

v2013.9 - Oct 2013

NEXtCARE



Document Control

Date	Description	Version	Author
25/7/2012	Initial Version	2013.6	AK
01/9/2013	Eligibility Updates and New Claim Registration	2013.7	AK
28/10/2013	New Claim Screens	2013.8	AK
20/11/2013	Multiple Diagnosis	2013.9	AK

Table of Contents

1. Sy	stem Overview	3
2. Ac	cess PULSE	3
3. Ch	ange Password	4
3.1	Password Complexity	4
3.2	Password Life Time.	4
3.3	Password Lock:	5
3.4	Forgot Password:	5
4. Re	gister a New User	8
5. Lo	gin to PULSE	9
6. Ho	me Page	9
6.1	Claims with Pending Pre Certification Reply	.10
6.2	Registered Claims without Pre Certification	.10
6.3	Pre Certified Claims	.11
6.4	Claims Display and Search	.12
7. Elig	gibility	.14
7.1	How to check eligibility	.14
7.2	Eligible Member	.14
7.3	In-Eligible Member	.15
8. Re	gister a New Claim	.16
8.1	Insured Patient Information	.16
8.2	Medical and Service information	.17
8.3	Services/Procedures	.20
8.4	Attached Documents and Notes	.22
8.5	Save Claim	.23
8.6	Specific Warning Messages	.24
8.7	Registration and Precertification Process	.26
9. Vie	w Claim Details	.29
9.1	Totals Computation	.29
9.2	Pre-certification Terms and Conditions	.30
9.3	Add Claim Revision and Extension	.30
9.4	Adjudication Notes	.30
9.5	Print Authorization	.31
9.6	Mark Claim as Not Used	.31
9.7	Important Notes	.32
10. Sea	arch for Claims	.32
11. De	liver Claims	.34
12. Fin	d Created Batches	.35
12.1	Check Batch Information	.35
12.2	View Batch Claims	.37
13. Inb	OX	.39
14. Bri	efing	.41
14.1	Claims Extended Status	.41
14.2	Grids functionalities	.41



15.	Appendix I: FOC List	43
16.	APPENDIX IV: Definitions & Interpretations	44
17.	Table of Figures	46
18.		47

1. System Overview

PULSE web application is offered to the providers by **NEXtCARE** to facilitate the transfer of information back and forth between both parties.

PULSE, will allow providers to register all new claims on the spot , get claims Pre-certification Response from **NEXtCARE** (Covered, pending, not covered), deliver claims to **NEXtCARE** at the end of billing cycle, apply claims reconciliation, and receive messages from **NEXtCARE**.

Benefits gained when using PULSE are:

- Instantly view current Insured-patient benefit information
- Receive Authorization in real time
- Frees Phone and Fax Lines
- Prevents incomplete claims from being submitted
- Correct claims errors before submission
- Provider's staff can perform administrative work (claims tracking, etc.) during off hours
- Tracking of payment order status
- More complete claims result in faster average turnaround

2. Access PULSE

To access the application, click on the Internet Explorer, and insert the URL.

http://pulse-uae.tatsh.com

PULSE Login page will be displayed as a result.







Figure 1 : Login Page

3. Change Password

To reset your Password, click on **Change Password** button Change Password from the Main Menu.

Pulse 2012		Username Medical Center 🕴
TATSH Main Menu 🕢 Home 🧇	Eligibility Check 🛛 New Claim 🛕 Claims Not Delivered 🧃	Claims Query 🛓 Inbox MEXICANE
Change Password		
Change Password		
*Old Password		
New Password		
Confirm New Password	Save Cancel Use cancel to return to the previo	ous page.
Copyright NEXtCARE Holding 2010-2012 - Version: 1	302	Connected to TATSH server since 24-Jul-2012 3:57:21 PM

Figure 2 : Change Password

Under Change Password page, enter your Old Password, your New Password and Confirm New Password; New Password and Confirm New Password should be identical, Click on Save button

Save to save the changes.

For security reasons, if **Change Password** page is opened all menu buttons will be disabled.

You will have to click on **Cancel** button Cancel to return to previously opened page and continue using **PULSE**.

3.1 Password Complexity

While changing the password, the following **Rules** are introduced to meet the complexity needed:

- Password must have a Minimum Length of 6 characters (can be modified)
- Password cannot be similar to the Last 3 Changes (can be modified) including the Current Password, and can use previous passwords
- **Password** must be complex, it means it must be alphanumeric and must contain at least one from **each** of the following characters :
 - Small Letter (a, b, c ...)
 - Capital Letter (A, B, C ...)
 - Special Character (*&%#@ ...)
 - Number (1, 2, 3 ...)

3.2 Password Life Time

In order to meet Allianz standards and guidelines, PULSE passwords impose high security standards.

The **Password** has a **Lifetime** that cannot be exceeded (**60 days** by default, and can be modified on the territory level); you cannot login after **Lifetime** is exceeded without changing your **Password**.

A **Reminder Time** is set to inform you that you have to change your **Password** (**10 days** prior to password expiry by default, and can be modified).



If you login to **PULSE** before the last 10 days of the **Password Lifetime**, no reminder will be shown.

If you login to **PULSE** after the last 10 days of the **Password Lifetime** and before the limit time, an alert "your password will expire in **N** days" will be displayed to remind you to change your **Password**.

If you login to **PULSE** after exceeding the **Password Lifetime** days, you will be automatically redirected to **Change Password** page, and you may not continue or access any other page without changing your **Password**.

3.3 Password Lock:

Password will be locked after 3 trials in this case refer to NEXtCARE-HELPDESK center:

		NEXU
Konstreen Reserves Konstreen Reserves	Country Hank Provide a manual latent hands and a phase count with a manufacture Provide a manual latent hands and a manufacture in the start wave of the start of	Control Control Control Control Control
		Permate the Uner

Figure 3 : Locked Password

3.4 Forgot Password:



Figure 4 : Forgot Password

In the event your password is locked, kindly click on "<u>Ferret Password?</u> in the main screen and follow instructions.





Reset Password		
Reset Password		
	User Name: Cancel	
	And the American Street	

Figure 5 : Reset Password

Enter the "user name" as provided and click on Reset.

