

## Optum™ Claims Manager Facility Integrated with the GE Centricity Business Transaction Editing System (TES)



Optum™ Claims Manager™ Facility is a proven system that leverages advanced clinical editing and reviews charges prior to claim submission to third party payers to improve reimbursement rates, support provider compliance, and reduce operating expenses. This clinical editing solution helps hospitals identify inappropriately coded outpatient and inpatient facility charges prior to claim submission.

In collaboration with GE Healthcare, we have created seamless integration and connectivity between Claims Manager Facility and the Transaction Editing System (TES). This integration allows for customization through a bi-directional support interface, creating a charge processing environment unique to your GE environment. The result of this direct interface is a more efficient workflow and, ultimately, improved revenue cycle efficiencies.

### **Lower denial rates, identify unbilled items, and shorten accounts receivable cycle times**

Claims Manager Facility evaluates charges prior to claims submission by leveraging a deep clinical knowledgebase of content. Then, the charges are filtered into TES work files for efficient editing which allows them to be corrected and re-evaluated before they are sent to the Hospital Patient Accounting System, and then ultimately to the payer.

Claims Manager Facility replicates the Medicare payment process and emulates the commercial payer adjudication process at the least costly point in the claims continuum — before the claims leave your hands. Its intelligent automation can help you attain financial insights that contribute to better business decisions and help you realize return on investment.

#### **Claims Manager Facility can help you:**

- Identify partially billed or missed charges
- Reduce administrative expenses and avoid the delays associated with incorrect coding
- Comply with national Medicare, Medicaid, and commercial regulations with a consistent, automated standard

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Denials and delays can wreak havoc on your bottom line. If a claim has to be resubmitted through the claims management process, your facility's A/R days increase, productivity suffers, and costs can escalate — resulting in unpredictable cash flow. Help drive enhanced consistency in your cash flow with this sophisticated, yet easy to use clinical editing solution that helps hospitals identify inappropriately coded outpatient and inpatient facility charges prior to claim submission — without changing your existing workflow, all from within the TES system.

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- Comply with local/national coverage determinations (LCD/NCD) and load and view updated LCD/NCD policy relationships as they become available to support compliance with Medicare policy
- Develop your own edits and customize system edits to meet your facility's billing and reimbursement needs
- Review current charges or charge line history, allowing for a better view of patient history

This rules-based, front-end clinical editing tool offers one of the most advanced knowledgebases in the industry, with more than 16 million (over one million commercial and 15 million Medicare) facility coding relationships, accompanied by robust database editing functionality. Claims Manager Facility features inpatient and outpatient facility editing and diverse team of medical and clinical coding experts that updates edits and coding systems on a quarterly basis, and updates LCD and NCD policies bi-monthly.

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**Increase claims accuracy to receive appropriate and timely reimbursement.**

For more information:

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**Claims Manager Facility with Transaction Editing System TES integration features:**

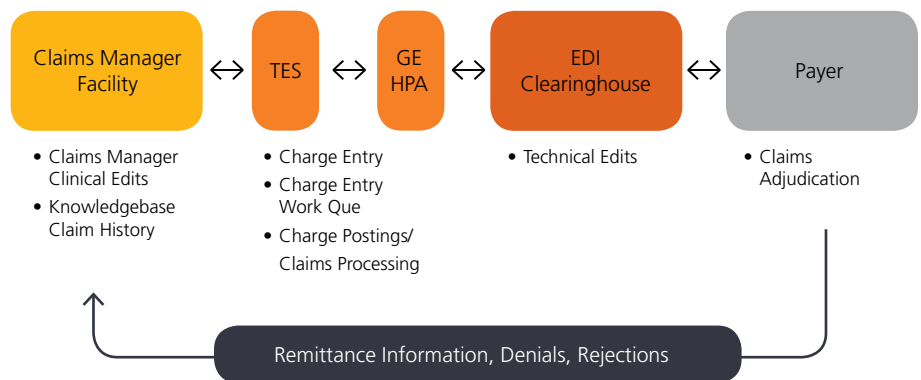
1. **Real-time or batch-mode transactions.** Send and receive transactions to and from Claims Manager Facility in real time or batch mode, either at every encounter filing and/or during nightly edit evaluation (NEE).
2. **Claims Manager Facility edits.** View and correct Claims Manager edits within the TES edits system. All Claims Manager Facility edits can be easily identified by you and users can be assigned to TES work files depending on the type of edits that need correction.

Claims Manager Facility edit condition rules are maintained in the Claims Manager system and also stored in the TES Edit Condition dictionary. This helps you assign them to work files to control which users see and work the Claims Manager Facility edits.

3. **Reports in the TES system that display Claims Manager Facility edits** include:

- Edit summary report
- Force-extracted transactions report
- Edit condition locator report
- Edit management report

**Claims Manager Facility with TES workflow**



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