

GENIX

Streamlining the revenue cycle fuels growth, ensuring financial health and safety.

Secure and Effective



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Empowering providers with seamless billing solutions for financial excellence

RCM Team



About Us



Our primary objective is to contribute to positive changes in society by building a vibrant community that offers IT products, services, and consulting to our customers.

- Started in 2011
- 20+ years of experience
- End to end Billing services
- HIPAA compliant systems

OUR 4C's

Customer

We put our customer's needs at the center of all we do, develop partnerships and exceed their expectations.

Commitment

Always a step ahead in absorbing market trends and delivering breakthroughs.

Competency

Driven by a team of experts with diverse skills aligned with a common mission.

Culture

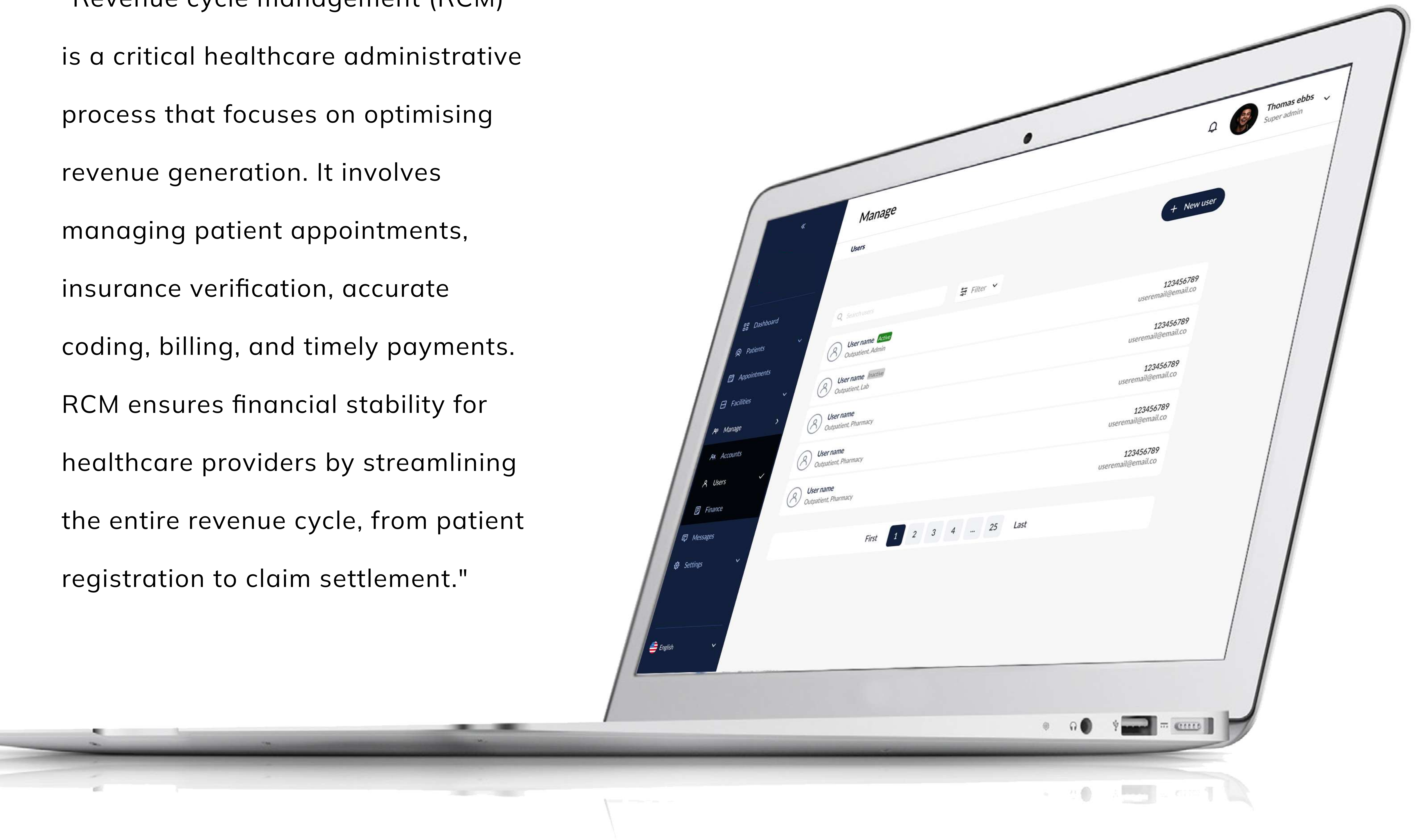
A people-driven organization that nurtures renewed thinking.

