



PaySpan[®] Health: Healthcare Payment and Remittance Advice

A free service to providers for EFT and ERA receipt

PaySpan Health breaks down the barriers to electronic claim settlement with an innovative solution for Electronic Funds Transfers (EFTs) and Electronic Remittance Advices (ERAs). Using this free service, providers can take advantage of EFTs and ERAs to settle claims electronically, without making an investment in expensive EDI software. Following a fast online enrollment, you will be able to receive ERAs and import the information directly into your Practice Management or Patient Accounting System, eliminating the need to re-key remittance data off of paper advices.

PaySpan Health Offers a Practical Solution to Electronic Settlement

As a healthcare provider, the time your staff spends on payment issues and reconciliation is time taken away from patient needs. PaySpan Health can rapidly transition you into the world of electronic payments and automated reconciliation, greatly reducing the paper work and time spent on claims issues and collections.

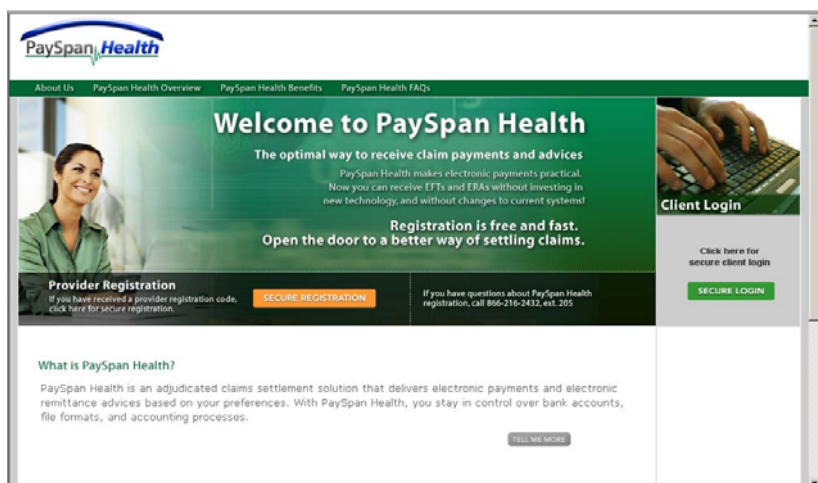


Your payers understand the value of moving to electronic settlement of claims, but they know that the transition must deliver advantages to you as well. Perhaps most significant, **you can expect to save between \$1.15 and \$2.94 per claim settled electronically.**

PaySpan Health offers providers a complete solution for claim payment management. Using PaySpan Health, you can route EFTs to the bank account(s) of your choice, manage multiple payers, choose how you want to receive remittance details, easily re-associate payments with claims, and take advantage of claim and remittance retrieval and reporting.

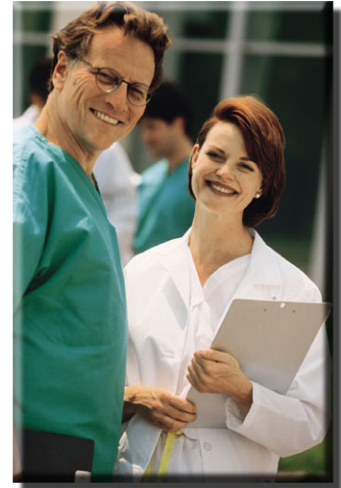
Getting Started is Easy!

The process starts with an invitation from a payer that includes a registration code. Armed with this code, you can pursue an online enrollment process that will only take 5-10 minutes to complete. During this enrollment process, you will set up a profile of your practice, specify bank accounts (multiple accounts if you desire), and specify other preferences for management of checks, EFTs, ERAs, or online presentation of claim payment information.



PaySpan Health Benefits to Providers:

- ✓ **Free service** – Providers are not charged any fees to use the service
- ✓ **Reduce settlement expenses** – Providers can expect to save between \$1.15 and \$2.94 per claim settled electronically
- ✓ **Eliminate re-keying of remittance data** – Electronic remittance advices can be imported directly into practice management or health information systems, eliminating the need for manual re-keying
- ✓ **Maintain control over bank accounts** – Providers keep control over the destination of claim payment funds. Multiple practices and accounts are supported.
- ✓ **Match payments to advices quickly** – Providers can associate electronic payments with electronic remittance advices quickly and easily
- ✓ **Pursue secondary billings faster** – Accelerates the revenue life cycle
- ✓ **Improve cash flow** – Electronic payments can mean faster payments, leading to improvements in cash flow
- ✓ **Connect with multiple payers** – Providers can quickly connect with any payers that are using PaySpan Health to settle claims



Providers

Complete Reports are Available

PaySpan Health makes tracking and reconciling payments quick and easy with flexible payment reports. Providers are able to design their own reports and run them at any time. Common examples include ACH summary reports, monthly payment reports, and payment reports sorted by date. PaySpan Health's report capability takes the mystery out of matching claims to payments!

Remittance Viewing and Receipt – You Have Options

With PaySpan Health, you have a number of options for viewing and receiving remittance details. PaySpan Health will match your preference for remittance information, with the following options:

- ✓ HIPAA-compliant data file that can be downloaded directly to your Practice Management or Patient Accounting System
- ✓ Electronic remittance advice presented online and printed in your location

COMMUNITY HEALTH PLAN OF MICHIGAN									
Provider Name DR BEN ROBBINS					CheckNo 120038345				
Tax Id 370111378					CheckDate 10/13/2004				
					CheckAmt \$616.50				
Claim Numbers		Patient Name		ANGELA WOODARD		Claim Total Charge		\$205.00	
Payer 719932404		Provider 00932A427		ID 66511234		Claim Total Payment		\$184.50	
DATE OF SERVICE	PROCEDURE CODE	DESCRIPTION	TOTAL CHARGES	ALLOWED AMOUNT	ADJUSTMENT AMOUNT / REASON	PAID AMOUNT			
09/24/2004	36415	DRAWING BLOOD	\$15.00		\$1.50 A2	\$13.50			
09/24/2004	99211	OFFICE/OUTPATIENT VISIT	\$50.00		\$5.00 A2	\$45.00			
09/24/2004	69210	REMOVE IMPACTED EARWAX	\$45.00		\$4.50 A2	\$40.50			
09/24/2004	84702	CHORIONIC GONADOTROPIN TEST	\$95.00		\$9.50 A2	\$85.50			
Claim Numbers		Patient Name		SHERRY KELLY		Claim Total Charge		\$205.00	
Payer 719932405		Provider SKF3DF9080A		ID 263909323		Claim Total Payment		\$184.50	
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