Reset Password
Reset Password
User Name: ajit
Reset Cancel
No registered Email address for this user. Please Contact Pulse Support.
Convright NEXtCARE Holding 2010-2013 - Version: 2.6.0.0

Figure 6 : Error 1 – no registered email

In the event of the above screen error message "No registered Email address for this user. Please Contact Pulse Support."

Please contact +971 04 209 5929 and request for a password RESET.

Reset Password
Reset Password
User Name: ajit Reset Cancel
An Email was sent to your registered Email address. Please click on the link to reset your password.
Copyright NEXtCARE Holding 2010-2013 - Version: 2.6.0.0

Figure 7 : Password Reset Link

If the above screen shows, it means that the password reset LINK is sent to the email address that has been configured at the time of account creation.



Password Reset for ajit ▶ From pulse@nextcare.ae 2 minutes ago
Dear User,
Please click on the following link to reset your password: click here

Figure 8 : Password Reset Link

The next screen will relate that the password was RESET successfully and you can proceed to LOGIN with the default password '0000'

Reset Password	10-10
Reset Password	
Your password has been reset successfully. Please <u>Click Here</u> to login.	
Copyright NEXtCARE Holding 2010-2013 - Version: 2.6.0.0	

Figure 9 : Password Reset

Security Hints	Login
Never share your username and password with anyone NEXICARE will never ask for your password or security information Should you receive suspicious communications, please alert us immediately on our Support center directly into your Browser's address bar Update Your PC with latest anti-erus software, personal firewall and security updates for browsers	User Name * ajt Password formember my Username Remember my Password Login
For further help, please contact TATSH Support center; Email: pulse support@nextcarehealth.com Phone: +971 4 2095929	Eorgot Password2 Please Call our TATSH support center



Inter Construction	
issword is too short. Minimum length is 6 characters.	
*Old Password].
"New Password	
onfirm New Password	Save Cancel Use cancel to return to the previous page.



Follow the steps for the new password by entering the Old Password as '0000'



4. <u>Register a New User</u>

In order to use **PULSE** the provider user should have a User Name and Password. Therefore the user should send a **New User Request** to **NEXtCARE-HELPDESK**, and when the user name is created, **NEXtCARE-HELPDESK** will contact the user and inform him/her of the new User Name and Password.

To request a new user, click on button Register New User on the Login page. The New User Registration page will be displayed.

Pulse 2012		and the second se
татың		NEXICARE
New User Registration		
Personal Information		1
First Name Missile Initial Last Name Missile Initial Last Name Missile Initial Missile Initial Sob Position Country City City City Consil Canify Canify Canify Consil Canify Consil Canify Consil Canify Consil Canify Canify Consil Canify Can	6-t	
Business fee	Deb .	
Account Information Professor Confirm Professor Confirm Professor Security Word Hind Security Word		Register
Copyright MERICARE Holding 2010-2012		

Figure 12 : New User Registration

All fields marked with * are Mandatory.

Fill your Personal Information correctly (First Name, Middle Name, Last Name...).

Specify and confirm your *Preferred Password*.

The current *Preferred Password* length is of minimum 6 characters, and it must be complex it means it should contain at least one from **each** of the following characters:

- 1. Small Letter (a, b, c ...)
- 2. Capital Letter (A, B, C ...)
- 3. Special Character (*&%#@ ...)
- 4. Number (1, 2, 3 ...)

Insert a *Security Word Hint* and *Security Word*, and memorize them. In case you forget your password, you may contact **NEXtCARE-HELPDESK** to get a new password; you will then be asked for the Security Word Hint and Security Word to confirm your identity. If you answer correctly, **NEXtCARE-HELPDESK** will provide you a new password.

Click on **Registration** button **Register** to save your registration.

The new user request will then be sent to **NEXtCARE-HELPDESK**. Kindly do not use this module, and make your requests for new users through Pulse Support Email.





5. Login to PULSE

To Login to PULSE, fill your User Name and Password correctly;

If you want the system to remember your User Name the next time you access PULSE, check the Remember my Username checkbox.

If you want the system to remember your **Password** the next time you access **PULSE**, check the Remember my Password checkbox.

If you check both checkboxes, system will automatically log you in next time you access PULSE.

Login Now click on the Login button



Figure 13 : Login Section

6. Home Page

Once logged in, the Home Page will be displayed.

Pulse 201	2				amber1 Am	ber - Al I	Noor Polyclinic	DXB
TATSHP (Main Menu 🕠 Ho	me 🥩 Iligibility Check	V riew Llaim	🛕 Claims Not Delivered	🔞 Claims Query 🔔	7005	NEXTORE AN	ABER
6 Home				11 - H - H			-	Milliol 🗠 🕈
Claims with P	Pending Pre Certification Re	ply (Click on Show Data to	o refresh the data)		Search		Shoe Data	Show All
Date	Reference # Card #	FOB (Class)	Patient Name	Payer	Estimation	Currency	Pending Reason	
No records to	display.	•					0 fier	n in 1 pages
Registered Cl	laims without Pre Certificati	on (Click on Show Data to	refresh the data)		Search		Show Data	Show All
Date	Reference # Card #	FOB (Class)	Patient Name	Payer	Estimation	Corrency	Status	
No records to	display,							
	N Page size: 10	•]					0 item	n in 1 pages
Pre Certified Claims (⁵ Click on Show Data to refr	wh the data)			Search	1.4	Show Data	Show 44
Date	Reference # Caril #	FOB (Class)	Patient Name	Payer	Estimation	Carrency	Status	
No records to	display.							
* • 1	• M Page size: 10	*					© item	n in 1 pages
Copyright NEX	GARE Holding 2010-2013 - Ver	ven: 2.4.0.0			Connec	red to TATSH	Serven Since 27-May-2	111 6ol7-16 PM

Figure 14 : Dashboard – Home (Empty)

In Home Page, claims will be displayed in three divisions:

- a. Claims with Pending Pre Certification Reply
- b. Registered claims without Pre Certification
- c. Pre Certified claims



In each division, the last 10 related claims will be displayed; claim of the past 7 days are displayed in the

Home Page, by clicking the Show Data button Show Data

To view all claims of a division, click on its related Show All button Show All

Related page will be displayed as shown below.

