

SpyGlass

Health Claims Management
by Beacon Technologies Group, Inc.
www.BeaconSpyGlass.com

*Take Control of
Health Claims Management
with Beacon SpyGlass
and HIPAA Director*



Revolutionary Ease-of-Use

Drastically reduce training needs and the burden of long “apprenticeships”. Yes, we still have a demanding business environment to navigate, but when all the key elements of benefits and claims are clearly laid out before you, it is much easier to see how all the pieces fit together. If you have wrestled for years with legacy systems to pay health and medical claims based on employee benefit plans you know that making this business more straightforward is a tall order. SpyGlass was created as a fully-web based platform to tackle that job.

SpyGlass brings real ease-of-use to health claims management operations by covering full medical (with all the NCCI edits), dental (with powerful edits), vision, short- and long-term recurring disability, and life claims. SpyGlass, paired with Beacon’s HIPAA Director, allows for integration with a variety of vendor partners to efficiently and effectively navigate through the ever-changing landscape of healthcare claims processing.

Component Based Architecture

SpyGlass and HIPAA Director together give you the tools you need to take back control of health claims management—portals, claims processing (SpyGlass), trading partners and EDI, eligibility and repricing services (real-time or batch) and customizable options as needed. All are a part of our “component based architecture”. By collaborating ideas and expertise with a broad range of savvy and innovative customers, Beacon is well-positioned to work with you to customize SpyGlass and HIPAA Director to fit your unique needs. Moreover, Beacon offers “quick start” functionality to enable key groups and features now while adding more sophisticated capabilities at a later point.



Advantages

To You & Your Team

- ◆ Dramatic Automation—boost auto-adjudication rates and accuracy, and streamline operations
- ◆ Powerful Plan and Benefit Setup—all the options you need with no programming required
- ◆ Smart, Managed Workflow—regain control over operations
- ◆ Run on Any Platform—avoid operating system or hardware “lock-in”
- ◆ Compliance and Standardization—ICD-10 and HIPAA 5010 compliant. Rules based on HIPAA code sets and standards, take files with a mix of old and new formats. Supports CMS Section 111 and Medicare Crossover
- ◆ Secure Web Portals—create as many as needed (i.e members, providers, auditors, etc.)
- ◆ Powerful, Flexible Real-Time Reporting—1-click export to PDF and Excel from ad hoc queries
- ◆ Automated Operations—check cycles, bank files, EFT, eEOPs, correspondence (automatic document creation AND follow-up), with EDI and external routing for trading partner transactions
- ◆ Leverage Advanced Tools—multi-language, multi-currency, easy integration with Word/Excel/PDF/XML, auditing, user acknowledgement time stamps, and mass adjustments
- ◆ Highly Secure—PLYNT Certified, bio-metric login options, audits for key changes
- ◆ NCCI and Custom Edits—reduces the need for expensive add-on dedicated systems
- ◆ Well Connected—Covers the key trading partner interfaces, and elegantly architected to support more



SpyGlass Security



PLYNT Certified

Security is a top priority for Beacon. Lock down user access with some of the highest level biometric security available. SpyGlass and HIPAA Director web application security has been tested and certified by PLYNT, the application security arm of Paladion, a Deloitte subsidiary.

- ◆ Banking caliber web security for your operations
- ◆ Finely screened control of all user access by login role
- ◆ Claim related users have independent dollar limits, audit thresholds, default queues, secondary queues, defined audit queues, controlled member clearance, VIP service levels, and group/claim access and exclusion lists
- ◆ Audit logging for key file changes as well as for claim actions and overrides
- ◆ Superb security tracking, auditing, reporting and control
- ◆ HIPAA Director Software provides secure, automated and managed file transfers, and supports encryption, compression, signing, multi-protocol support, operational notifications and tracking

Multiple Languages with Multi-Currency Support

SpyGlass meets the need for portals to be setup in Spanish or other languages. On registration, each user sets a default language preference or can toggle back and forth dynamically between available translations.

For multi-currency support, SpyGlass links to an online, real-time currency rate conversion service. Establish your own policies for currency transactions without being at the mercy of banks that making the decision on the “buy” or “sell” rate of your transaction and you will you not be subject to “behind the scenes” conversion charges.



