



Claimsure

- » Reduces claim collation time
- » Improves claim visibility and reporting
- » Reduces debtor days

Up to 30% of healthcare facilities' private revenue is outstanding at any one time. This is due to a complicated, manual claims process which can involve up to seven different departments.

Furthermore, it is estimated that each claim submission takes approximately 30 minutes to process. This results in a major administrative headache and significantly impacts upon hospitals' cash-flow.

Slainte Claimsure

Claimsure is a claim management system which electronically manages the lifecycle of a hospital or clinic's health insurance claim. It reduces the number of pending and rejected claims, processing overheads and re submission rates. It also significantly reduces debtor days.

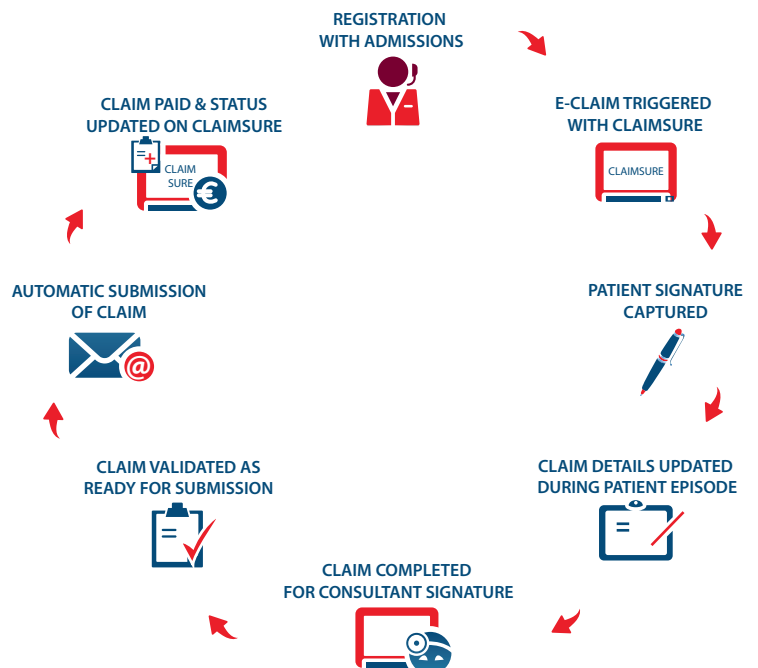
Claimsure enables your administrative and clinical staff to put their skills to better use, safe in the knowledge that your claims' cycle is under control.

Upon admission, information from the Hospital Information System (HIS) automatically creates and populates the patient's claim record. Hard copy documents are scanned and attached to the claim with minimal user intervention. Claims may then be submitted electronically by Claimsure. Claimsure automatically updates the claim status throughout the process.

Key benefits

- » Reduces claims processing overhead time by over 30%
- » Improves visibility and reporting
- » Reduces debtor days

Claimsure process




Features

- » **Shared service model** supported
- » **Phased implementation** supported
- » **Automated**
 - Conversion of claims when ready for submission
 - Information is populated from existing hospital systems
 - One touch scan with automatic indexing and renaming
- » **Attachments** - can attach up to 5 documents at a time
- » **Web based** - remote access available
- » **User permissions** - can be set according to requirements
- » **Integration** - Claimsure supports HL7, flatfile, XML, SQL, View and other interfacing options
- » **Electronic:**
 - Signature from remote locations worldwide
 - Submission and updates
- » **Menus** - intelligent drop-down menus for online claim form completion, offering consultants a favourites menu for frequently used codes
- » **Search** - comprehensive search criteria
- » **Reports and alerts**
 - Checklist to ensure all relevant files are attached
 - Integrated reporting function using Crystal Reports
 - Easy assessment of claims' readiness for submission
 - Identifies bottlenecks in submission process
 - Follows-up unpaid submitted claims (pending, rejected, part-paid or no response)
- » **Code maintenance** supports cross referencing to ICD-10 and SNOMED CT clinical codes
- » **Secure** - hospital has full control over security

Benefits: Hospital

- » **Significant cost savings**
 - Shared service model means hospitals can share claims management costs
 - Phased approach resulting in savings after each phase
 - Quick ROI - in excess of 100%
 - Reduction in incomplete claims of more than 10%
 - Some claim types can be completely automated
 - Paper removed from the process
- » **Time savings**
 - Reduces errors due to increased validation
 - Minimises insurer rejection of incomplete claims
 - Headcount savings of up to 75% meaning more time available for staff to follow up unpaid or complex claims
 - Insurance codes cross referenced to 90% accuracy
- » **Improved cash flow** - debtor days reduced by up to 50%

Benefits: Consultant

- » **Convenience**
 - Claims can be viewed and electronically signed from anywhere in the world
 - Secure portal to view clinical information from any location
 - Facilitates pre-completion of claim ready for Consultant approval
- » **Time and cost savings** - reduction in time spent on claims by secretary
- » **Automatic invoicing** facility supported
-  **Technical details**
 - » Platform: SQL, C#, Microsoft .NET, OS supported, XP, Vista
 - » Browser: IE6, IE7 (others as necessary)
 - » HL7/XML/Flatfile/SQL interfaces supported