A Home	<u>×.</u>							2 1	Semial
Claims with	Pending Pre Cert	ification Reply (47)			Search			Show Data	Show Al
Date	Reference #	Card #	FOB (Class)	Patient Name	Payer	Estimation	Currency	Pending Reason	
23-05-2013	C0000001274/1	796FAC4D98D5F7C3	Out-Patient	Stella Mary David	Alliance Insurance Company	0.00	AED	Pending for Nextcare	Response
22-05-2013	C0000001263/1	591AE9E9CE04B4C9	Out-Patient	STEVEN ROMITH JOHN	Alliance Insurance Company	0.00	AED	Pending for Nextcare	Response
22-05-2013	C0000001261/1	991AE9E9CE0454C9	Out-Patient	STEVEN ROHITH JOHN	Alliance Insurance Company	0.00	AED	Pending for Nextcare	Response
22-05-2013	0000001260/1	591AE9E9CE0484C9	Out-Patient	STEVEN ROHTH JOHN	Alliance Insurance Company	0.00	AED	Pending for Nextcare	Response
22-05-2013	0000001259/1	991AE9E9CE0464C9	Out-Patient	STEVEN ROHITH JOHN	Alliance Insurance Company	0.00	AED	Pending for Nextcare	Response
8 4 1	234367	3910 • H	Page size: 5					47 items	н 10 рази

Figure 15 : Dashboard – Home (ShowData)

6.1 Claims with Pending Pre Certification Reply

A claim is set to be pending with a pending reason when it needs an Authorization and is still missing information from either the payer, Provider or **NEXtCARE** in order to be processed.

esting 0	Main Mer	u 🕜 Home 🛩	Eligibility Che	k V Ne	v Claim	ms Not Delivered 🛛 Cla	sims Query	Inbox	
Pending R	teplies		engionity enco				and goody 📠		
rom Date	12/03/2	2013		To Date	19/03/2013		Search		
laims with	Pending Pre Cert	ification Reply(2)				S	earch		Advanced Search
Date	Reference #	Card #	FOB (Class)	Patient	Name	Payer	Estimation	Currency	Pending Reason
18/03/2013	C000000129/1	AB9C70DA0C96A4A	Out-Patient	Patient I	Full Name1 .	Insurance Company	37975.00	LBP	Pending for Nextcare Response
18/03/2013	C000000128/1	AE3742C1CF4556B4	Out-Patient	Patient I	Full Name2 .	Insurance Company	11025.00	LBP	Pending for Nextcare Response
H 4 1	► H Page	e size: 10 💌							2 items in 1 pag

Figure 16 : Dashboard – Home (Pending precert)

Page may also be reached by clicking on **Pending Replies** button **Pending Replies** from the **Main Menu.**

6.2 Registered Claims without Pre Certification

When a claim is identified by the system that it does not need a medical precertification, claim status will automatically be set as "**Registered**" and claim can be processed directly.



Testine D	1									Pine
TATSHE	ManMen	s 🔾 none 💅	Bigmily Own	A New	Oaire 🛕 C	Saires first Delivered 🔞 🛛	wins Query 🚊	bins 1	VEXTORE	Phones Available
Claims W?	O Pre-Certifica	ition								
rom Data	12/03/2013	To Data	19/03/2013	11	Search					
Registered Ga	ien without Pre Ce	rtification(2)					Search			Advanced Search
Date	Reference #	Card #	TOB (Clene)	Patient P	lame	Payer	Extination	Currency	Status	
18/03/2013	C0000000127/1	A89C70DA0C96A4A1	Out-Patient	Patient Fo	#Name1	Insurance Company	11025-00	LEP	Registered	

Figure 17 : Registered claims

Page may also be reached by clicking on **Claims w/o pre-certification** button ^{Claims w/o pre-certification} from the **Main Menu.**

6.3 Pre Certified Claims

After **NEXtCARE** decision is taken, the claim is now **Pre-certified** with status set to "**Authorized**" or "**Declined**".

Pulse 20	12						Usern	ame Medical Center 🕻
TATSH-	Main Mer	nu 🕜 Home 🥪	Eligibility Check	📝 New Claim 🛕 C	laims Not Delivered 🔞 Cla	ims Query 🛓	Inbox	NEXICARE In the Supervisition
Pre-Certif	fied Claims							
From Date	12/03/2013	To Date	19/03/2013	Search				
Pre Certifie	d Claims(2)				Se	earch		Advanced Search
Date	Reference #	Card #	FOB (Class)	Patient Name	Payer	Estimation	Currency	Status
18/03/2013	C000000130/1	AB9C70DA0C96A4A	Out-Patient	Patient Full Name1 .	Insurance Company	226200.00	LBP	Declined
18/03/2013	C000000126/1	AB9C70DA0C96A4A	Out-Patient	Patient Full Name1 .	Insurance Company	15000.00	LBP	Authorized
H 1	N Page	e size: 10 🔻						2 items in 1 pages
opyright NE	EXECARE Holding 20	010-2012 - Version: 1	4.5.0			Connected t	o TATSH se	erver since 19/03/2013 10:37:33 A
				Figure 18 : Pre C	Certified claims			

Page may also be reached by clicking on **Pre-certified Claims** button Pre-certified Claims from the **Main Menu.**





6.4 Claims Display and Search

When clicking on **Show All** button in any division, all related claims created in the last 7 days will be displayed.

To view earlier claims, you may change the values of the search fields *From Date* and *To Date* and then click on the **Search** button Search.

From Date	01/03/2013	=	To Date	23/03/2013	
-----------	------------	----------	---------	------------	---------

Claims will be then displayed accordingly.

