SOLUTION OVERVIEW | HEALTHCARE PAYER

HYLAND CLAIM VALIDATION



- ✓ Ensure accurate data for your claims adjudication system
- Reduce costs and processing delays
- √ Accelerate claims processing

Claims that arrive by mail and fax consume considerable staff time as employees must review and prepare those documents for your adjudication system. Manual claims processing increases errors, escalates cost, drains staff time and delays throughput.

Processing paper and faxed claims is labor intensive and costly, but there is a solution. If you scan claims received on paper or via fax by Optical Character Recognition (OCR) and make them available to OnBase, Hyland's content services platform, you can quickly prepare those claims for processing through Hyland automation.

Hyland Claim Validation consumes data captured from standard healthcare claim forms, validates the data against industry standards and custom rules, facilitates correction of captured data and transforms the data into a standard ANSI 837 — ready for electronic processing by your adjudication system.

HYLAND CLAIM VALIDATION





Scanned images

from OCR are

saved to OnBase

OCR results are



Validation rules are consumed by run against each field on the claim form



each highlighted error and correct each field



confirmed to be accurate



Ready for processing

Hyland

Claims are converted to an electronic 837

Eliminate labor-intensive and costly manual processing of paper claims and attachments.

ENSURE ACCURATE DATA FOR YOUR CLAIMS ADJUDICATION SYSTEM

With Hyland Claim Validation, you can set up your claims adjudication with pre-validated claims ready for processing. The solution reviews each claim field for compliance with industry standard requirements and your custom rules. It allows you to toggle claims rules on and off, based on business relevancy. The solution speeds error correction through a claims worklist that enables staff to simply tab to each highlighted error for correction, thereby ensuring a higher level of claims accuracy for first pass claims adjudication.

REDUCE COSTS AND PROCESSING DELAYS

Remove lost time and labor costs needed to review and rekey every field included within the UBO4 institutional claim and CMS 1500 professional claim. Hyland's Claim Validation solution automatically checks each field for compliance with your rules and national claim standards. Staff only need to review and correct the fields with issues, freeing them to accomplish other, more productive work. In addition, Hyland's intuitive web-based interface simplifies configuration of your own claim rules without the need to wait for IT resources.

ACCELERATE CLAIMS PROCESSING

Paper and faxed claims often have to wait for staff review and rekey, but with Hyland's Claim Validation they now move to the express line. Your OCR-scanned files are automatically processed through Hyland Claim Validation rules, limiting staff involvement to correcting fields with issues. Any attachments that arrive with a claim are noted on the respective claim form, so everything is ready for speedy processing through your adjudication system. You may also set staff work priorities based on the number of days claims have been in the system, the dollar amount and the number of errors. With Hyland solutions, you can rest easy knowing that automation will support your achievement of state prompt-payment guidelines.

Learn more at **HylandHealthcare.com**

