The Most Comprehensive, Unified EMR In The Industry
We know how hard it is to choose an EMR / Practice Management System. This brochure provides only a brief overview of Clinic Controller. We encourage you to schedule an online demonstration where you can sit and spend some time learning everything the system and A2C Medical has to offer your practice.

To schedule an online demonstration contact Adam Aitken. Adam is a partner and one of the founders of A2C Medical.

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Why Clinic Controller?

Completely unified system to enable you to manage your entire practice: EMR, Scheduling, Billing, and Reporting.

Clinic Controller can be tailored to your specific, unique needs.

What sets Clinic Controller apart from other systems?

Industry-leading Support

We stand behind our customers’ needs by offering thorough, unrushed support to help you find solutions for your unique situation. Our staff cares, is extremely knowledgeable, and will take the time to help you.

Designed specifically for Physical, Occupational, and Speech-Language Pathology.

One cohesive system, instead of parts from various vendors forced to work together.

Customizable, to fit your unique needs

We believe that software should adapt to you, rather than you adapting to your software.

Clinic Controller offers depth; it is much more than a basic EMR.

Affordability

Features Include

- Customizable Schedule
  - Personalized layouts
  - Color coding
  - At-a-glance patient info
  - At-a-glance patient balance status

- Appointment Reminders
  - Reduce cancellations/no-shows
  - English and Spanish

- Customizable Documentation
  - Document your way

- Electronic Flow Sheet
  - Generates charges automatically to prevent errors and save time
  - Generates Objective text of note to save time
  - Enforces Compliance

- Claim-based Reporting
  - Eases the burden of selecting codes and modifiers
  - Automatic G-Code tracking to eliminate missed reporting

- Charge Validations
  - Eliminate charging errors through automated rules
  - Customizable for your unique carrier requirements

- Outcome Reporting
  - Track effectiveness of treatment through concise reporting

- Industry-Leading Management Reports
  - Customizable to answer your specific questions
  - Therapist, Clinic, Marketing productivity
  - Collections effectiveness tracking

- Integrated Faxing Capabilities
  - Inbound and Outbound Faxing
  - Full HIPAA Logging

- Server or Cloud Based Deployment

- HL7 Interfacing Available

MANAGE YOUR ENTIRE PRACTICE
Intuitive and Easy-to-Use

Our notes look like a paper but have all the features and intelligence gained by going electronic.

100% Customizable

Comes with a full range of templates but can be made to look and work the way you need. Add unique tests, frequently-used phrases, goals and more into your note templates, or create your own note from scratch.

Summaries

Various summaries are created from the therapist note, such as a concise Plan of Care, or a Full Evaluation showing only information completed by the therapist. These summaries are 100% customizable, so you don't have to change the look of what your Doctors are used to receiving.

Stay Informed

Keeps therapist informed of what visits need charges, notes and when functional reporting is due.

Save Time

Industry-changing electronic flow sheet generates charges and automatically generates the Objective portion of the daily note.

Compliance

No need to calculate the 8-minute rule or be aware of coding specifics for various carriers. Clinic Controller converts time to units based on the 8-minute rule or other industry-specific timing rules. Be assured that your charges are supported by your documentation.

Real Time

The flow sheet is a real-time document that allows for more than one user to access it at once. If an aid or technician checks off an item as being completed, it is immediately updated on the therapist’s screen.

Multi-View

Quickly jump back and forth between different notes for different patients.
**Personalized Layouts**
Vertical (traditional) or horizontal (timeline) views.
Tailor layouts for the whole clinic, or allow each person to create their own.
Control a multitude of items, such as the way patient names appear, order of therapists, etc.

**Easy Patient Check-In**
Real-time, so everyone can see who has arrived.
Visit immediately appears in the therapist's list as needing charges.

**Color-Coding for Appointments and Working Hours**
Easily distinguish and report on Treating hours, Lunch hours, Meetings, etc.
Quickly view various appointments such as Eval, Re-eval, Pool, etc.

**At-a-glance Patient Info**
Information panel shows Case information, including Referring Doctor and Insurance.

**At-a-glance Balance Status**
Patient balance status indicated on the appointment and allows payments to be entered directly from the Schedule.

**Multiple-Clinic Friendly**
Switch between clinics seamlessly, and schedule therapists and patients at multiple clinics.

**Alerts**
Fully-customizable rules that will display information as the patient is being checked-in or scheduled.
Range of rules already in place including visit limit tracking, expiring prescriptions and upcoming Doctor appointments.

**Waiting List**
Clinic Controller searches to find a suitable appointment time for patients on your Waiting List.

**Special Flags**
Add case and visit symbols to visits for important flags such as patient allergies, special paperwork, etc.
Italicized names appear to indicate the patient has no future visits scheduled.
Claims
Rigorous claim scrubbing enables you to view and fix claim errors quickly before claims are ever sent.

Complete, searchable history of all claims.

Regenerate the original claim exactly as it was sent, or rebill with updated visit info.

Prove timely filing through concise reports showing what was sent and when.

Fully 5010-compliant range of formats: CMS1500, CMS1450, ANSI 837P, ANSI 837I

Posting
Therapy-focused handling of money, based on the real-life flow in outpatient therapy clinics.

Easy handling of money that cannot be applied immediately to a particular visit, eliminating the need for fake accounts or bogus entries.

Quick application of patient payments after the carriers pay, reducing the number of times the patient money has to be touched.

Electronic Remittance Advice (ERA / ANSI 835)
Load ERAs directly into Clinic Controller for quick posting and increased accuracy. Retain all the control of a paper EOB during the posting process.

Creates a link between the applied money and the 835, so the 835 can be viewed immediately when looking at the patient's account.

Facilitates secondary claims being sent electronically, eliminating the need for claims being dropped to paper with EOBs attached.

Patient Ledger
A wealth of at-a-glance account and visit information, including where the patient was seen and who they saw, when the patient's last statement was sent, what diagnoses were attached to the charges and much more.

Know immediately where each visit is in the billing cycle.

Filter out visits at a particular place in the billing cycle for simple viewing.

Easily see what payment a transaction was applied from, for paper EOB retrieval.
Designed for Reporting
Clinic Controller was designed with accurate, robust, management-oriented reporting in mind.

Comprehensive reports to cover every aspect of your business
Therapist and Clinic Productivity

Collections score card to assess collections efforts

AR reports with multiple viewpoints

Reimbursement tracking on individual visits, including a breakout of patient and carrier portion.

Referral tracking, including conversions

Visits tracking

Contract management

Flexible
Reporting system is flexible and can be 100% tailored to meet your specific needs.

More then basic reports, but answers to a wide range of questions
What did I get paid per visit for visits treated in a given time period, by therapist, by clinic, by referring doctor and/or carrier?

We are looking to expand; how do we know which doctor is referring from which zip code?

Which insurance carriers are being referred from which doctors, and how much revenue are we generating per referring doctor?

How well is our billing department doing at collecting? I’m worried I’m not getting the full picture with my standard AR/aging report.

Which patients have disappeared off our schedule and need to be followed up?

How can I make sure my patient’s next Functional Limitation Report (FLR/G-code) doesn’t fall on a visit scheduled with the wrong provider, such as a PTA?

Different Styles
Different report styles for different needs offers increased flexibility, from reports that can be worked to reports designed for management overviews.