



InfoQuest Systems, Inc.

1 Innovation Way, Suite 426

Newark, DE 19711

Phone : 302-456-3392

Fax : 302-368-7544

e-mail : nitin@iqsi.com

InfoCare

- Windows 98/NT/2000/XP point and click and multi-tasking ease of use.
- While working on a patient's ledger you can look up someone else's registration, insurance, notes, or ledger.
- You can simultaneously post charges or payments while connecting to Medicare's, Blue Shield's, or commercial company's computers to check eligibility or get policy related information from their web-site on the Internet. Leave your posting work in one window, dial and look up information in another window and return quickly to what you were working on.
- You can search for a patient based on patient code, name, birth date and social security number. No sooner than you start typing a value in the search box, the software automatically begins to find the record beginning with that value.
- Enter specific patient insurance policy related notes in the patient record such as capitation, withholding, co-pay, expiration date, non-covered services, etc. There is no limit as to the number of insurance companies that can be added for any patient. Previous insurance data is also retained in the system.
- Fields required by HIPAA for electronic billing are identified in 'red' on patient data screens.
- You may print routing slips or super bills for patients. In addition to each slip being given a unique number, when created, a 'blank' line is entered in the patient's ledger. This indicates that the account is expecting a corresponding charge transaction. A report can be printed indicating these 'missing' charges.
- The screen for adding daily charges also shows patient's primary insurance, co-pay information and patient's past balance. This screen also allows you to print patient receipts and make adjustments to charges. You can enter patient responsibility for each charge that you enter. Software maintains patient responsibility separately based on deductible, co-pay and co-insurance not applicable to any secondary insurance.
- Print reports at the end of the day that tell you which super bills were printed with no corresponding charges. Thus, 'lost charges' are eliminated.
- Do direct electronic billing to your local Medicare, Blue Shield, Medical Assistance and to commercial companies via any of these clearing houses : EMDEON (formerly WebMD), ProxyMed, McKesson, THIN.
- Software creates all electronic files to all entities by clicking one button.
- Automatic posting based on electronic remittance files from insurance companies.
- Maintain patient ledgers or statements by each claim or the HCFA sent to the insurance carrier. This means all activities involved in collecting payments on one claim are grouped together under one claim number that was created for that claim. This makes it very easy to keep track of bills that are not paid and what is the status of each bill.
- You may print a full statement showing all claims that are outstanding, activities related to only a specific claim or activities related to a range of claims.
- Print desired messages on patient statements. Statements show account balance as well as a separate column for the co-pay and deductible or patient responsibility for

each line of charge.

- Addresses of the insurance carriers get printed on the top of claims and your address and patient address are printed at proper places on plain paper for patient statements so that you can use window envelopes to save you time.
- You may print an Insurance Payment Tracer when you have not heard about a payment from an insurance company.
- Software allows you to keep track of 'allowables' by each insurance company and each procedure and calculates and posts adjustments automatically.
- You may also enter 'on-account' payments from patients.
- For 'capitated' patients, the software automatically makes adjustments after the co-pay. It also keeps track of these capitation adjustments against any insurance company.
- Software will keep track of all 'withholdings' by any insurance carrier.
- Ability to enter new codes related to procedures, diagnoses, etc. 'on-the-fly', when encountered, rather than requiring you to enter them before hand.
- The software allows you to separate charges by modifiers and providers for the same procedure.
- The software carries forward referring doctor and authorization information from one claim to another.
- No claims are printed unless all the required data has been entered. There are no 'incomplete' claims sent to the insurance companies.
- Any missing data for proper completion of claims can be printed.
- You can 'correct' missing data right when you are doing the billing, thus not interrupting your billing process.
- Claims with zero balances may be removed from the active file.
- Accounts receivables, daily, periodic and monthly reports give you practice related information.
- Daily charge and receipt report gives you a listing of all charges, payments and adjustments by patients AND by insurance carriers.
- Reports can be obtained at any time to list unbilled accounts and all bills raised during any specific period to any insurance companies.
- Accounts receivable reports for a specific insurance company or for all companies can be obtained at any time.
- You may do repeat primary and secondary billing if more than say, 30 days have gone by since the last billing.
- Payment Source Analysis report gives you where the payments are coming from and what adjustments were made.
- Special reports such as referral source analysis, procedure and diagnosis analysis, listing of patients with upcoming birth dates may also be obtained whenever desired.
- Most reports can be seen on the screen before printing.
- There is no need for end of the day or end of the month 'closing' of files or merging of files to perform any activity.
- You get any report any time based on the latest information in the system.
- All functions are performed with mostly point and click simplicity.
- There is no separate 'coding' or 'categorizing' required when generating different types of reports. Thus, a person not knowing these codes or categories can also enter data and produce reports accurately.
- Options are available for reminders, medical notes keeping, dictation, scanning images of documents such as lab reports, etc., prescription tracking, company billing and appointment scheduling.