

Integrated Patient Data Validation System

As patients pre-register, register or arrive for a procedure, Passport's integrated solution quickly identifies crucial patient information and highlights data discrepancies, which, once corrected, improves the accuracy of patient benefits, demographic, financial and clinical information.

IntelliSource allows for the automation of multiple inquiries from one patient encounter based on customer-defined rules. If for example, an eligibility verification response identifies that a patient is not covered and, therefore, should be classified as "self-pay," an address verification and/or credit score inquiry could be initiated without user intervention. Compatible with all major health information system (HIS) platforms, IntelliSource can also automatically post response data back into discreet data fields, patient notes and the electronic medical record using standard or proprietary communication protocols.

> Benefits of our integrated and automated solution

- Ease-of-use and customization facilitates system usage, simplifies training and improves user and facility efficiency
- Connects patient data across all departments to eliminate redundant data entry
- Allows data exchange and import across multiple facilities, on an enterprise-wide basis and between disparate HIS platforms
- Requires minimal IT and registrar staff time and system resources to install, use and maintain
- Exception-based rules and processing available for most efficient use of staff

> More than eligibility verification!

Passport IntelliSource® Services

Eligibility verification	Medical necessity validation+	Registration quality assurance +*
Address verification	Pre-certifications/ Authorizations (view) +*	Patient payment estimation+*
Referrals (view)	eCashiering+*	Credit reporting & scoring+*

+ Available as a stand alone service or through other delivery platforms.

* Integration in IntelliSource planned or currently in development.

Integrated Patient Data Validation

> User-Friendly Responses

- Customer-defined rules include
 - Notify users under certain pre-defined conditions such as low Medicare reserve days, non-contracted MCO, conflicting plan types (HMO vs. PPO), etc.
 - Highlight patient data discrepancies such as differing Subscriber IDs, Date of Birth, Social Security Number, etc.
- Displays in an easy-to-read format -- standardized across all payers and data sources
- Customizable by user, department, facility and/or enterprise

> Flexible Solutions

- Permits a user to perform inquiries on demand or in an automated fashion with little to no additional data entry
- Allows multiple “threaded” inquiries from one patient encounter based on customer-defined rules, including eligibility and address verification, referrals and much more
- Imports response information into discrete HIS data fields, patient notes and/or electronic medical record
- Allows inquiry responses to be viewed individually or in total as part of an interactive work center

> Technical Overview

This solution can utilize HL7, X12 or proprietary communication protocols to perform patient data validation inquiries and update the facility's HIS accordingly. It does not rely on scripting or other less desirable - and more costly - approaches, and it can be utilized in real-time or batch environments.

Utilization of standard communication protocols yields

- Increased speed and reliability
- Decreased implementation and maintenance

Passport's integrated solution is compatible with all major HIS platforms, including Cerner, CPSI, Eclipsys, Epic, HMS, IDX, McKesson, Meditech, QuadraMed, Siemens and more.

Passport Health's administrative and financial products are currently accelerating the revenue cycle and increasing the efficiency of more than more than 5,300 hospitals, physician practices and other ancillary facilities across the U.S. Let us demonstrate how we can help you. **Please call 888-661-5657 or visit our website at www.passporthealth.com** for more information or to schedule a product demonstration.