

ready to get back to what you do best?

Running a practice is complicated. We're here to make it a little easier.

Proven financial and clinical performance

96%

of athenahealth physicians
avoided PQRS penalties in 2017
vs. 63% national average¹

74%

of providers close encounters
the day of the visit²

94%

of claims favorably adjudicated
after one billing event²

5%

no-show rate²

Make the most of your financial performance

We deliver value by helping your practice simultaneously reduce operating costs and see more patients. Focus on high-value work as we automate, eliminate, or take on burdensome administrative work for you wherever possible, including taking on the appeal process and managing denials on your behalf. Our Billing Rules Engine uses data gathered from across our nationwide network to proactively catch errors in claims before submission, based on over 40 million known denial scenarios. Check for and meet prior authorization requirements with less work by letting our dedicated authorization management teams collect and submit clinical documentation and follow up with payers for you. Maintain a full schedule and minimize no-shows with proactive patient outreach tools. That includes automated reminder calls that allow your patients to easily confirm or cancel appointments or reschedule with live operators. Any changes are automatically reflected in your schedule, allowing your staff to proactively fill open appointment slots.

Free your providers up to do their best work

Wherever possible, we delegate administrative work outside the exam room, allowing your providers to focus on what they do best—delivering care. That includes matching inbound faxes and results to the right patient chart, so you can make more informed clinical decisions and spend less time on documentation. Minimize the number of systems your providers need to use in the exam room by using our built-in interfaces with hospitals, labs, and other outside care sites to pull in health data and assemble a more complete patient record. More efficient encounter documentation means your providers spend less time charting and are able to accomplish their work with fewer screens, clicks, and headaches. And with mobile workflows, your providers can stay on top of patient care even when they're out of the office.

Keep pace with industry change without breaking a sweat

Our services are regularly updated to reflect changes to certain federal government and regulatory requirements, which we help track. We lighten the load for your staff by building some of these requirements into your workflows and taking on other quality-related work, including attestation support for the Merit-Based Incentive Program System (MIPS). At the same time, we strive to help you maximize your reimbursements from quality programs by learning from the experiences of over 160,000 providers on our network.³ And because every athenahealth client is on the same instance of our cloud-based network, we can roll out changes across the network overnight at no cost to you.

¹ Based on 2015 performance. Center for Medicare & Medicaid Services. 2017. "2015 Reporting Experience." Accessed June 20, 2018. https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2015_PQRS_Experience_Report.pdf

² athenaNet data as of Q4 2018

³ Based on athenahealth data as of Q1 2019.

Healthcare as it should be

What would it take to bring the joy back to practicing medicine? To let providers turn their attention back to their patients? To cut through the red tape that gets in the way of staff doing the jobs they were hired to do? To give patients the experience they deserve?

At athenahealth, we're committed to making this vision a reality and helping your organization unleash its full potential. We do this by:

- Offering the most open, connected healthcare network, so you can exchange clinical and financial data seamlessly
- Sharing knowledge from our network of 160,000 providers and 110 million patients³ to fuel your performance
- Freeing up providers and staff to focus on the work that matters most, by eliminating the friction that holds you back

athenaOne

athenaClinicals

Electronic health records

athenaCollector

Revenue cycle management

athenaCommunicator

Patient engagement

Population Health

Care coordination and risk management

SUCCESS STORY:

Joseph Aloise, DO Family Practice

Issues

- Struggling to collect timely and full payment
- Time-consuming administrative tasks
- Inefficient clinical workflow took away from patient care
- Difficulty participating in quality programs

Results

- Collections increased 30 percent
- No-show rate down to 1.2 percent
- DAR reduced from 45 to 19 days
- Streamlined clinical workflow and reduced administrative work
- Significantly increased Medicare incentive payment

“With athenahealth, I have a network of experts on our side. They call patients for us, collect patient balances and insurance balances. I feel like I have a whole army of collectors trying to bring money into our practice for us.”

– Tia Melot, practice manager

AT A GLANCE

Located in North Fort Myers, Florida, since 2001

Live on athenaOne since 2014

Solo family medicine practice with one physician's assistant

About 50 patient visits per day

Find out more. Call 817.282.0300 or visit us online at quattrishealthco.com