

INGENIX®

Transaction Exchange—Providers Premium Transaction Suite

Ingenix Premium Transaction Suite gives you reliable real-time access to the critical information you need, freeing you to focus on your primary mission: delivering quality health care

Executive Summary

Ingenix Premium Transaction Suite enhances your office's ability to electronically submit HIPAA-compliant claims via the Ingenix Claims Exchange to more than 1,600 insurance companies nationwide while gaining access to powerful automation tools that can transform your office into a state-of-the-art practice. The Premium Transaction Suite includes claim tracking and real-time transactions that allow providers to determine patient benefits and claim status within seconds.

- Early identification of errors and extensive web-based tracking of all claims from time of submission
- Instant access to real-time data for complete patient eligibility coverage
- Instant access to payment information through real-time claim status

Overview

Perfect for physician settings, the Premium Transaction Suite is a low-cost solution that instantly connects you to an extensive group of commercial and governmental payers. Access a wealth of real-time patient and claims information to improve efficiency and easily track claims.

Online Eligibility

Online Eligibility is a fast and reliable validation of patient eligibility information that is retrieved within seconds of your query. Not only will you learn if a patient is eligible, but you also will see additional information such as primary care provider, co-pay, and deductible information.

Online Referrals and Authorizations

Online Referrals and Authorizations eliminate the need to spend hours on the phone with insurance companies in order to obtain referral and authorization responses. You can conduct referrals and pre-certifications quickly and effortlessly, as well as check on the status of your queries.

Real-time Claim Status

Real-time Claim Status provides instant and continuous claim status information on submitted claims directly from the payer's adjudication system. You no longer have to wonder where a claim is within the payer's adjudication process once it leaves your office.

Eligibility Result

Patient Joe Public is Active for AAAHealth

Patient Information			
Name	Sex	Birthdate	Effective Date
JOE PUBLIC		01-01-1970	
Address			
7899 LEXINGTON DRIVE		COLORADO SPRINGS, CO. 80920	

Insured Information			
Name	Sex	Birthdate	
JANET PUBLIC			
Address			
7899 LEXINGTON DRIVE		COLORADO SPRINGS, CO. 80920	
Member ID	Group/Policy Number		
123456789	78654321		

Benefit Details		
Benefit	Coverage	
Co-Payment - Professional (Physician)		
In Network	Period	Amount
Yes		\$25.00
Plan Description		
CT. GENERAL LIFE INSURANCE COMPANY		

Benefit			Coverage
Deductible - Hospital - Inpatient			
In Network	Period	Individual Amount	
Yes		\$250.00	
Plan Description			
CT. GENERAL LIFE INSURANCE COMPANY			

ECT Search Result

ECT Search Results				
Results 1 to 2 of 2				
Results # 1				
Claim ID	Provider Name	Tax ID	Payer	
1000001	John Smith	987654321	UMC	
12345678	Jane Public	987654321	UMC	
Results # 2				
Claim ID	Provider Name	Tax ID	Payer	
1000002	John Smith	987654321	UMC	
12345678	Jane Public	987654321	UMC	

Electronic Claim Tracking

No matter how you send claims to Ingenix, Electronic Claim Tracking (ECT) allows you to query or “track” each claim or group of claims submitted. ECT provides fast access to claim details and all tracking information generated after you submit your claims. ECT is a web-based query of your electronic and paper claims, allowing a quick search for any claim and prompt receipt by payers—greatly reducing research time.

Secondary Claim Processing

Secondary Claim Processing is available in conjunction with our Electronic Claims Tracking feature. Data from the primary claims is used to create the secondary claim. This allows you to file secondary claims electronically, reducing billing costs and speeding payment.

Key Features ↙

Ingenix Premium Transaction Suite delivers state-of-the-art tools that put you in control of your practice so that you can quickly conduct accurate business queries that are vital to your business and to your patients, along with the ability to electronically submit HIPAA-compliant claims to over 1,600 managed care companies via the Ingenix Claims Exchange. Online Eligibility, Online Referrals and Authorizations, Real-time Claim Status, Electronic Claim Tracking, and Electronic Secondary Claims offer your office the following benefits:

Online Eligibility

- Direct access to up-to-date payer eligibility data
- Eligibility responses received within seconds
- Up-front administration of co-pays and deductibles
- Phone time and administrative costs significantly reduced or eliminated

Online Referrals and Authorizations

- Easily obtain referrals and pre-certifications online
- Eliminate phone time and administrative costs
- Ensure reimbursement on performed services

Real-time Claim Status

- Instant real-time response accessed via the Internet with multiple payers
- Shorten the revenue cycle for rejected claims
- Easily print or view the results on your screen

Electronic Claim Tracking

- Simplified tracking of claim submissions
- Track all claims online using quick or advanced search options
- Easily print or view the results on your screen
- Greatly reduce follow-up time and phone work tracking unpaid claims

Secondary Claim Processing

- Streamlined revenue cycle management
- Eliminate paper processing for secondary claims
- Improved staff productivity & billing accuracy
- Faster reimbursement
- Automation saves time & money

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

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