



Clearinghouse Questions You Don't Want to Overlook

When considering buying or switching medical billing software for your company or practice, be sure to review the relationship between the software solution and the clearinghouse. Not having a clearinghouse or partnering with one that doesn't offer comprehensive services will negatively impact your workflow and costs. The following questions will help you learn more about the clearinghouse affiliated with the software you're considering.



Question 1 – Do you work with a clearinghouse?

RXNT response: We work with Change Healthcare to provide our clients access to one of the largest payer networks in the country.

Question 2 – What clearinghouse fees do I need to include in my budget?

RXNT's response: Our pricing is all-inclusive. There are no clearinghouse fees, which means your team has access to unlimited claims, unlimited eligibility verification, and unlimited electronic remittance advice.

Question 3 – How does the clearinghouse handle payer enrollment?

RXNT response: Payer enrollment is handled by the clearinghouse directly for RXNT clients. This means that claims, eligibility, and electronic remittance advice flow properly between payers, the clearinghouse, and your account.

Question 4 – How do I access information on claim status?

RXNT response: Simply log in to RXNT to find real-time updates on your claims. Claim updates are made available within three hours of claim submission. Our alert system makes it easy to determine exactly which claims have been rejected (including a detailed reason for rejection), have errors, and when you have ERAs ready for review.

If you are interested in learning more about [RXNT billing software](#) and our relationship with Change Healthcare, please contact a Product Specialist at **1-800-943-7968 Option 3**, email us at sales@rxnt.com.