

5 Claims Management Software Must-Haves

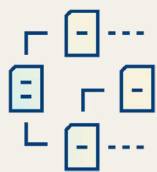
Managing claims shouldn't mean juggling logins, workflow bottlenecks, and waiting on delayed payments. Too many systems and too much manual work lead to claims denials that put revenue at risk.

These are the five non-negotiables when looking for claims management software.



1 | All payers, one place, one login

Centralize every payer with single sign-in access. Manage claims for *all* payers, both commercial and government, with one login and **stop wasting time with multiple systems**.



2 | Automation that simplifies workflows

Speed up reimbursements by automating secondary claims submissions and simplifying claims management with faster, smoother steps.



3 | Clear, actionable data

Spot denial trends and workflow bottlenecks by using analytics to **turn claims data into action** – all visualized in easy-to-read scorecards that keep revenue moving.



4 | End-to-end visibility

Gain clarity at every stage – eligibility, claims, remits, and reimbursement. **Use one integrated solution** to see your entire revenue cycle, precisely forecast cashflow, and reduce denials.



5 | A vendor you can count on

Resolve issues quickly with a dedicated partner. With Inovalon, you get responsive service and ongoing support backed by decades of Medicare and denial management expertise. Our claims management solutions process 3 billion claims and remits annually.¹

Confidence in Every Claim

Reduce denials, maximize reimbursements, and keep your revenue flowing with a fully integrated solution. With fewer delays and higher first-pass success rates, an effective and efficient all-claims management workflow lets you focus on what matters most.

[Request a Demo](#)

¹ Internal reporting, Inovalon, February 2025.