Apple Billing and Credentialing
Medical Billing Service

	Basic 3%	Enhanced 4%	Premium 5% (MOST POPULAR)
Daily claim submission	✓	✓	✓
Posting insurance remittances/payments	✓	✓	✓
Handling claim denials	✓	✓	✓
Tracking and following up on unpaid claims	✓	✓	✓
Resolving claim denials by calling the insurance	✓	✓	✓
Sending bulk patient statements every 30 days	✓	✓	✓
Monthly financial report	✓	✓	✓
Year-end practice performance analysis report	✓	✓	✓
Sending instant patient statements		✓	✓
Bi-weekly AR report		✓	✓
Weekly AR report			✓
Uploading claim batch files to ACO		✓	✓
Mailing medical records to payers, attorneys, and workers' comp		✓	✓
Mailing HCFA paper claim forms		✓	✓
Switching from VCC to paper checks/EFTs		✓	✓
Bi-annual reconciliation of billed vs contracted amounts		✓	✓
Unapplied patient overpayment report, every six months		✓	✓
Posting patient remittances/payments		✓	✓

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	Basic 3%	Enhanced 4%	Premium 5% (MOST POPULAR)
Posting inpatient hospital & other facility charges		✓	✓
Quarterly zoom client meetings		✓	✓
Monthly prior authorization/referral report		✓	✓
Monthly Zoom meetings with a dedicated practice manager.		✓	✓
Monthly prior authorization/referral report		✓	✓
Enroll in ERA/EFT for eligible payers		✓	✓
Credentialing service:Included with discounted price		✓	✓
Downloading patient face sheets from hospital systems.			✓
Checking uninsured status across various portals			✓
Customized reports			✓
Managing inbound and outbound patient calls			✓
Submit and follow up on patient collections			✓
Submitting medical records post-payment			✓
Retrieving records from the hospital portal			✓
Obtaining prior authorization numbers from hospitals			✓
Checking the facility portal for the preauthorization number			✓
Prepare medical record invoice for post-paid claims			✓
Appeal claims and hearing scheduling for payer denials			✓
Mailing appeal letters with tracking number			✓

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	Basic 3%	Enhanced 4%	Premium 5%
Setting up insurance portals for practice and billing			✓
Sending itemized bills to attorneys for post-paid claims			✓
Contacting dialysis centers for provider lock-in verification			✓
Training for front office staff			✓
Free coding audit for three months post-signing			✓
Complimentary practice consultation available anytime			✓
Managing inbound and outbound patient calls			✓
Complete practice management system (PMS) implementation			✓
Managing returned patient statements (RTS)			✓
Collections payment monitoring and posting			✓
Collecting the patient balances directly in the PMS			✓
Provider's CAQH profile up to date			✓
Reattesting the provider's CAQH profile if needed as per the payer's requirement			✓
Clearing house setup			✓
Medicaid CMO revalidation			✓
Medicare revalidation			✓
Payer contract negotiation Attorney reference			✓
PECOS enrollment			✓
Checking allowed rate with the payer contract			✓

MOST POPULAR