

INGENIX[®]

Transaction
Director





The efficiency and accuracy of health information exchange directly impacts the delivery of quality health care to a patient. Enhancing payer business processes enhances health care. The good news is that the technology to improve those processes exists today.

Challenges

Each and every claim you receive matters. Every transaction is significant. The success of your business depends on the accuracy of the information contained in every transaction you exchange, and on the efficiency with which the exchange occurs. Each transaction also involves a health care provider whose ability to continue the effective practice of medicine is dependent upon his or her ability to be reimbursed in a timely and accurate manner.

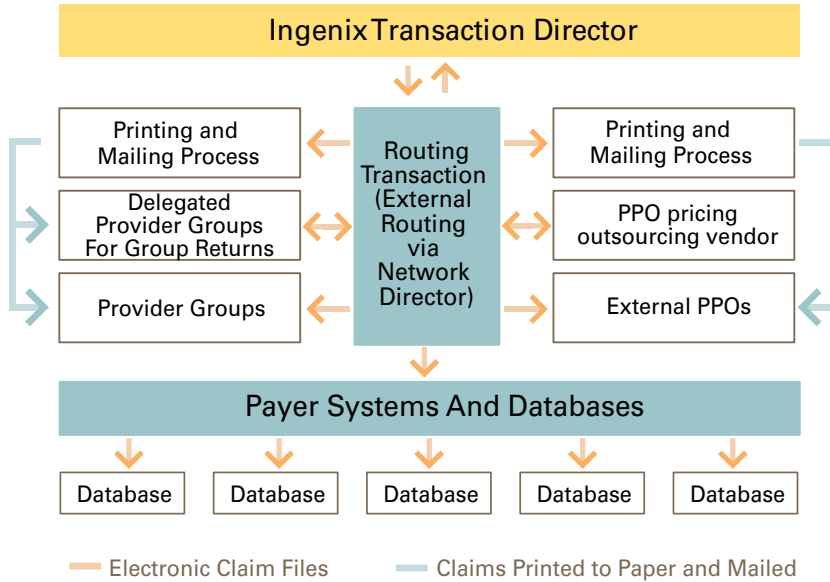
But there are problems. Despite the move toward electronic claims submission, and the standards that exist for those transactions, many providers remain locked into systems that can only generate paper, or they can only generate a proprietary (often non-compliant) format.

Even if they do produce some form of electronic document, it very likely does not contain all of the information you need to process and pay it. Often, even the data they do send is simply wrong. In those environments a provider organization may not have the resources to change and few payers have the resources to do the handholding that may be required.

Given the business system problems that many providers face, it is no surprise that payers wind up with claims that hit their front-end system with a wide variety of errors. Sometimes they are duplicates that should have been filtered out earlier. Sometimes they may even be claims that belong to another payer. When even the smallest problems hit the adjudication system, it costs you money.

So how do these issues resolve? How do clean and complete claims according to your definitions get from provider to payer with minimum human intervention, minimum expense and maximum quality? The answers to adjudication problems are efficient and cost-effective pre-adjudication and total transaction management. Ingenix Transaction Director meets those requirements.

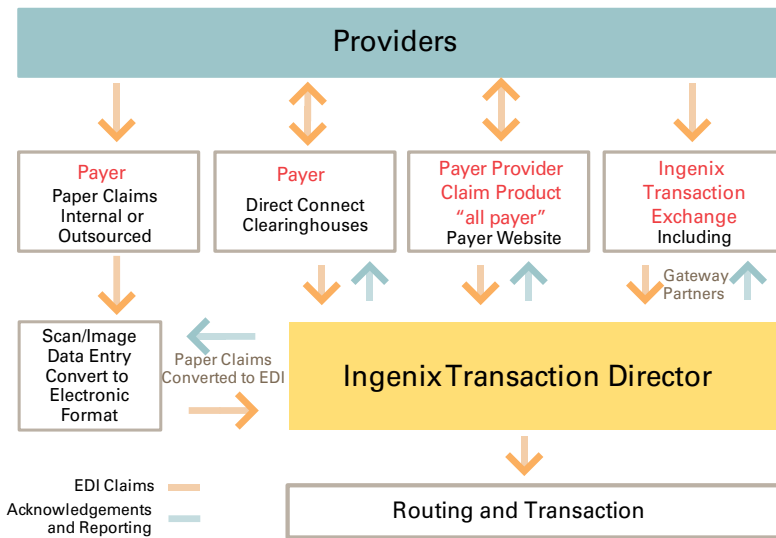
PAYER PAPER AND EDI CLAIM FLOW FROM TRANSACTION DIRECTOR



1. Transaction Director Service

Outsource your pre-adjudication and transaction management. Increase auto-adjudication rates through clean claims built to your specific rules and edits.

PAYER PAPER AND EDI CLAIM FLOW TO TRANSACTION DIRECTOR



2. Transaction Director Appliance

Achieve total user control over your inbound and outbound production transaction data stream to ensure ultimate data quality.

Solutions

Ingenix Transaction Director provides you with options. You may choose our service model to outsource your entire front-tend transaction management to Ingenix. Or you may prefer our application model bringing the server and the control of the process into your data center.

Service Model

Simply provide us with your requirements and we will deliver unique and clean claims to your system. We match against your provider and member databases to ensure you receive only those claims that are yours and we eliminate duplicate claims before you have to deal with them. We build any edits into the system you need—HIPAA, code sets, your payer-specific edits—so the transactions you receive already conform to your specific business requirements. We handle rejections, acknowledgements, internal and external routing, and provide you with extensive and customizable reporting detailing the process, claim-by-claim and step-by-step.

Application Model

Business needs may lead you to utilize Transaction Director through our application solution. Choose this option and you will have ultimate, in-house control over your entire transaction management process. Accessed through an intuitive, browser-based interface, the Transaction Director application sits directly in your data stream (inbound and outbound), continuously monitoring your transactions according to your requirements, remediating data problems according to your rules and policies, routing clean claims into adjudication and problem transactions anywhere you specify—based on your business needs. The Transaction Director application can validate for HIPAA, all relevant code sets, your payer-specific edits and it can check against any database you need. Customizable reporting for your insight and decision-making, as well as reports automatically sent to your submitters round out this product's unparalleled functionality.

Results

It is axiomatic in health care EDI that clean claims get paid, problem claims don't (at least not without a lot of expensive intervention). When you put Ingenix Transaction Director to work in your data stream, either through the service model, the appliance model or a combination, you will see improvement in many areas: improved auto-adjudication rates; reduced first-pass rejections; fewer transactions lost to the "black hole;" and reduced processing, intermediary and connection costs. In addition you will have significantly better process/data visibility with which to drive continual quality improvement for you and your submitters.

Features

- Improve auto-adjudication rates, through claims accuracy and comprehensive pre-adjudication.
- Reduce processing, intermediary and connection costs through increased system efficiencies.
- Increase process/data visibility to drive continual quality improvement for you and your submitters.

Ingenix | Intelligence for Health Care | www.ingenix.com

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