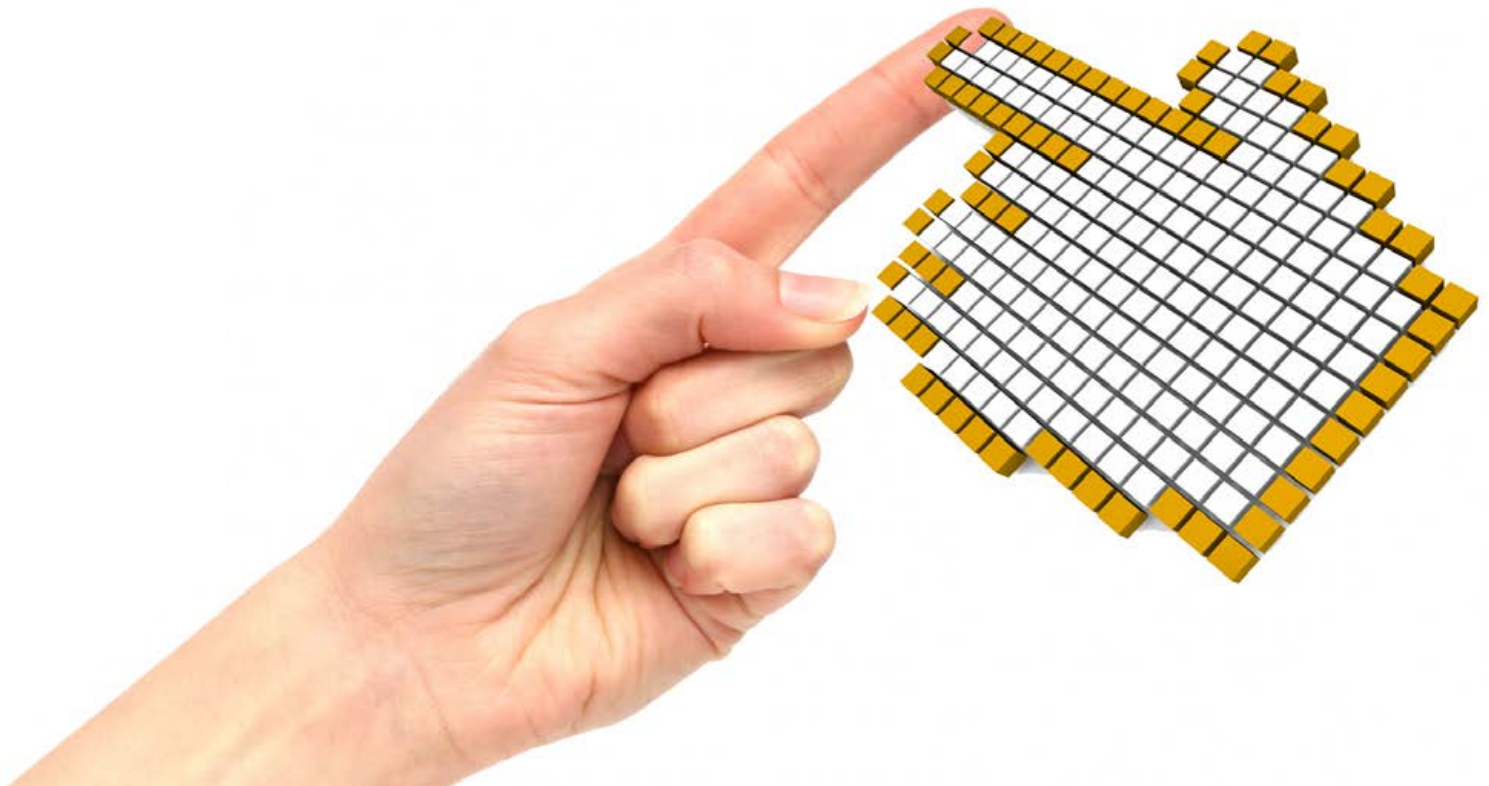
Customer Service

Service Excellence

The Customer Service and Call Management components give you comprehensive information by way of strong search and view capabilities with a few clicks of the mouse.

