



ECLAT

HEALTH SOLUTIONS
your partner in revenue cycle management

MEDICAL BILLING
SERVICES



IMPROVED FINANCIAL PERFORMANCE

ECLAT Medical Billing Services

ensures a reduction in errors and faster collections, enabling you to focus on patient care.





PROVIDER ENROLLMENT / CREDENTIALING

- Eclat Health is a “one stop” solution for all your RCM needs. We are equipped with trained and certified professionals to provide a complete solution.
- Eclat has expertise in providing professional services to providers in all 855 forms, PECOS (Provider Enrollment Chain and Ownership System) and CAQH's (Council for Affordable Quality Healthcare) ProView system.
- Eclat supports our clients in credentialing and re-credentialing of Medicare and commercial payers.

(We also)

- Add physician(s) into an existing group, changing from one practice to another.
- Eclat provides ERA / EFT set-up and assistance.
- Assistance for Insurance contracts, evaluation and negotiation.



APPOINTMENT SCHEDULING

- Eclat's Eligibility Team (EET) follows up with patients to help them with their schedules, helping our clients increase cash flow and reduce 'no shows'.
- EET verifies the eligibility, co-pay, co-ins, and deductible details and sends this information to the provider's office even before the patient's visit.



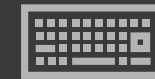
PRE-CERTIFICATION & INSURANCE ELIGIBILITY VERIFICATION

- We streamline the procedure upon receiving the copy of insurance card prior to appointment for services which require pre-certification / authorization.



PATIENT DEMOGRAPHIC ENTRY

- Eclat's Demo Team (EDT) enters patient demographic details such as name, date of birth, SSN, address, phone #, insurance details, medical history, guarantor, as provided by the patient at the time of the visit to the doctors' office on the PMS.



CPT & ICD-10 CODING

- Our coding team works in accordance to CPT and ICD-10 Coding Compliance.
- Our billers receive superbills with diagnostic notes with or without ICD and CPT codes. If codes are already provided on the superbill, they are validated by our coding team to check and prevent any 'Upcoding' or 'Downcoding' to avoid denials.



CHARGE ENTRY

- The fee schedules are generally pre-loaded into the PMS.
- Our billers ensure that the fee schedule is as per the state / provider insurance contract.
- Our billers ensure all patient demographics have been provided in the claim and are ready to be filed.



CLAIMS SUBMISSION

- Our billers ensure that the claims are submitted electronically. Paper can be used as an insurance requirement within a 24 hours' window to the clearing house or insurance.
- With Eclat you can expect all clearing house rejections to be resubmitted on the same day.



PAYMENT POSTING

- EFT / ERA enrollment to all providers to avoid delays in the payments.
- Our billers post and reconcile ERA / EOB / Denials (Based on the PMS) to the PMS on a daily basis.



ACCOUNT RECEIVABLES FOLLOW-UP

- We can provide a unique follow-up on a weekly, bi-weekly, and / or monthly basis, through your preferred method of communication, depending on the filing limits and buckets of aging.



DENIAL MANAGEMENT

- After a detailed analysis on denials and partial payments, Eclat's Account Receivable (EAR) team calls payers, patients, providers, facilities and any other participants to follow-up on denied, underpaid, pending and any other inappropriately processed claims.
- Notes are posted / documented in the PMS on each account to analyze trends in payments and denials.
- Once the provider authorization is completed, our team will contact appropriate patient to obtain information as required for billing such as Insurance Identity Number, coordination of benefits and other requirements.
- Our (EAR) experts also work on secondary / tertiary / paper claims and follow-ups.
- Eclat's Appeals Team (EAT) appeals on the denials once the correspondence is received from the payers.



SPECIALITIES

- Ambulance Services
- Anesthesiology & Pain Management
- Cardiovascular Surgery
- Cardiology
- Chiropractic
- Dermatology
- Durable Medical Equipment
- Emergency Medicine
- Endocrinology
- Family Practice
- General Surgery
- Hematology / Oncology
- Internal Medicine
- Neurology
- Nephrology
- Obstetrics / Gynecology
- Orthopedics
- Physical & Occupational Therapy
- Pediatrics
- Podiatry
- Pathology
- Psychiatry
- Radiology
- Urology

WHO WE WORK WITH

- Hospitals (Small, Medium and Large Facilities)
- Hospital Systems
- Ambulatory Surgery Centers
- Physician Groups and Offices
- Hospital Owned Practices
- Independent Practice Associations (IPAs)
- Managed Services Organizations (MSOs)
- HealthPlans / Insurance Companies

COMPANY OVERVIEW

The word “Eclat” means “Brilliance” in French.

As a provider of comprehensive healthcare support services that include medical coding, medical billing, and healthcare revenue cycle consulting, our goal is to live up to our name by crafting business partnerships that work brilliantly in a symbiotic nature. ECLAT acts as an extension of our clients’ team to help them meet and exceed operational goals and collaborate to successfully navigate the challenges of today’s healthcare industry.

Eclat’s business model is based on the premise that hospitals and physicians’ practices require a partner who can reduce their administrative burden so that they can focus on delivering excellent patient care. To make this possible, Eclat Health Solutions focuses on delivering the fastest, most accurate, flexible, and affordable coding & billing solutions available, thus surpassing our clients’ expectations.

We offer our medical coding, medical billing, and consulting services to a variety of healthcare providers, from large hospital facilities to small independent practice associations nationwide. ECLAT Health Solutions has constructed a delivery model that is a unique combination of domain expertise, operational excellence and effective use of technology. This delivery model helps us in our goal of meeting and exceeding client expectations.

ECLAT’S MISSION

To deliver the highest quality, affordable medical coding, medical billing services, and revenue cycle solutions to achieve accurate reimbursement in the quickest possible time while maintaining the most stringent HIPAA compliance.



For more information

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