As a company, we focus on our people first!

As a team, we focus on our customers first!

Revenue Cycle Management

"Revenue cycle management (RCM) is a critical healthcare administrative process that focuses on optimising revenue generation. It involves managing patient appointments, insurance verification, accurate coding, billing, and timely payments. RCM ensures financial stability for healthcare providers by streamlining the entire revenue cycle, from patient registration to claim settlement."



Service Landscape

Revenue Cycle Management

- Patient access management
- Coding and billing optimisation
- DRG and HEDIS Coding
- Claims Processing and Follow-Up
- Denial Management and Appeals
- Compliance and Regulatory Adherence
- Financial Reporting and Analysis

Value Added Services

- Initial set-up for brand new physicians
- Revenue optimisation strategies
- Advanced Data Analytics
- Compliance Consultation
- Customised reporting and dashboards
- Dedicated account management
- Fraud, Waste, and Audit Solutions for Payers

Technology Solutions

- Integrated billing platforms
- Advanced Coding Software
- Electronic Health Records (EHR) Integration
- Claims tracking and analytics
- Workflow Solutions
- Document management systems

Value-Added Service



01

- Patient Registration
- Patient Scheduling
- Eligibility and Benefit Verification
- Prior Authorization

02

- Coding
- Coding Staff Augmentation

03

- Demographic Entry
- Charge capture and coding
- Charge Validation/Verification
- Claims generation and submission
- Payment Posting and Reconciliation

04

- Denial analysis and categorization
- Appeals Process and Resubmission
- Denial Trend Analysis
- Identify the health of A/R - collectibles and non-collectibles
- Outstanding Age Trial Balance (ATB)

05

- Claims Follow-Up and Tracking
- Insurance and Patient Follow-Up Procedures
- AR Aging Analysis and Prioritization
- Resolution of Billing Discrepancies

06

- Coding accuracy ensures reimbursement integrity.
- Regulatory updates drive compliance adherence.
- Audit readiness safeguards financial stability.

Transition, Hiring, and Training Framework



TRANSITION FRAMEWORK

- Assessment and planning
- Technology Integration
- Data migration and validation
- Process Optimisation



HIRING FRAMEWORK

- Skill identification and recruitment strategies
- Onboarding Process and Training Framework

