and pharmacy benefits data and automated prior authorization into their existing workflow and IT infrastructure.

How we do it

COMPREHENSIVE RULES LIBRARY

With a library of continuously-updated rules for thousands of payers, Myndshft automatically synchronizes with the eligibility and prior authorization rules for all specialty pharmacy and diagnostics procedures. So, you always have the most up-to-date requirements, without the effort.

SEAMLESS INTEGRATION

 $\label{thm:mands} Myndshft integrates with thousands of LIMS, EMRs, HIS, and financial management solutions.$

SELF-LEARNING

Myndshft dynamically updates automated workflow and rules engines based on the actual responses and results from submitted prior authorizations. Our technology continuously adapts to the rules in use by payers. The more you use it, the smarter it gets.

LIGHTNING FAST

Automatically verify eligibility and benefits, calculate patient financial responsibility and identify and electronically submit a prior authorization. All within less than a second.

