

**maxDiscovery is different than other vendors.
See the maxDiscovery difference for yourself.**

	maxDiscovery	Vendor 'E'	Vendor 'e'
Results	<p>Locates any unknown coverage (primary, secondary, tertiary, etc) on as much as 25% of your self-pay accounts.</p> <p>How we're different: Our technology locates a higher percentage of unknown commercial and exchange plans compared to other solutions, in addition to unknown government coverage (including Medicare, Medicaid, Tricare).</p> <p>maxRTE standard best practice: Our knowledge of timely filing limits and retro approval periods delivers a higher ROI compared to other solutions.</p> <p>Enables submission of zero balance accounts to locate primary coverage to Medicaid (helpful for Medicaid take back payments)</p>	Commercial & exchange payer discovery technology capabilities limited.	Commercial & exchange payer discovery technology capabilities limited.
Retro eligibility checks	Unlimited transactions; adheres to all states and payers retro-approval periods.	Limited retro lookback periods impacted because of per click/over-usage fees.	Limited retro-eligibility checks.
Insurance Discovery Processing	<p>Flexible daily, weekly, bi-weekly, or monthly processing permitted.</p> <p>Here's how this helps you: Real-time Insurance Discovery for a single patient or batch file allows on-demand processing.</p> <p>There's no limitation on when you send the patient. We process so quickly that the patient could still be in your facility.</p>	Limited Insurance Discovery batch processing post service.	Limited Insurance Discovery batch processing post service.
Cost	<p>Flexible model offers flat monthly subscription fee with unlimited transactions and no payer caps.</p> <p>This benefits you because: You can begin submitting Insurance Discovery batch files on day one.</p> <p>Never paying a costly contingency fee offers savings of 70% or more compared to competitors with contingency-fee pricing models.</p> <p>This allows you to budget around a known expense each month.</p>	<p>Tiered pricing model based on number of transactions and double-digit contingency fees pricing model post-service.</p> <p>Lack of unlimited transactions limits your Insurance Discovery Capabilities.</p>	Contingency-based payment structure with the highest double-digit contingency fees
Implementation	<p>Free implementation.</p> <p>We begin processing transactions the day the client has a file ready to submit.</p> <p>This benefits you because: On day one, you will see the results to your cash flow. We save your staff time, reduce the need for patient follow up and limit claim denials.</p> <p>Our customer support offers an unprecedented level of service.</p>	<p>Typically 90 days or more to get started.</p> <p>Four and five digit implementation costs</p>	Estimated 30 days or longer to get started.
Customized Payer Plan mapping	Payer mapping ensures clients have correct billing information to limit denials. Properly identifies Medicaid HMO and traditional plans, Medicare, Medicare HMO, correct commercial mapping, and exchange plan payer mapping.	Unclear payer plan mapping, which leads to denials.	Unknown