Date	Reference #	Card #	FOB (Class)	Patient Name	Payer	Estimation	Currency
23/03/2013	CD000000189/1	AB9C70DA0C96A4A5	Out-Patient	Patient Full Name1 .	Insurance Company	0.00	LBP
23/03/2013	C000000188/1	AB9C70DA0C96A4A5	Out-Patient	Patient Full Name1 -	Insurance Company	0.00	LBP
18/03/2013	C0000000129/1	AB9C70DA0C96A4A5	Out-Patient	Patient Full Name1 .	Insurance Company	37975.00	LBP

Pulse interface, Status and Navigation are presented as listed below:

Pulse 201 Testing 0	2 Main Men	🕜 Home ᢦ	Eligibility Check	New Claim 🛕 C	Jaims Not Delivered 🛛 🕢 Cla	ma Query 🛓	Userna Intese	me Medical Center	
	-							Manual	×-1
									_
Claims with I	Pending Pre Certi	fication Reply (2)			Search			910	AD
Date	Raference #	Card #	FOB (Claus)	Patient Name	Payer	Extimation	Currency	Perifing Reavon	-
18/03/2013	C000000129/1	489C70DA0C96444	Out-Patient	Patient Full Name1	Insurance Company	37975.00	LBP	Pending for Nextcare Respo	inse
18/03/2013	C000000128/1	AE3742C1CF455684	Out-Patient	Patient Full Name2	Insurance Company	11025.00	LEP	Pending for Nextcare Respo	ertse :
3 4 I	+ H Page	size 5						2 items in 1 p	ages
Contraction of the second	CAP SHIT CAP	and a second						112102001103	-
Registered C	laims without Pre	Certification (2)			Search			510	ILA. W
Date	Reference #	Card #	FOB (Class)	Patient Name	Fayer	Estimation	Currency	Status	
18/03/2013	C000000127/1	A89C700A0C96A4A:	Out-Patient	Patient Full NameI	Insurance Company	11025.00	LEP	Registered	
18/03/2013	C000000125/1	AE3742C1CF4556B4	Out-Patient	Patient Full Name2	Drourance Company	11025.00	LBP	Registered	
(H)(4 (I)	H H Page	size 5 +				Caroly west		2 iteors = 1 p	ages
Pre Certified	Claims (2)				Search			Sho	A AB
Date	Reference #	Card #	FOIL (Classif	Patient Name	Payer	Estimation	Currency	Status	
18/03/2013	C000000130/1	A89C70DA0C96A4A	Out-Patient	Patient Full Name1	Insurance Company	326200.00	LEP	Dectined	
18/03/2013	C0000000126/1	A89C70040C96A4A	Out-Patient	Patient Full Name1	Insurance Company	15000.00	LEP	Authorized	
Part Start and	• W Dece	the s						2 Herms in T.e.	

- [2]. User Name that is logged in into PULSE
- [3]. Medical Organization (Provider) Name that the logged in user belongs to
- [4]. Log Out button: redirects the user to the Login Page

2



Manual 🔹 🔻	
Manual	
Every 1 min	
Every 2 min	
Every 5 min	
Every 10	
min	
Every 15	
min	

- [5]. Auto Refresh: to specify Mode and Duration
- [6]. Logged in user's Provider Logo

[7]. NEXtCARE Logo

- [8]. Main Menu button: to navigate through pages, click to open the main menu or close it;
 - [a]. Provider's Name: redirects you to the Home Page
 - [b]. Folder: group pages by category, and collapse/expand when clicked
 - [c]. **Page Name**: redirects you to the target page; All pages are displayed and can be reached from this menu
 - [d]. Hide Menu: close the menu



- [9]. **Toolbar Menu**: Shortcut menu buttons to the most used pages
- [10]. Opened Page Name
- [11]. Status bar including NEXtCARE Copyright and the current PULSE Version
- [12]. Connection status



7. Eligibility

7.1 How to check eligibility

Eligibility is one of the primary and core modules of Pulse and essential of all providers enrolling onto this service.

Eligibility Verification								
Eighilits Verification	* Payer * Card Ø * Type	In-Patient	•	* Pin‡	Service Date	11/09/2013 17:12		
Copyright NEXICARE Holding 203	(0-2013 - V	ersion: 2.6,0,0				Connected to TATSH ser	Check Eligibility ver since 11/Sep/201	Reset

Steps to follow:

- Leave the payer drop menu without selecting
- Enter the entire set of 16 digits displayed on the card
- Card data can be entered without "-" between every 4 digits
- Card data does not contain the "alphabet" "o" and is in cases where it is shown is always a numeric "0" (zero)
- Omit the PIN entry as it is not applicable in all regions
- Select the "Type" of service that is requested at the event of "eligibility"
 - Eg: Outpatient, Inpatient, Maternity, Dental, etc...
- Once done, click on Check Eligibility

Eligibility Verification	Payer			Service Date	11/09/2013 17 12		
	" Card A	47D4B3CD9D86EC66	* Pin #				
	° Type	Out-Patient					
						Check Eligibility	Reset

7.2 Eligible Member

Once the Insured Patient Information section is properly filled, the Medical Information and Service



CINCLES OF COMPANY		DOB 30/08/1999	Gender	Male	Validity Between	01/01/2013 and 31/12/2013
Card # 47D49	33CD9D86EC66		Coverage information	Out-Patient		
Provider Amber	- Al Noor Polyclinic - DXB		Date	11/09/2013 1	Network	General Network
Patient File No.			Patient Tel. No.	-	Copart/Co.ins	Copart 100%
Policy Holder UNION	NATIONAL BANK		Deductible	0% AED		
Payer Name Al Wat	hba National Insurance Co.		Consultation	Deductible 50 AED (e	sa)	
Category CATE(GORY B		Class	A	Pharmacy	Covered
DM# No					Limit	2000 AED

7.3 In-Eligible Member

Once the Insured Patient Information section is properly filled, the Medical Information and Service

tericiary name	DOB	Gender	valory between	
Card #		Coverage information Denital		
Provider		Date	Network	
Patient File No.		Patient Tel. No.	Copart/Co.ins	
Policy Holder		Deductible		
Payer Name		Consultation		
Category		Class	Pharmacy	
DMP			Limit	



8. <u>Register a New Claim</u>

PULSE main objective is to make the **Claim Registration** process as easy and fast as possible. With **PULSE** you will be able to send **Claim Registration** to **NEXtCARE** on the spot without making phone calls or sending faxes.

To register a new claim, click on New Claim button

New Claim from the Toolbar or on Registration Form

button Registration Form from the main menu. New Claim Registration page will be displayed.

