

"I really appreciate how quickly you have been able to turn things around for us"

Portland Area Clinic
Manager

Submit your claims electronically and edit pended claims on-line using a very user friendly web based solution:

- Get paid faster.
- Correct pended claims in seconds without have to print payer rejection reports and resend.
- No hassle setup and no software to install.

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Electronic Claims

Why wait 30 days to see if your claim is going to be paid? Why have employees spend days on the phone to find out what is wrong? Why waste hours of time reviewing payer rejection reports that are illegible and complicated to understand? Why does the American Medical Association report the cost of paper claims processing between \$6-\$12 dollars per claim? On Average a provider sends out 250 claims per month. Why do 50% of rejected claim go unpaid?

Payer Connection understands why and makes it easy to take back control of your claims process by connecting you directly to payers and the information you need on-line 24 hours a day.

You'll notice the impact of our service immediately

Clean Claims – Client, HIPAA, and Payer Specific Edits scrub your claims prior to delivery to the Payer.

Faster Reimbursement – With an all-payer solution we increase the % of claims being sent electronically with payment remittance in 14 days.

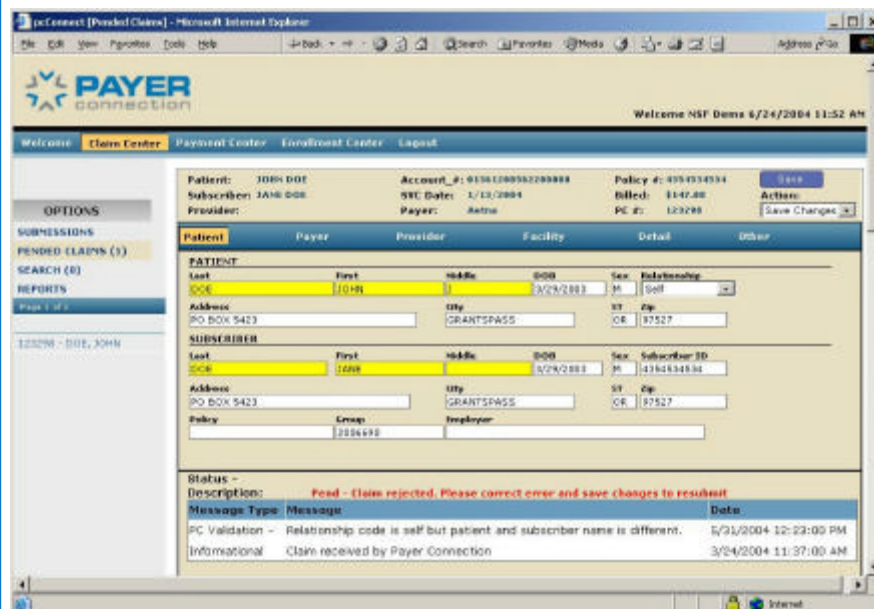
Increased Cash Flow – With less rejections and accountability for submissions

Reduce Overhead – Less time is needed to handle claims and our workflow management application points you towards problem claims.

Benefits

- No Software to Install
- Managed Service for Tracking Errors
- On-Line editing of Pended claims
- Simple setup and easy to use

View of Claim Editing Screen



The screenshot shows a web browser window displaying the Payer Connection Claim Center interface. The page title is "Payer Connection [Pended Claims] - Microsoft Internet Explorer". The interface includes a navigation menu with "Welcome", "Claim Center", "Payment Center", "Environment Center", and "Logout". The main content area displays patient information for JOHN DOE, including Account #, Policy #, and Billing details. Below this, there are sections for "PATIENT" and "SUBSCRIBER" information, each with fields for Last Name, First Name, Middle Name, DOB, Sex, and Relationship. The "PATIENT" section shows a "Self" relationship, while the "SUBSCRIBER" section shows a "Self" relationship. At the bottom, there is a "Status" section with a "Description" of a rejected claim and a "Message" box containing a validation error: "PC Validation - Relationship code is self but patient and subscriber name is different." The message also includes a date and time stamp: "5/31/2004 12:23:09 PM".

Claim Center automatically tracks and displays pended claims. With an easy to use interface and clearly written explanations of pended claims, you'll never miss a rejected claim again.