



## Cx360 PROVIDER

- ⊙ Improve Workflow Efficiency
- ⊙ Maximize Financial Performance
- ⊙ Build a Robust Service Delivery Network
- ⊙ Improve Client Outcomes

Cx360 Provider is designed for providers of Mental Health, Addictions, Developmental Disabilities, Child Welfare and related services. Key features include client registration, scheduling, various assessments, treatment planning, order entry, billing and accounts receivables. Cx360 Provider allows customizable workflow and management of all of your enterprise needs including the collection, distribution, processing, reporting and analysis of administrative, financial, clinical and client data.

Cx360 Provider shares a common mission with its users—improve client outcomes. With increased focus on outcomes and a movement towards performance based contracting, experts agree on the need to improve the quality of face-to-face client meetings. From front office to clinical, from clinical to finance, Cx360 can transform the way you do business, capturing more information and revenue than ever before.

### **Cx360 Provider Solution Features Include:**

#### **Call History**

The Call History Module provides an efficient way to triage all incoming calls to your behavioral health organization.

#### **Profile**

A single client profile supports clients across multiple programs/levels of care, eliminating duplicate records and providing a more comprehensive picture of the client.

#### **Referrals**

The referral module provides key marketing data on referral trends and the ability to identify top referral sources.

#### **Insurance**

The insurance/funding source module allows billing staff to collect detailed information about the funding source, including the ability to track various benefit rules like co-payments, deductibles and admission fees.

#### **Appointments**

Scheduling within Cx360 is seamless and easily managed, whether centralized or managed by individual clinicians.

#### **Intake/Admission**

Cx360 provides the capabilities for clients to be transferred between levels of care or be admitted to multiple programs at the same time.

#### **Assessments**

Cx360 provides your organization with out of the box best practices on clinical documentation to improve client outcomes and documentation compliance.

#### **Diagnosis**

Based on the problems identified in the assessment, Cx360 suggests the selection of appropriate diagnosis codes and automatically translates the DSM codes to equivalent ICD9/10 codes for billing purposes.



### **Treatment Plan**

Clinicians have access to a comprehensive library of standardized problems, goals, objectives and interventions to quickly pick out and customize their client-specific treatment plan.

### **Authorization Requests**

With Cx360, your clinicians can document authorization requests online for review and submission by your utilization review staff.

### **Authorizations**

Based on the business rules defined in the System Administration module, Cx360 knows services that require prior authorizations and will ensure valid authorizations are available at the time of scheduling services or recording encounters.

### **E-Prescriptions**

Physicians will be able to view eligibility data, formulary information, medication history and pharmacy fill history quickly from within the e-Prescription module.

### **Encounters**

Clinicians can complete encounter data through Cx360 at the point of service. The encounter modules allow documentation of both billable and non-billable services.

### **Progress Notes**

Cx360 provides customizable templates for clinicians to complete their progress notes.

### **Outcomes**

Outcome measures like NOMS (National Outcome Measurement Systems), TEDS and SOMMS are integrated within Cx360 for efficient capture and analysis. Cx360 also provides benchmarking data to compare your organization's performance against national and state standards.

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### **Cx360 Provider Financial Capabilities**

With Cx360, claims are automatically generated based on data entered through any of these modules—encounter forms, scheduler, batch entry, census modules, IVR telephone entry or import of data from hardware devices like a methadone dispensing machine. Over 20 different business rules are validated during the claim creation process to ensure that only “clean claims” are sent out to insurance companies. Claims that do not meet the validations are sent to an exception log for further review. Cx360 also includes several aging reports to track your accounts receivables in real-time. Ledgers provide a financial view of all the activities pertaining to a client or payer.

**Satisfy your need for a powerful, yet easy-to-use enterprise EHR solution designed to automate all of the information and processes within your organization with Cx360 Provider.**

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