Carol #	Pin B	* Desieffciery Name		Titeac	Geoder	Search
talice #		Validity Between		Pavar	[Address]	1 Destroyer
to Bart Battan States						
Checkler .			Chart - Consultation Date	100	Tree	
Family of Cause	- Caine		"Diagramin	(111)	110	Clean
ervice Information						
Service Date: 33/Oct/20	3 3:42:13 PM Estimated Co	at	Invoice #			
Service Items/Attachment	u					
Services/Procedures	Attached Documents					
Code		Description			Laboratory Radiolog	ey Classic Search 🖎
Hen Lole	hun bearigsse		Garven Barn	D-100	Dog HR (barren	Wat Poise Tensi
		N	o data to display			
						×

Figure 20 : New Claim Registration

8.1 Insured Patient Information

To find the target beneficiary, fill the following:

- 1. at least the first 4 digits of the Card Number , the Pin Number or the Policy Number
- 2. at least the first 2 characters of the beneficiary name
- 3. the beneficiary Year of birth in the DOB field

Now click on **Search** button **Search** or press Enter on the keyboard.

4. If entered criteria are correct and they return only one beneficiary, the Insured Patient Information will be automatically filled.

	A second and a second of provided the second second							
Card #	1206FB5BC46FEDE9	Pin #	60016285	* Beneficiary Name	Patient 1 Full Name	* DOB	01/01/1985	Gesder Male
Policy #	H09/11/08/00000123	Pat	ient 1 Policy	Validity Between	30-Jul-2011 12:00:00 A	Paver	Paver Name	

5. If entered criteria are correct and they return multiple beneficiaries, Insured Patient Information popup will be displayed, and you will be able to choose the proper patient.





Card No	Pin #	Name	Dob	Gender	Policy No	
1206FB5BC46FEDE9	60016285	Patient 1 Full Name	01- 01- 1985	Male	H09/11/08/00000123	MAJI
123094DFEE98E4B5	288522	Patient 2 Full Name .	01- 01- 1985	Male	P/300/01/11/100018	Al En
12414F2C2DB9FE02	22586	Patient 3 Full Name .	15- 02- 1985	Male	2100055	AL SF
12491D05CF611785	308621	Patient 4 Full Name .	01- 01- 1985	Male	P/801/01/11/110987	мон
1206DE33F15A13A1	300009	Patient 5 Full Name .	10- 05-	Female	P/595/01/11/100016	alma

Figure 21 : Insured Patient Information Popup

Double click on the target patient row to be selected, and have his information filled in the Insured Patient Information section

6. If the entered criteria are incorrect or patient policy is not active, the following alert will be displayed, and you will have to re-enter correct information in order to proceed.



8.2 Medical and Service information

Once the **Insured Patient Information** section is properly filled, the **Medical Information** and **Service Information** sections will be enabled.

In these sections, all the fields marked with * are Mandatory to be filled.

Fields functionality

Field	Description
Physician	Search for the Physician by filling part of his name (first box), or the complete license number (third box). If entered criteria match only one physician, physician information will be filled in physician boxes. If searching by the physician name returned multiple physicians, Physician Information popup will be displayed allowing you to select the proper physician.





	Medical Information				
	*Physician samue			Clear	* Consultation Date
	* Family of C				
	Familes Inf	A A MARK AND A MARK		General Medecine	GD8816
	Service Intersobha Samuel	Peediyakal biling Spood		General Medecine	GD7414
	Anu Samuel	milps saeeo		Dentist	MOHD2498
	Service Iter Wisam Samue	L.,		Dentist	DHA68102DWIS
	Services Benjamin Sam	uel		Dentist	DHA75318DBEN
	Code Samuel Hyatt	uei		Dentist	DHA-P-0013723 DHA76010DSAM
	code				
	If optorod critoria are i	ncorroct a no	tification will be	raised	
O		ncorrect, a no			
Consultation date	Consultation date is th	he date of phy	sician's report. C	onsultation dat	e cannot be greater
	than Service Date.				
Туре	To specify the claim Se	ervice Type yo	u have to select f	rom the Type d	rop down list.
		(Out-Patient	•	
			In-Patient		
			Emergency Room Servi	tes	
			Out-Patient		
			Chronic Out		
			Maternity		
		-	Psychiatry		
Family of Cause	The Family of Cause d	rop down list*	[*] contains the fol	lowing values:	
			Accidental Injury	•	
				_	
			Accidental Injury Dental		
			Maternity		
			Other		
			Physical Illness Poisoping		
			Preventive Care &		
			Checkups		
			Psychiatric		
	* - 1				
	* Please refer to Appe	endix I for FOC	list.		
Cause	Cause values will be fi	tered depend	ing on the Family	of Cause select	ted.
	It refers to the precise	cause of the o	claim.		
	Note below the condi	tions as to ho	w the claim need	ls to be encode	d in Pulse
		Туре	Famil	v of Cause	Cause
		3 1		,	
	Optical	Optical	Physic	cal Illness	to be specified
	•		J -		under assessment
	Maternity related	Out-patient	Mater	nity	Others
	claim	-			
	Dental related	Dental	Denta	I	Any
	claim				





	Claims other than Maternity, Dental, or Optical	Out-patient	Physical Illness	to be specified under assessment
Diagnosis	Based on DHA standar Fill part of the Diagno diagnosis. If the entered search v displayed directly. If the entered search v will be displayed and y	ds, recommended o sis name (4 characte value matches only o value matches multi vou will select the pr	coding is ICD10. ers at least) and press En one diagnosis, the result ple diagnoses, the Diagn roper diagnosis.	iter to find the target diagnosis will be tosis Information popup
	If the entered search w The <i>Diagnosis</i> checkbo shortlist only. Once the <i>Diagnosis</i>	value is incorrect yo ox should be checke is selected, the Curr and Attached Docu	u will be notified accordi ed if you want to apply se r ency will be filled, and t ments tabs will be enabl	ingly. earch on the diagnosis he Services/Procedures led.
	Medical Information Physicial Socha Samuel Receivant Ferding of Cense, Physical Direct A03.0 Shigelitensi due to Shigelia siyeenter A05.0 Sociale ametics doewnoory A05.2 Samobic cossilycenteric costilic M52.10 Postolycenteric anthropathy, left M52.112 Postolycenteric anthropathy, left M52.112 Postolycenteric anthropathy, left	al deneral Medeone 007414 • • • Cone to be specified under enses entired site shoulder shoulder secified shoulder	ther * Canaditation Date 23/35/2013 * Diagnosity dystar Centain infectious and Centain infectious	* Twee Cut-Pariant Clear Clear Cpanalitic diseases (ADD-005) [parabitic diseases [parabitic diseases [parabitic diseases [parabitic diseases [parab
More Diagnosis	Adding Multiple Diagn diagnosis with OnSet I Moreover the provide "Respiratory Rate", "V	osis Feature on PUL Date for each diagno r is able to enter the Veight", "LMP" and	SE that allows providers osis (currently the OnSet e "Blood Pressure", "Tem "Chief Complaint Sympto	to add more than one date is optional). nperature", "Pulse", oms" (same as TATSH BO)
	Public 2013	ene ♥ Dightely Court (// Tree C ene Francisco functional ene Francisco functional velocitational courter and the functional velocitational	ann Alexandra Delana (Alexandra)	AAvak Confirm CEDIM



