



## Process Claims Automatically With IMPACT

The process of adjudicating health claims is a complex business ideally suited for automation, and IMPACT provides a solution with simplicity and power.

Provider and facility claims are entered into IMPACT either electronically or manually and are instantly checked against extensive built-in logic for data entry accuracy. IMPACT is capable of checking and verifying a range of variables including eligibility, authorizations, benefit limitations, provider contracts and dozens of other rule-based criteria. IMPACT does this entirely without any human intervention. For claims that cannot be automatically processed because some critical information is missing, IMPACT provides descriptive pend status notification to assist claims examiners in resolving any open issues.

IMPACT delivers the essential ingredients every claim processing enterprise needs to be successful. These include:

- ✍ Accuracy
- ✍ Speed
- ✍ Productivity
- ✍ Consistency
- ✍ Responsiveness
- ✍ Flexibility
- ✍ Comprehensiveness

Built on a solid database platform, IMPACT delivers a level of automation that is unprecedented among currently available competitive offerings.

At work here is another of MCSI's powerful proprietary tools known as Pay-Talk. Pay-Talk lets you define any health benefits plan using codes that are resident on a claim form.

### Plan Design Liberation

Most administrators will tell you that developing plan definitions for a claims processing system is a complex, time consuming and at times, impossible task. IMPACT offers many copy functions and mass change functions that increase the ease and speed of plan building.

Pay-Talk logic tells IMPACT how to apply all controls found in your Plan Definition for each benefit code. It automatically handles co-pays, co-insurance and deductibles, as well as all limitations as defined in your plan design.

### Pay-Talk is easy to learn

Transfer your benefit plans into Pay-Talk scripts. No programming is required. Scripts are merely Boolean arguments such as If Then, Else, And, Or, Not, etc. alongside plan provision descriptions.

Time spent writing Pay-Talk scripts varies depending on the complexity of the benefit plan. The good news is that once completed and tested, the scripts can be copied to create new similar scripts in a fraction of the time.

Once Pay-Talk is set-up, you will be able to automatically adjudicate any claim using the plan benefit provisions as detailed in the plan contract, thereby eliminating human error. You'll enjoy the assistance Managed Care Systems will provide every step-of-the-way to help you get started down the road to increased productivity and considerable timesavings.

### Intelligent Claims Automation

IMPACT prices and adjudicates a claim on a service line basis using two separate processes in a single operation. First, allowed amounts are computed based on PPO contract rules (Med-Talk) and second, payment amounts are computed based on Benefit Plan rules (Pay-Talk). Processing power such as this is what makes IMPACT so productive and accurate.

Transform your claims processing operation with IMPACT today!

Our Managed Care Systems management team will help you evaluate the benefits of replacing your legacy system with IMPACT.