



Empowering Our Providers - Elevating Our Communities.

About HelixOne Solutions

HelixOne Solutions is backed by medical billing experts with years of experience in medical billing and healthcare operations, dedicated to delivering a better, more transparent customer experience.

Our Mission

To deliver exceptional medical billing services that enhance operational efficiency for healthcare providers, while contributing to the well-being of our communities by funding impactful local initiatives.



Globally Driven. Locally Invested.

At HelixOne Solutions, our partnership with healthcare providers is at the heart of everything we do, but our commitment goes beyond business.

Social Impact

We believe in making a meaningful difference in the communities in which we operate.

Together with our provider partners, we strive to deliver exceptional billing outcomes while contributing to something bigger.



Why Choose HelixOne Solutions?



Reliable Accuracy

Minimizing errors and maximizing successful claims through meticulous attention to detail.

Full Compliance

Adhering strictly to all regulatory requirements, including HIPAA, to ensure data security and integrity.

Complete Transparency

Providing clear, accessible reporting and open communication every step of the way.

Timely Submissions

Ensuring prompt processing of claims to accelerate your cash flow and reduce delays.

Proactive Denial Management

Identifying and resolving claim denials to recover maximum revenue efficiently.

Flexible Reporting

Providing detailed summary reports as per your requirements.

Our Comprehensive Services

We offer a full spectrum of revenue cycle management services designed to meet the unique needs of your practice.



End-to-End Medical Billing

Complete management from claim creation to final payment.



Eligibility & Benefits Verification

Confirming patient insurance details to prevent potential denials.



Prior Authorization

Securing necessary approvals for treatments and procedures.



Coding Expertise

Accurate ICD-10, CPT, and HCPCS coding for all services.



Claims Submission & Follow-up

Efficient submission and persistent tracking of all claims.



Denial Management

Strategic resolution of denied claims to ensure reimbursement.



AR Recovery

Aggressive pursuit of outstanding accounts receivables.



Payment Posting & Reconciliation

Accurate recording and reconciliation of all payments.



Reporting & Analytics

Detailed monthly and weekly performance reports, or as needed.

Our Streamlined Process Workflow

Experience a seamless revenue cycle with our efficient, step-by-step approach.



Patient Check-in & Data Capture

Accurate collection of patient and insurance information.



Medical Coding

Translating services into precise codes for billing.



Claims Submission

Electronic submission of claims to payers.



Payment Posting & Reconciliation

Recording payments and adjustments, identifying discrepancies.



Denial Management & AR Follow-up

Investigating and appealing denied claims, pursuing outstanding balances.



Performance Reporting

Providing regular insights into your practice's financial health.

Secure. Compliant.

Data protection and compliance are at the forefront of our business.

We are fully compliant with all Health Insurance Portability and Accountability Act (HIPAA) and Health Information Technology for Economic and Clinical Health Act (HITECH) regulations, ensuring the utmost privacy and security for all patient data.

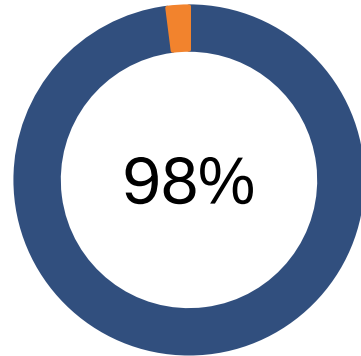
- ✓ Secure, encrypted access at all times
- ✓ Storing and handling of PHI appropriately
- ✓ Private, secure workspaces
- ✓ Ensuring “minimum necessary” access rules
- ✓ Breach awareness and reporting readiness
- ✓ Audit and logging requirements
- ✓ Following approved technology and data-handling practices



HIPAA & HITECH
COMPLIANT

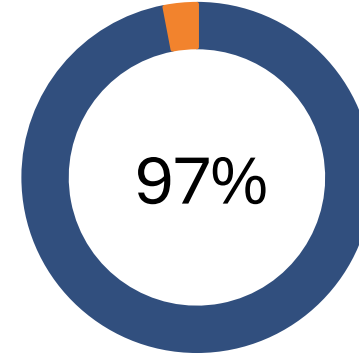
Measurable Success

We are committed to delivering measurable results that positively impact your practice's financial outcomes.



Clean Claims Rate

Our average success rate for claims submitted on the first pass.



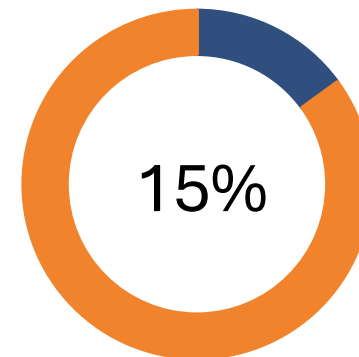
Collection Rate

Percentage of collectible revenue successfully recovered.



Average Turnaround Time

From service date to claim submission.



Denial Reduction

Average decrease in claim denials with a goal to make the practice denial-free.

Flexible Pricing Models

We offer multiple pricing structures to suit your practice's specific needs and budget.



Percentage-Based

A percentage of collected revenue. Ideal for practices with fluctuating claim volumes.

- Scales with your success
- Lower upfront costs
- Predictable cost of service as a percentage of revenue



Fixed-Fee

A predictable monthly fee per provider or claim. Suitable for stable claim volumes.

- Budget predictability
- Clear cost structure
- Aligned incentives
- Encourages operational efficiency

Contact Us

Ready to optimize your revenue cycle? Reach out to us for a personalized consultation:



contact@helixonesolutions.com



www.helixonesolutions.com



Helix One

SOLUTIONS



HIPAA & HITECH



Administrative Safeguards

- Annual HIPAA & HITECH training for all staff (U.S. & Pakistan)
- Annual risk assessments
- Business Associate Agreements with all partners
- Documented PHI handling policies



Physical Safeguards

- Private, access-controlled workspaces
- Clean-desk & screen-lock enforcement
- No printing/local storage of PHI



Technical Safeguards

- AES-256 encryption at rest, TLS 1.2+ in transit
- Multi-Factor Authentication (MFA)
- Secure VPN/RDP for offshore access
- Continuous audit logging



Breach Response

- 1-hour internal reporting requirement
- Notification to practices within 10 business days



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