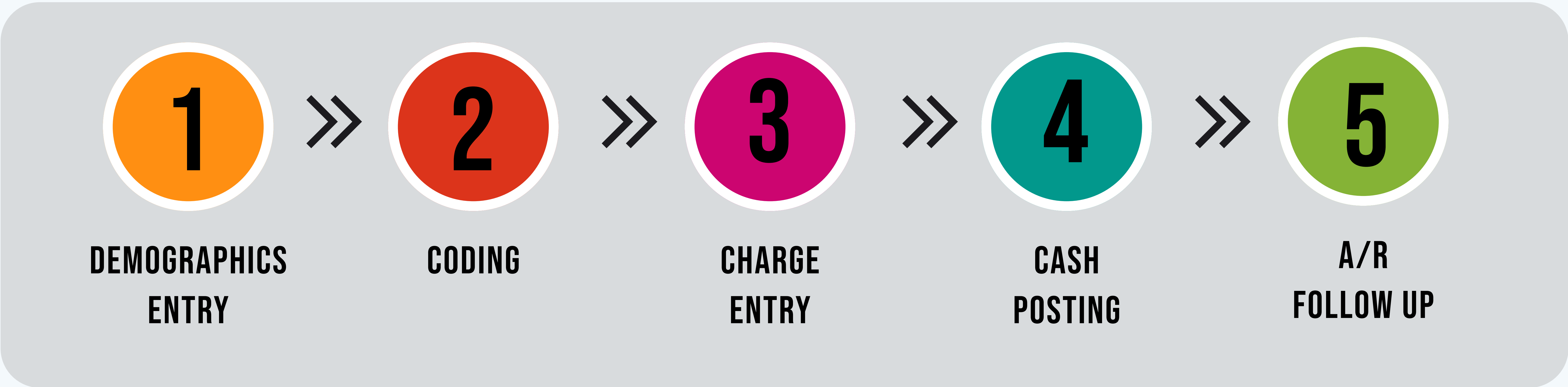


TRAINING METHODS

- Certifications and continuous learning
- Performance Evaluation

Project Management

SITE HEAD



SPECIALIZED DELIVERY HEAD



PRODUCTION TEAM



DEILVERY

Resource Pool



Process Improvement

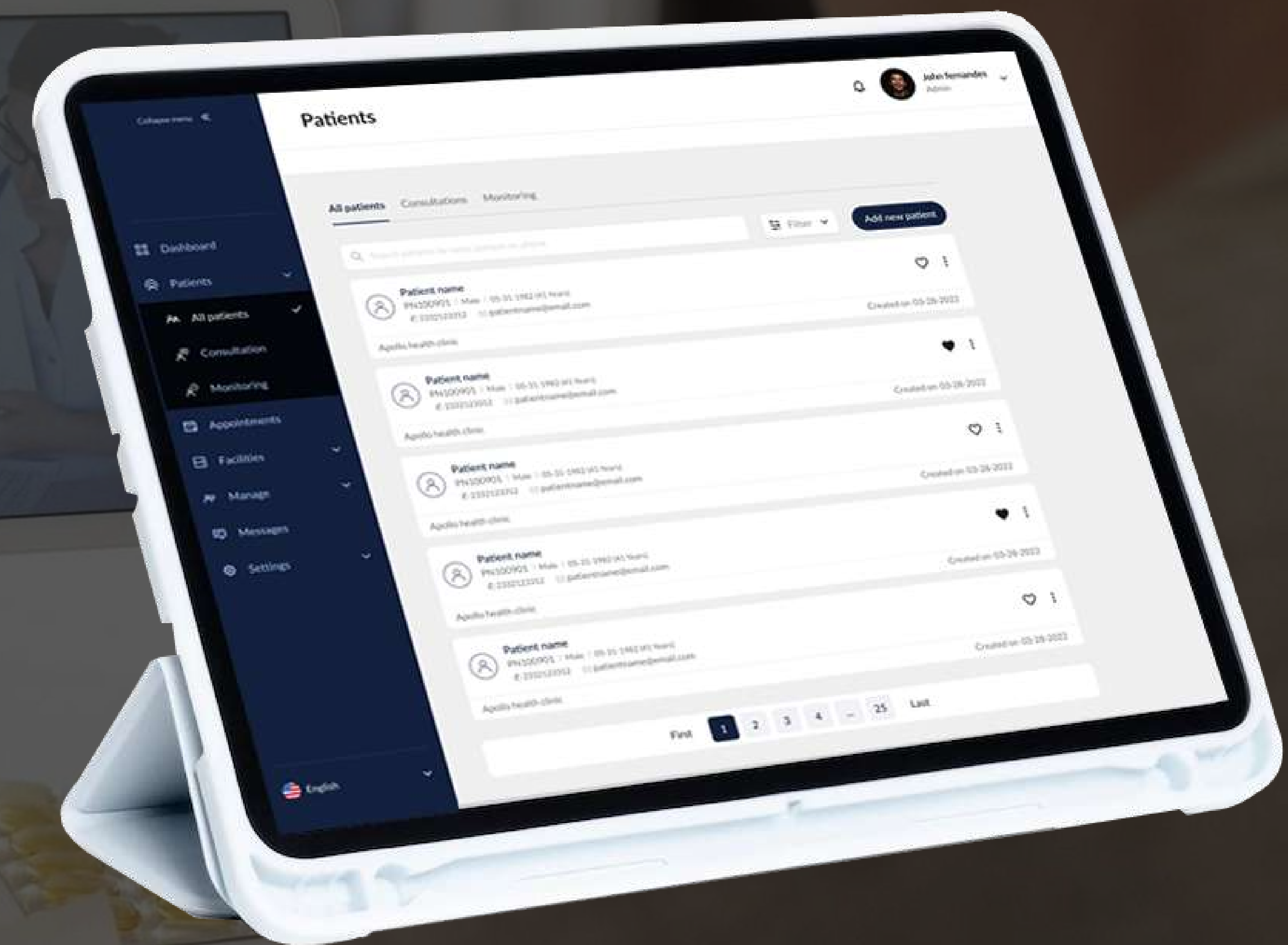
- **Root Cause Analysis:** Conduct a thorough analysis of past errors and denials to identify recurring issues. Implement corrective measures and update standard operating procedures to prevent future errors.
- **Streamlined Workflow:** Identify bottlenecks in the billing process and streamline workflows for efficiency. Introduce automation where possible to reduce manual intervention and speed up tasks.
- **Quality Assurance and Training:** Implement regular quality checks to ensure accuracy in coding, billing, and documentation. Provide ongoing training to staff members to keep them updated with the latest industry standards and technologies.
- **Enhanced Communication:** Improve communication channels between billing staff, healthcare providers, and insurance companies. Ensure prompt and clear communication to resolve issues, answer inquiries, and prevent misunderstandings.
- **Data Analytics and Reporting:** Utilise data analytics tools to gain insights into billing trends, claim denials, and payment patterns. Generate comprehensive reports for analysis, enabling data-driven decisions for process improvement strategies.

