

Never miss a review deadline

A simple way to coordinate and schedule clinical and utilization reviews.

Discussions between physicians and the insurance company reviewer are often time-consuming to coordinate and difficult to track. As a result, the risk of failing to meet Federal and State regulations increases and care is delayed for patients that need treatment ☒ potentially increasing the cost of care.

AristaMD's scheduling platform is easy-to-use and HIPAA-compliant. This powerful tool for connecting and coordinating providers, insurance company staff and physicians, and third-party reviewers empowers users to schedule prior authorization appeals and case reviews in an instant.

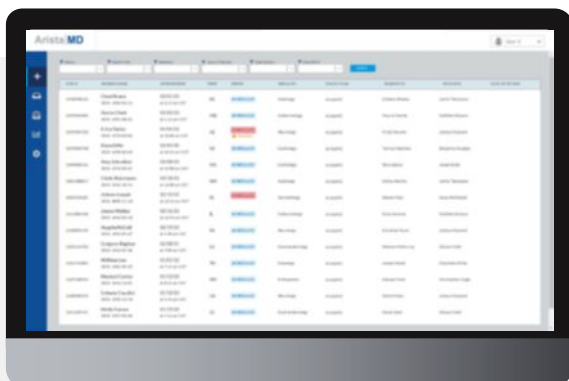
Prioritize and Assign Reviews

Confirm that initial reviews, appeals, or quality reviews are managed in an efficient and timely manner. AristaMD gives you the power to apply rules to route reviews by:

- ☒ Turnaround time constraints ☒ Federal, State, or service-level agreement (SLA)
- ☒ Case type ☒ Initial, Quality of Care, Pharmacy, etc.
- ☒ Reviewer experience, department, or education
- ☒ Specialty, sub-specialty, or state of license

SCHEDULING FOR:

- ☒ Initial Reviews
- ☒ Appeals
- ☒ Federal and State External Reviews
- ☒ Allied Reviews
- ☒ Quality of Care Reviews
- ☒ Special Investigations
- ☒ Diagnosis-Related Group Validation
- ☒ Pharmacy Reviews



Review Queueing & Routing

See and sort the reviews in-progress by date, case type, reviewer, SLA, specialty, review status, etc. Click on the case to see additional information, including the activity associated with the case.

Peer-to-Peer Challenges

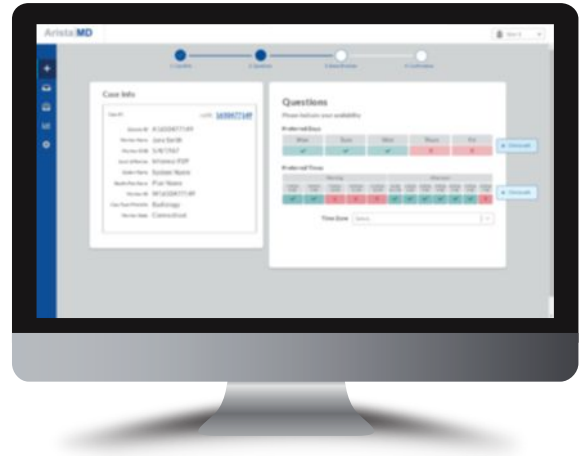
Providers responsible for patient care, or treating physicians, are often flummoxed by the limited availability of insurance company physicians for Peer-to-Peer (P2P) reviews. When multiple calls and emails are required to coordinate between the treating and reviewing physicians, a process that is designed to increase collaboration and transparency triggers frustration and delays.

Without visibility of the reviewer's schedule and the ability to select a convenient time for both physicians, the P2P review process becomes another time-consuming task required by insurance companies to support utilization management.

Manage Disputes & Appeals

To manage prior authorization disputes and expedite the claims appeals process, AristaMD:

- ❑ Compiles the calendars for all stakeholders involved in the review process.
- ❑ Displays the availability of appropriate reviewers.
- ❑ Enables the treating physician to select a date and time to discuss the patient's prior authorization, claim, or appeal.

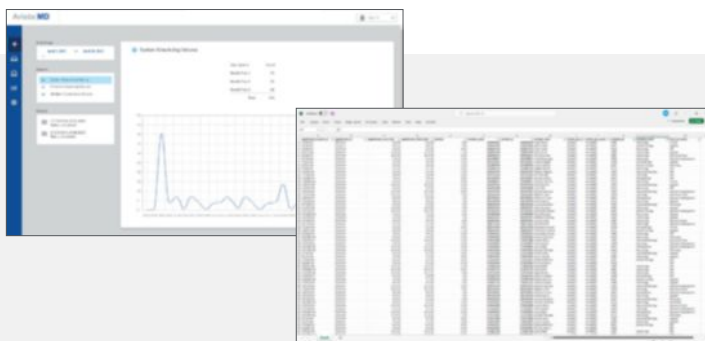


Self-Service Scheduling:

The treating physician or a staff member can indicate the days and times when the physician is available for a P2P review. Once scheduled the date and time are updated on the platform and a confirmation email is sent to both the treating and reviewing physicians.

Data to Support Performance & Compliance

Analyze and report on a variety of data to support Federal and State regulatory requirements and exceed URAC standards. Monitor the duration of the review by case type and the performance of reviewers. Identify opportunities to improve the review process and identify review types, and reviewers that under perform so that you can correct the problem to avoid business risks.



Accurate Review Metrics:

View standard reports and export detailed data ❑ duration of the review, health plan, reviewer, case type, level of review, and more.