	Claim Diagnosis						
	Tarres and the T	- Canada	÷.				
	Blood Pressure	Resp Rate		Chief Compleint Symptome			1
	Pulse	LMP	100				
	/ Scientific Assessment		1.125.1				
	Search For Specific Assessmen	e [4			
	Specific Assessment	411411-040		Canaral Apparents	Q. Brinkary	C+Sat Date	11
	789.0 Abdominal Pain	Symptoms (78	>789)	Symptoms, Signs, III-defined Condition	Vei		
	4						
						-	OK.
							· .
					_		-
	The "OnSet Date" ca	nnot be greate	r than s	system date			
	Primary diagnosis ca	nnot be delete	d from	, the table inside the dialog			
Estimated Cost	Claim Estimated Cos	t will be marke	d as ma	andatory when you try to sa	ve the	claim w	vithout
	selecting any item in	the Services/I	Procedu	i res tab.			
Length of Stay	The <i>Length of Stay</i> fi	eld will be ma	ndatory	when the claim type is In-F	atient	,	
	Else it will be hidden						
Service Date	Since claims are to b	e reported on	service	time, Service Date is disabl	ed and	set equ	al to
	present date and tim	ie.				-	
Currency	Currency is disabled.	After filling th	e Medi	cal Information fields, curre	ency w	ill be	
	automatically filled b	y the system b	based or	n the provider agreement fo	or the s	selected	
	beneficiary, type and	service date.					
Invoice Number	Invoice Number is fo	r the claim ger	nerated	from the Provider's system			

8.3 Services/Procedures

All **Services** and **Procedures** that need to be provided to the patient should be listed in the claim registration.

rvice Items/Attachment	5				
Services/Procedures	Attached Documents				
ode 9921		Description		Laboratory Radiology	Classic Search
99211	Office or other outpat	dent visit for the evaluation a	nd management of an established p	atient, that may not require the p	Evaluation
99212	Office or other outpat	lent visit for the evaluation a	nd management of an established p	atient, which requires at least 2	Evaluation Managem
99213	Office or other outpat	ient visit for the evaluation a	ind management of an established p	atient, which requires at least 2	Evaluation
99214	Office or other outpat	dent visit for the evaluation a	ind management of an established p	atient, which requires at least 2	Evaluation
99215	Office or other outpat	ient visit for the evaluation a	nd management of an established p	atient, which requires at least 2	Evaluation
4					- Constant

To add Items to the claim, just type in the "CPT Code" of the requested item as shown above and the results will be displayed. Select the appropriate and the "service item" and it will get added to the list.





Available search fields are *Item Code*, *Item Description*. Fill any of the fields with the proper criterion and press enter to get the results. Now double click on the item in the rows displayed to be added to selected items.

Apply as many searches and selections as needed to add more than one item.

To add Multiple Items in one click:

Enter service item codes separated by "semicolon" and just press enter after done. All items existing will be added.

ode 99214;8707	2;10	Description			Laboratory	Radiology	Classic Search	-
men Code	Merin Description		Service Statue	Drug 00	Drug P07	Guara Str.	linit Price	Tantel
			No data to display					
			No data to display					
			No data to display					

Figure 23 : Items Selected

Some items will not show a price element

ode	Description			Laboratory	Railiclogy	Classic Search	4
Burn Code	Deen Description	Service Rame	Drag DD	Drug POT	Guarring	Unit Price	Total
10	Consultation Specialist	Evaluation and Management	0	0		1 105	105
87070	dulture, bacterial; any other source except urine, blood or stool, aero.	Pathology and Laboratory	0	0	/	82.5	82.5
99214	office or other outpatient visit for the evaluation and management o.	Evaluation and Management	0	0		10	0
	Multiple items added		Availa price	ble	(price not available]

Figure 24 : Items Details

In case of that, kindly refer to the agreed price list and if its duplicated, then enter a note stating the approved price with the "provider internal code" in the Notes section of attached documents.

For Pharmacy:

Selected items grid columns are: Item Code, Item Description and Quantity.

When *Claim Type* is "Out-patient" and *Item Service* is "Pharmacy Medicines" the columns *DruggDD* (Drug Daily Dosage) and *DrugPoT* (Drug Period of Treatment) will then be *visible and enabled*.





Use the Edit button Edit in row level to adjust Quantity.

To save changes click on **Update** button Update, to discard changes click on **Cancel** button Cancel.

Services/Procedures	Attached Documents							
iode		Description			Laboratory	Radiology	Classic Search	9
Item Colle	itam Dauription		Service Rame	Drug DD	0rug 907	Quartity	Unit Price	Total
10	Consultation Specialist	Evaluation and Management	٥	0		1 105	105	
87070	Culture, bacterial; any other so	ource except urine, blood or stool, aero	Pathology and Laboratory	0	0		1 82.5	82.5
99214	Office or other outpatient visit	for the evaluation and management o	Evaluation and Management	0	0		10	0
0006-106601-0392	PANADOL ADVANCE (PARACET	AMOL (300 MG)) FILM COATED TABLE	Pharmacy and Vaccinations	0	0	1	0	0

To remove an item row from the selected items click on the **Delete** button ______ at the bottom

Once you finish adding Services/Procedures, click on "Send Registration".

