# XpressUpdate

## **Automated Verification Services**

### A New Way of Doing Business ... Bringing Registration and Billing Together

The business of upfront payment collection faces many challenges:

- Patients frequently switching insurance coverage
- Employers shifting costs to employees in the form of high-deductible plans
- Physicians sending patients' blood work to laboratories electronically or on paper requisitions

Outdated patient information and outside registration often result in billing departments devoting a significant amount of time obtaining updated patient and insurance demographics.



*Xpress*Update provides automated workflow queues and a systematic approach to validating patient/insurance demographics.

Don't let invalid insurance claims get trapped in the revenue cycle!

Move away from traditional follow-up methods and shift your strategy from working billing errors, denials, and patient billing.

Improve doctor satisfaction by reducing follow-up calls, letters, and faxes to their office staff and patients.

XpressUpdate
offers an
advanced feature
set to address
declining
cash flow by
creating a retail
approach to
getting paid

## **Physician Office Demographic Bridges and Insurance Mapping Dashboard**

Established track record of connecting more than 34,000 physician offices

- → Demographic Bridge enables users to check patient and insurance demographic information in the physicians practice management system
- → Insurance Mapping Dashboard provides an organized approach to mapping multiple physician insurance masters to your organization's single insurance master

#### **Patient Verification**

Eliminate typical patient demographic errors with automation at the point of service; collect co-pays and deductibles at the time of service; address high-deductible plans and set up payment plans prior to providing service.

- → Uses advanced proprietary algorithms to sort billions of pieces of information from national and state databases to verify patient identity and confirm accuracy of patient demographic information
- → Enables you to verify patient identity and insurance eligibility in seconds with drivers license bar code scanning
- → Enables you to identify the subscriber of the insurance policy
- → Facilitates skip tracing / return address search

#### **Insurance Eligibility Checking**

Automated real-time access to 750+ payors accepting 270 request / 271 response combined with our established track record of connecting more than 34,000 physician offices.

- → Web Crawler search feature that accommodates the 700+ payors that do not participate in the 270 / 271 program by mapping their website screens for one-click insurance coverage verification
- → Customizable 271 by User feature that enables users to sort and pre-sort the data view according to user preference
- → Patient Coverage Summary feature that provides real-time view of remaining deductibles, co-pays, and coordination of benefits

#### **Automated Workflow Queues**

- → Dashboard approach that organizes end-of-day batch uploads into follow-up queues based on status
- → Multiple sort options that include productivity tracking

#### **One-click Data Transfer**

No typing required!

→ Update patient and insurance demographics in your clinical or billing system with a single mouse click

#### **EMPI (Enterprise Master Patient Index)**

- → Links several MPIs together from disparate systems and departments
- → Generates an EMPI, or allows you to use one provided by your organization

#### **Statistics Reporting**

→ Offers clean pass-through rate, errors by physician office, errors by service center, user productivity tracking ... and more!

#### **Payment System**

- → Accept cash, check, or credit card payments at the point of service
- → Set up payment plans prior to providing services

#### **Pre-authorization**

- → Provides pre-population of required patient and insurance information on pre-authorization request forms
- → Recognizes that a pre-authorization needs to be completed before or on the date of service

#### **Nursing Home Coverage Determination**

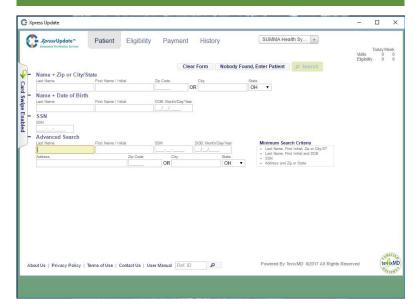
For Medicare billing, eligibility checking is geared to let you know the episode dates and whether the patient qualifies for Part A (bill the SNF – skilled nursing facility) or Part B (bill third-party insurance).

→ Eliminates the steps of working a census report (Part A vs. Part B stay), waiting for the SNF to respond, working an SNF denial on the back end, sifting through paperwork from the SNF

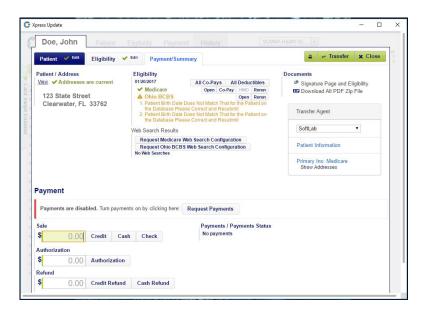
#### **Easy Integration**

→ Provides easy integration with your lab order portal, EMR, billing system ... or can be used as a standalone application

#### **SAMPLE SCREENSHOTS**



#### **Patient demographic verification screen**



Real-time insurance eligibility checking screen