From straightforward screens, customer service representatives will be able to quickly:

- ◆ Retrieve insured/dependent patient information, including benefits, medical and dental coverage history
- ◆ Control access to and verify benefits and key group/company info
- ◆ Search claims and providers in many different ways, and use 1-click export to Excel for reports and lists
- ◆ Control claims/eligibility access by “Member Level” vs. “CSR Security ID Level” vs. “Permitted Group List”
- ◆ Request ID cards, drug cards, create custom documents, templates and view correspondence
- ◆ Upload or view scanned images, HIPAA authorizations, documents, correspondence, EOP’s and EOB’s
- ◆ Manage inbound and outbound calls via well-organized call log
- ◆ Search pre-certifications and history notes
- ◆ Track critical conditions, VIP status, episodes, and life events such as COBRA or retirement
- ◆ Control PHI—show authorized information only to permitted users, roles and groups





HIPAA Director

EDI & EFT Secure Transactions

Included with the full SpyGlass solution, HIPAA Director lets you easily manage the various Trading Partner (TP) relationships and supports automatic, managed batch transfers directly with a range of providers using a web browser. By not being forced to send your transactions through a single “metered” clearinghouse, HIPAA Director helps you “go direct” with as many partners as you have in order to avoid transaction costs.

For Each Trading Partner

- ◆ Stores PKI keys, encrypted login credentials, profiles, pass phrases, set custom remote and local folders
- ◆ Setup custom HIPAA mappings for 837s, 835s and 834s that vary from one TP to another
- ◆ Create transaction schedules that vary by day of week, support special or extended schedules
- ◆ Set options for adjudication, special jobs (i.e. run SQLs on db), repricing operations, etc.

Features

- ◆ Robust external routing capabilities for multiple repricing tiers
- ◆ Setup/manage trading partners of all types (imaging, banks, carriers, etc.)
- ◆ Initiate and manage file transfers automatically, test or run “live” batches on demand
- ◆ E-mail notification of transfers with attached summaries, reports, and files
- ◆ Show status and key data for batches (number of transactions accepted and rejected including the reason)
- ◆ Click through summaries to actual single transaction claim data
- ◆ Use “masks” to separate out files for special handling
- ◆ Download, decrypt, encrypt and transfer to another trading partner in a single transaction
- ◆ Send Provider and PPO payments via EFT with secure, intelligent eEOP options

Benefits

- ◆ Easily manage changing TP specifications
- ◆ Lower transaction costs
- ◆ Increase reliability and accuracy through automation
- ◆ Eliminate manual login, file encryption and transfer steps
- ◆ Avoid printing, mailing and postage costs via direct EFT for Provider and PPO payments





Business Partnerships & Integration Components

- ◆ McKesson ClaimCheck 10 for ICD-10, the industry's leading solution for code editing
- ◆ "COBA" crossover claims EDI direct with Medicare & Section 111 eligibility and reporting
- ◆ FAIR Health for usual and customary repricing, variety of pre-auth vendors for pre-cert
- ◆ Provider Direct Entry (PDE) of claims directly into claims system (in use by state Medicaid dept.)
- ◆ Automation for payroll system links, positive pay files/bank reconciliation files for multiple accounts, etc.
- ◆ NACHA for EFT (both older and new standards), support for eEOBs, OANDA real-time currency conversion rates
- ◆ Bank links for Debit linked accounts with automation for FSA/HSA consumer-driven health plans
- ◆ Optum code sets subscription available to validate and update codes
- ◆ EDI—837s, 835s & 834s for PPOs and clearinghouses with support for
- ◆ Scanning/imaging of paper claims to EDI with link to images
- ◆ External routing for re-pricing, code edits, fraud—any 3rd party Trading Partner
- ◆ Correct Coding Initiative (NCCI) edits built-in—MUE, Add-ons, MEC, Global Surgery, Co-surgery, & more
- ◆ Conversion Tools for automated imports/exports that your business users manage, without programming
- ◆ RedCard or ABF-Emdeon for print and mail fulfillment, and Word compatible automated letters via PDF
- ◆ NCCI and Custom Edits—reduces the need for expensive add-on dedicated systems



Health Care Reform

And Claims Processing



Is your claims system up to the challenge?

With all the new changes to the Health Insurance Marketplace that the new health care reform laws have brought, states and pioneer ACOs are preparing for massive health insurance reform. With that comes the need for more secure and advanced, and more automated and integrated claims processing systems.

Special support for ACA, ACO or shared-risk programs:

- ◆ State-Specific 820 eligibility file processing
- ◆ RBRVS and Medicare pricing schedules
- ◆ Processing & reporting of encounter claims
- ◆ Support for services not typically covered by Medicaid
- ◆ State Medicaid Health & Family Services (HFS) reporting
- ◆ Additional capabilities for authorization of care & referrals
- ◆ Run-rate evaluations—for evaluating Provider payouts vs. encounters and claims
- ◆ Support for processing under the new Patient-Centered Medical Home model of care



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