8.4 Attached Documents and Notes

To provide **NEXtCARE** with additional notes (claim details, patient conditions ...) or any other relevant documents (medical report, claim invoice, official papers ...) you may add **Attachments** and **Notes** to the claim.

In case you did not find any item on PULSE, attach the medical report, select the **Attached Documents** tab to display the **Attachments and Notes** grid and the **Upload File** box.

Sanicau/Procedures	Attached Doci	uments					
Delete	File Type	The Name	Notes		(Uptoold	Ele .	
No records to display.							
	Pagesize: 10			0 mmi in 1 pages			
10					Notes		
							Leiet
						Post Note	
						ADDRESS OF ADDRES ADDRESS OF ADDRESS OF ADDR	

Figure 25 : Attached Document Tab

Fill the Notes field with relevant information, and if a document related to the note is available and should

be attached, click on **Select** button Select and browse for it.

The **Selected Document** name will be added under the **Notes** field, with the **Remove** button available to delete selection when needed.





	broken leg with injury, fell on the stair	
Notes		
	bill defaits - intro0000006.temp s/Rentance	
	Post Note	

Click on the **Post Note** button to add the **Notes** and the **Selected Document** to the **Attachments and Notes** grid.

Notes are mandatory to be added to claim if items are not added in the Services/Procedures tab.

8.5 Save Claim

Now after you have inserted claim information correctly in all the claim section, you will be able to save the claim and send it to **NEXtCARE**.

Pulse 2012								Username	e Medic	al Center
TATSH	🙀 Main Menu 🕠 Home	Seligibility Chec	k 📝 New Claim	Cla	ims Not Delivered	00	laims Query	Inbox NE2	(CAME	AL DO
New Claim Re	egistration									
nsured Patient I Card # AB9C7	nformation 70DA0C96A4A5 Pin #		* Beneficiary Name	Patient F	ull Name1	- D08	01/01/1966	Gender Male		Search
Policy # Patient	t Full Name1 Patient F	Full Name1	Validity Between	01/10/20	12 12:00:00 A	Payer	Insurance Con	npany .		
Medical Informa "Physician	tion Physician Name	Not Specified	[999999/A	Clear	* Consulta	tion Date	21/03/2013	Type Ot	it-Patient	•
ervice Informat	tion	- cause to be spe	unica under assessm	ien a	Control	/are	703.0 A000mm			
Service Date 2	3/03/2013 17:06:20 📰 Esti	mated Cost		Currency	LBP		Invoice #			
Services/Proce	edures Attached Docum	nents								
dd New Record	9									
Item Code	Item Description				Quan	tity	DrugDD	DrugPOT	Edit	Delete
85022	Hemogram, automated, o	complete CBC,NFS				1	0	0	Edit	Delete
81000	Urine analysis, general phy	vsico-chemical+micro	icop			1	0	0	Edit	Delete

Figure 26 : Claim Information

Click on **Send Registration** button Send Registration a confirmation alert will be displayed.



To confirm and send the claim, click on **Ok** button



To apply changes and additional validation before saving, click on **Cancel** button

To discard the claim and create a new one, click on **Reset** button

When claim is saved a confirmation message will be displayed with the claim Reference Number as a link to the saved claim.

Claim has been successfully Registered. Reference Id is C0000000976/1

Notes: Kindly make a note of this claim number on your claim form for future reference

8.6 Specific Warning Messages

 If claim is issued for the same Beneficiary name, date and FOB (type), a popup window will appear. In this case, provider should double check – through the claim query screen - if claim was already entered on PULSE.



2. In case provider is not within the selected network, the below popup window will appear.

Pulse 2012							Username M	edical Center
TATSHIC Main Menu	🕡 Home 🥪 Eligibility	Check 📝 New Claim	🛕 Cla	ims Not Delivered	? a	aims Query 🛓 Ir	NEXTCAN	
New Claim Registration								
Insured Patient Information					-		-16	
Card # AB9C70DA0C96A4A5	Pin #	* Beneficiary Name	Patient F	ull Name1 .	* DOB	01/01/1966	Gender	Search
Policy # Patient Full Name1	Patient Full Name1	Validity Between	01/10/20	12 and 30/09/:	Payer	Insurance Compar	iy	
Medical Information *Physician Physician Name	Not Specified	1 99999/A	Clear	- Consultat	ion Date	22/03/2013	• Type Out-Patie	ent 👻
* Family of Cause	• Cause		•	• Diagno	sis 💡 [
Service Information								
• Service Date 23/03/2013 17:31:07	Estimated Cost		Currency	LBP		Invoice #		
Services/Procedures Attac	ched Documents							
Add New Record								
Item Code Item	Description		Quantity	Dr	ugDD	DrugP	OT Edit	Delete
No records to display.								
	1205: Provider	not within the	Agreed	Network fo	or the	selected Be	neficiary	
		Send Registratio	0	Reset				
Conversions NEVICARE Helding 2010 2	012 Version: 1 4 5 0				_	Connected to	TATCH FADING SIDE	22/02/2012 6-26-20

3. In case provider selects a FOB (type) that is NOT allowed as per patient benefit, the following message will appear on the screen: "the selected FOB is not available within the beneficiary policy".



Pulse 2012							Usern	ame Medi	ical Center
TATSH Main Menu	lome 🤗 Eligibility Ch	eck 📝 New Claim	🛕 Clai	ms Not Delivered	🕜 Cli	aims Query 🛓	Inbox	NEXICARE	
New Claim Registration									
Insured Patient Information Card # AB9C70DA0C96A4A5 Pin #		Beneficiary Name	Patient F	ull Name1 .	* DOB	01/01/1966	Gender	[]	Search
Policy # Patient Full Name1 Pat	ient Full Name1	Validity Between	01/10/201	2 and 30/09/:	Payer	Insurance Comp	any		
Medical Information *Physician Physician Name	Not Specified	99999/A	Clear	• Consultatio	on Date	22/03/2013	• Type	e Out-Patient	•
* Family of Cause	Cause		•	* Diagnosi	is 🗸 🛛				
Service Information Service Date 23/03/2013 17:31:07	Estimated Cost	0	urrency	LBP		Invoice #			Į.
Services/Procedures Attached D	locuments								
Add New Record									
Item Code Item Desc	ription	q	ptity	Dru	gDD	Dru	POT	Edit	Delete
No records to display.	1200: The select	ted FOB is not av	ailable	within the B	enefic	iary Policy	ļ		
Copyright NEXtCARE Holding 2010-2012 -	Version: 1.4.5.0	Send Registration		reset	_	Connected	to TATSH :	server since 23.	/03/2013 6 36 20