Process Transformation

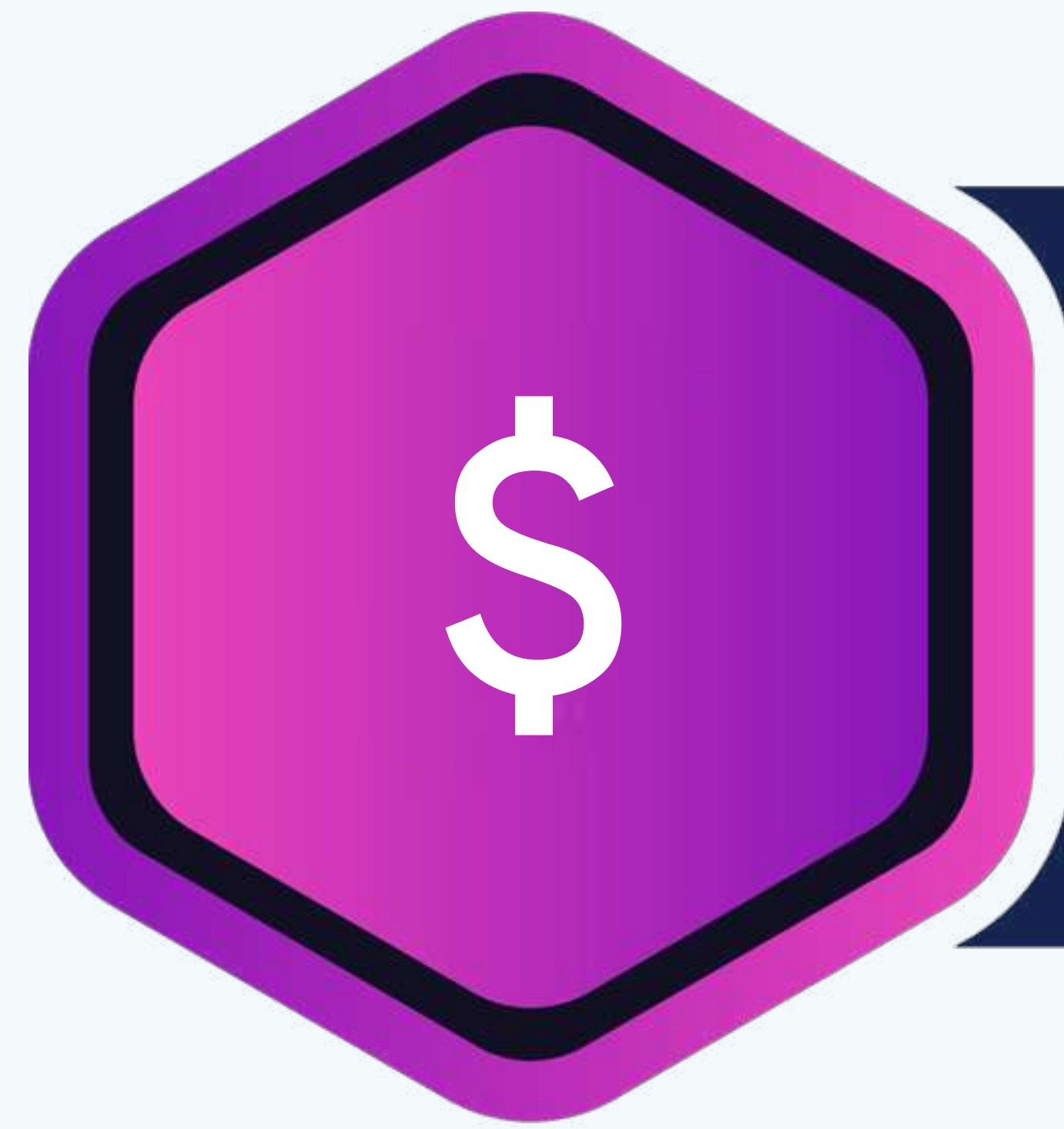
- **End-to-End Digitization:** Digitise all aspects of the billing process, from patient data entry to claim submission and payment processing. Integrate electronic health records (EHR) seamlessly into the billing system for a unified digital workflow.
- **Client-Centric Approach:** Adopt a client-centric mindset, focusing on personalised service and tailored solutions for each healthcare provider. Offer customised reporting and dashboards to clients, providing real-time insights into their revenue performance.
- **Continuous Process Monitoring:** Implement real-time process monitoring systems to track workflow progress and identify deviations. Proactively address any issues and constantly refine processes based on ongoing monitoring and feedback.

Billing - Data	AR
Up to 3 month 90%	Up to 6 month 90%
Up to 6 month 95%	Thereafter 95%
Thereafter 98%	

- Streamlined billing processes lead to faster claim submissions and reduced payment cycles, ensuring a steady and timely flow of revenue.
- Billing companies stay updated with the latest healthcare regulations, ensuring that billing practices adhere to compliance standards and avoid legal issues.
- Expertise in compliance reduces the risk of audits and penalties, providing peace of mind for the hospital or provider.
- It reduces overhead costs associated with maintaining billing software, infrastructure, and ongoing staff training.
- Billing companies provide detailed and transparent financial reports, enabling hospitals and providers to have a clear understanding of their revenue streams, allowing for better financial planning and decision-making.
- Billing companies invest in cutting-edge billing software and technologies. Partnering with them gives hospitals and providers access to these advanced tools without the associated costs, improving efficiency and accuracy.
- Transparent and accurate billing practices foster trust and confidence among patients, leading to increased patient satisfaction and positive feedback.
- Clear billing communication, including detailed invoices and prompt responses to billing inquiries, enhances the overall patient experience



Why partner with Us?



PROFITABILITY

- Increased Revenue and Cash Flow
- Cost reduction and operational efficiency
- Focus on Core Competencies and Patient Care



GROWTH

- Diversification of Service Offerings
- Investment in technological advancements
- Focus on client relationships and retention



STRATEGIC INITIATIVES

- Implementing Advanced Technology Solutions
- Enhancing patient experience and engagement