

# INGENIX®

## Transaction Director: Service

### Executive Summary

Ingenix Transaction Director is designed to increase adjudication rates by performing payer-specific edits and rules that produce clean claims for you—ultimately reducing rejections, costly human intervention, and resubmissions while enabling faster settlement with your providers. This solution can help you:

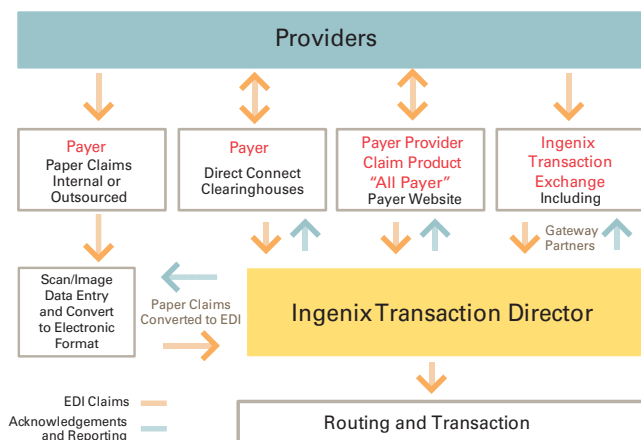
- Increase adjudication rates on 100 percent paper and EDI data through the Ingenix Transaction Director “intelligent” gateway
- Eliminate duplicate claims, routing issues, and human intervention in the adjudication process
- Improve processes for requesting, obtaining, and receiving electronic claim attachments and coordination of benefits

### Overview

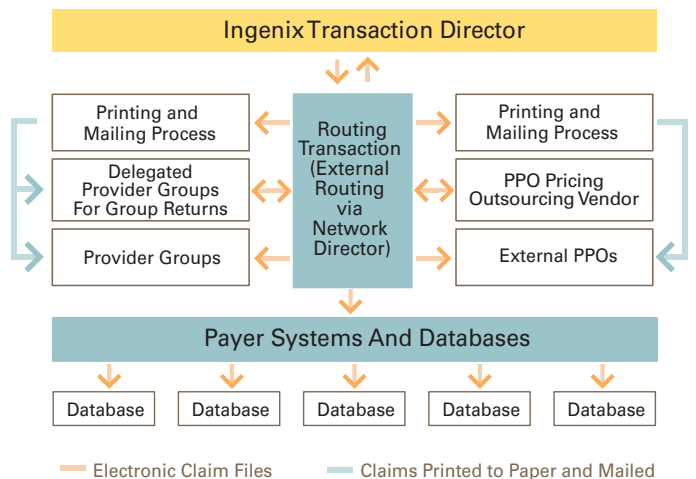
Ingenix Transaction Director distinguishes between the claims you want and the claims you don’t so that you only receive claims for your members and with all the required information. For many payers, upwards of 10 percent of claims are sent to them in error, which often requires a costly manual review process before denying the claim. In addition, information may be missing or miscoded, causing a claim to be pending for human intervention prior to being processed or denied.

Ingenix Transaction Director will virtually eliminate such inefficiencies. With its flexible and powerful rules engine, you can increase the rate of autoadjudication, minimize multiple claim submissions, and achieve greater claim processing efficiency.

PAYER PAPER AND EDI CLAIM FLOW TO TRANSACTION DIRECTOR



PAYER PAPER AND EDI CLAIM FLOW FROM TRANSACTION DIRECTOR



### Eliminate Duplicate Claims Before They Enter Your System

Managing providers' claims submissions can be a time-consuming and inefficient process. Redundant electronic submissions or an overlap of paper and electronic submissions can drive duplicate claims to 10–40 percent of many payers' total inbound claim volume. Ingenix Transaction Director is a vigilant defense to such inefficiencies with its ability to determine duplicate claims—whether they were received electronically or on paper.

### Customized Edits and Rule Routines

Ingenix configures Transaction Director to perform your customized edits and business rules for situations that would otherwise cause a claim to be pended and touched by a claims adjudicator. In addition to “standardized” edits, Transaction Director is configured to best impact autoadjudication in light of your unique system processes, needs, and benefit plan designs.

## Key Features

- **Member Eligibility Verification**—Recognizes membership without the need for human intervention for improved adjudication and elimination of costs spent on misrouted provider claims.
- **Automated Provider Selection**—Identifies the correct contract or fiduciary to assign a claim based on proprietary logical algorithms that will increase adjudication accuracy while reducing human intervention.
- **Duplicate Checking**—Uses custom criteria to determine whether a claim is a potential duplicate. These possible duplicate claims can then be rejected back to the provider, or passed through to the payment system based on your requirements.
- **HIPAA Validation**—Validates Type 1 and 2 HIPAA edits for paper claims (converted to EDI) and Type 1 through 7 HIPAA edits for true EDI claims.
- **Standard Editing**—Standard edits are performed such as code validation (diagnosis, CPT, HCPCS, ADA, USPS normalization, etc.), verification that specific information is not missing and is formatted correctly, and other edits required for correct formatting of your inbound data file.
- **Customized Editing**—Rules and rollups can be applied automatically and consistently, permitting many claims to autoadjudicate once they enter your system, rather than pending and requiring manual processing.
- **Reporting**—Comprehensive reporting is available online at a secure website.
- **Acknowledgements and Rejections**—When a file is transmitted, acknowledgements are created so that all parties will know that files have been received.
- **Printing and Mailing Process**—Automates processing of rejected claims, with the ability to print on both industry standard and nonstandard forms, with the inclusion of claim attachments.
- **Exports/Internal Routing**—Flexible and customizable criteria drive exports and routing in either end-of-day batch mode or throughout the day based on multiple-file thresholds you determine.

Ingenix offers a full complement of solutions and services aimed at driving efficiency and cost savings for your business. Whether you want to send claim payments and remittance information electronically or need help designing and implementing a more customized EDI system, we have the technology and expertise to help you reach your EDI destination.

### Ingenix | Intelligence for Health Care | [www.ingenix.com](http://www.ingenix.com)

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