



Clinix Healthcare offers **Utilization Management** for coordinated, streamlined claims administration

ABOUT CLINIX HEALTHCARE

We are a full-service, accredited healthcare management company. Our responsiveness, clinical and managed care skills simplify the most complex benefits administration.

APEX The Clinix APEX Clinical Portal simplifies clinical data exchange and management for your staff. With secure features like 24/7 Internet access, multiple user accounts, case review submission and real-time case information and reporting.



ACCREDITED
Health Utilization
Management
Expires 12/01/2026



ACCREDITED
Independent Review
Organization: External
Expires: 01/01/2027

NEED TO SIMPLIFY YOUR HEALTHCARE MANAGEMENT?

Contact us at 800-840-6088 or info@clinixhealthcare.com

WWW.CLINIXHEALTHCARE.COM

Simplify the path to accurate, efficient patient care that also manages costs with our Utilization Management program.

We help channel employees to preferred providers and deliver more control and flexibility in your managed care program.

Clinix uses nationally recognized clinical standards in working with the patient and physician on a care plan to meet actual treatment needs. We offer:

- A national medical director and panel of specialty physician consultants
- Patient discharge planning and short-term case management to facilitate continued at-home medical care
- Detailed utilization reports customized to fit your needs
- Claims negotiation for hospital and facility fees
- Preferred vendor discounts

Our program includes healthcare education, support and referral services using these tools:

- | | |
|----------------------------|---------------------------|
| Pre-admission review | Maternity screening |
| Emergency admission review | Pre-call/re-call programs |
| Concurrent review | Second surgical opinion |
| Retrospective review | Outpatient review |
| Readmission certification | PPO channeling |
| Precertification | Early notification |
| Discharge planning | |

GET UTILIZATION REVIEW REPORTS Clinix provides a standard Final Status Report that identifies: total number of certified days; dates of service; and demographic information for the location and provider of services.

Our nurse reviewers alert payers about potentially high-cost claims and those potentially related to workers' compensation, secondary payers and subrogation.