

eClaim Status Inquiry



Manage A/R with Information Rich Claim Status Transactions

One of the most effective ways to reduce outstanding A/R is to focus attention to claims requiring additional effort while eliminating effort applied to claims the payer has scheduled to pay. eClaim Status Transactions provides managers the tools to improve workflow efficiency by focusing work on an “exception” basis, or to only follow up on claims requiring manual intervention. Working claims on an exception basis reduces outstanding A/R and claim resolution time. It also allows staff to be more effectively deployed toward working denied and pending claims, rather than following up on paid and resolved claims.

By combining standard 277 EDI transactions with web-data extraction techniques, Ovation creates actionable claim status transactions with specific details in a user-friendly format. Unlike standard 277 EDI claim status transactions, eCSI provides additional content from payer websites that guides users to take specific steps to quickly resolve pending or denied claims. eCSI brings significant benefits through the creation of an exception based workflows based on smart transactions. eCSI eliminates the necessity of checking payer portals or remittances. eCSI provides the specific detail associated with the denial so that the appropriate and effective action can be taken immediately.

eCSI Delivers Significant Benefits:

- Reduces A/R days
- Increases cash flow
- Reallocate health system resources denied and problem claims
- Increases staff productivity
- Eliminate 80-90% of manual touches

Transaction Services

Ovation eCSI obtains claim status directly from payers and delivers proprietary payer payment and denial information directly to follow-up systems. Outstanding claims are queried one day post-billing and the process is repeated on all accounts with an outstanding balance to ensure all accounts requiring collector intervention are identified and quickly resolved. eCSI works with all collection and patient accounting systems and drives efficiency and growth in your bottom line.

Dynamic Reporting

eCSI creates a variety of web reports with many options to customize and dynamically sort and filter the results. Management reports identify groups of claims requiring further reviews and can be generated and grouped based on claim balance, aging, payer, collector or denial reasons. The extensive reporting enables efficient management of high priority accounts in the collection process.

Use eCSI with eCSI Workflow

Adopting an exception-based workflow will have a dramatic impact on your financial outcomes. Prioritized work queues will ensure that accounts are prioritized to work aged and high balances most efficiently. Ovation's eCSI transactions can directly populate eCSI Workflow to increase productivity, reduce manual error, and maximize your clients' ROI.

Work Smart and for less hours

- Intuitive design – All relevant information is available to collectors in just one click
- Integration with host patient accounting system for seamless workflow
- Prior comments are displayed, enabling staff to easily view the last action taken on the account
- Claim adjudication information is shown, such as, payment amount, check number, posting dates, patient balance due, and denial/suspension reason

Real-time Integration

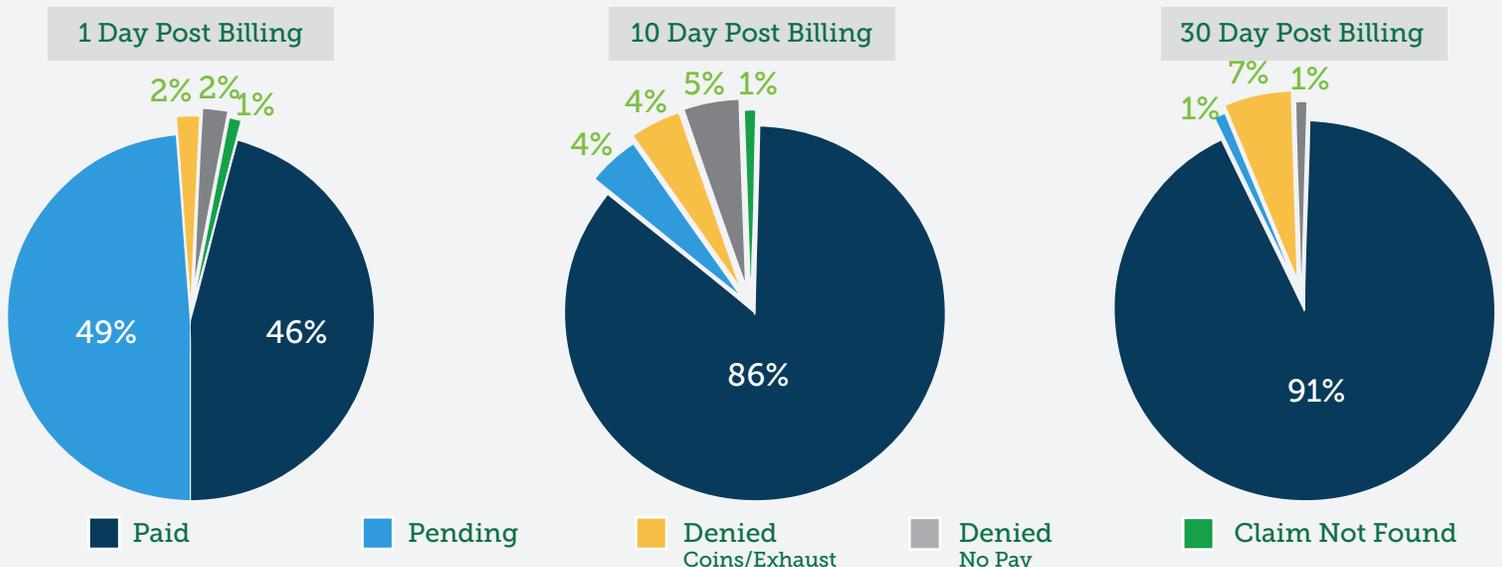
- Direct to payer connectivity retrieves accurate and up-to-date claim status
- Claim and charge level detail eliminates necessity of checking payer portals

Managing made easy

- Standard and customizable reports enable pin-point management of claims requiring special attention

Improved workflow for follow-up staff

- Exception-based work lists prioritize accounts for focused review



Find out more: Visit www.ovationrcs.com or call 412-432-5697 or contact JBurnett@ovationrcs.com