8.7 Registration and Precertification Process

When you submit the claim, the system will verify the entered data and claim will have one of the following statuses:

- I. **Registered**: Claim identified by the system that it does not need pre-certification process by NEXtCARE Claim Center, claim *status* will be automatically set as "**Registered**", and claim evaluation and adjudication will be made after submitting claim papers at the end of the agreed period.
- II. **Declined:** Claim identified by the system as not approved, claim *status* will be automatically set as "**Declined**" with the proper **Declined Reason** listed in claim details.
- III. Pending NEXtCARE Precertification: Claim needs pre-certification process by NEXtCARE Claim Center to decide if it should be Authorized or Declined. Claim status will be automatically set as "Pending", with the Pending Reason set to "Pending for NEXtCARE Response". In this case, the claims' center officer at NEXtCARE will review the claim in order to take the appropriate decision.
 - If claim needs more clarification or is missing required documents from the provider, claim *status* will remain **Pending** and the *Pending Reason* will be set to "Pending for Provider Response" awaiting your revision and reply
 - Else, the claims' center officer at NEXtCARE will take the decision:
 - Claim "Authorized" with Visa Notes listed in claim details
 - **Claim** "**Declined**" with the proper **Declined Reason** listed in claim details To get claim status you must frequently refresh page.



Figure 27 : Claim Registration and Precertification Process







9. View Claim Details

When sending the claim registration, click on the **Claim Reference** link ^{C0000000976/1} to verify the claim details, the precertification terms, the approved procedures and amount.

You may also access the **View Claim Details** page later on by double-clicking on a claim row from any grid in the application (e.g. **Home Page, Search Results** ...), you may then re-check a claim and apply revisions and extensions if necessary.

Under View Claim Details page, all claim details will be disabled; you may only view Insured patient Information and Medical Information without being able to edit them.

Claim Status and Claim Reference are also displayed on the page top.

								User	name Mes	dical C	enter C
TATSHE (Main Menu O Hurre	V Digitility Ch	ect 🔃 1000	Claim 🛕 Cl	aires No	Delivered	Carris Query	2 blex	NEXTERN	25	AL 241
View Claim Deb	aits										
Medical Report and	IN IN MEMORY				-	Claim St	stus: Registered	cu cu	in Anterence C	-0000000	129/1
Incured Patient Inform Card # AB9C700A00	S6A445 Pin #		Beneti	clary Name Patie	e Full N	arred -	DOB 01/01/1966		Gender I	Male	
Poticy # Patient Full N	lamel Patient Ful	Namal	Valide	ly Between 05/31	/2012 #	wi 30/09/2013	Payer Incurance (Сотрату			
Medical Information Physician: Ph Family of Cause In Length of Stay 0.0 HealthCare Service Pr Service Date 18/	psician s Name N yscal Briess = 0 0 wolder Information 01/2013/000 Estimated	tot Specified autor to be specific	99995.A	Currency LBP	Consu	Involute #	45,253 123 Loss of weight	Туре	Out-Patient		
Services/Procedure	Pre-Cartification T	erres & conditions	Attactive	Documents	Adjude	ordiant notes	Applied Banefits				
Services/Procedure	n Pre-Cartification T	erre & conditions Service	Attached I	Qty Approv	Adjust	Init Price	Apprint Banafits	Discount	Patient 3	Dary	Net Calor
Services:Procedure Item Code 82947	Intern Description Gluccos (FBS)	Service Laboratory	Attached C	Qty Approv	ndjudi 1	Init Price 3,675.00	Total Approved 3,675.00	Discount	Patient 3	0.00	Bet Calor 3/
Services/Procedure Item Code 82947 83036	Pre-Certification T Item Description Glacese (FBS) Hemoglokies glycated (H	Service Laboratory B Laboratory	Attached I	Qty Approx 1	Adjuds red 1 1	Init Price 3,675.00 34,300.00	Total Approved 3,675.00 34,300.00	Discount 0 0	Putient 3 100	0.00 0.00	Net Chin 30 34,
Services Procedure Item Code 82947 83036	Pre-Certification T Item Description Glocese (FES) Hemoglobies glycated (H	erne & conditions Service Laboratory 8 Laboratory	Attached I	Qty Approx 1	ndjudi 1	utun notu Init Price 3675.00 34,300.00	Applied Burning Total Approved 3,675,00 34,300.00	Discount 0 0	Patient 3 100	0.00 0.00	Net Chile 30 34
Service:Procedure Item Code 82947 83036 • [2] Net Claime	Pre-Certification T Inem Description Glucese (FBS) Hemoglichics glycated (H 37 975 00	Service Service Laboratory E Laboratory Total Approved [3	Attached (Qty Calmed	Ory Approx 1 1 	ndjudi end (1 1	Init Poice 3.675.00 34,300.00	Applied Benefity Total Approved 34,300.00	Discount 0 0 er Share [37,57	Putient 3 100 100	0.00 0.00	Hert Claim 30 34, 1
Service Procedure Item Code 82947 83036 • [2] Net Claimer	Pre-Certification T Inom Description Glacese (FBS) Hemoglobic: glycated (H	Service Laboratory E Laboratory E Laboratory Total Approved [3	Attached I Qty Calmed 17.975.00	Ory Approx 1 3 Patie Mark China at	Adjudi ed () 1 1 0 Share	Init Peice 3.675.00 34,300.00	Approved Reverse Total Approved 36,75.00 34,300.00	Discount 0 0 er Share [37,50	Patient 5 100 100	0.00 0.00 0.00	Net Calo 3/ 34.

Figure 28 : View Claim Details

9.1 Totals Computation

Under **Services/Procedures** tab, for each item you have added to the claim, the **Quantity Approved** and the **Unit Price** will be displayed. If **Quantity Approved** is different than the **Quantity Claimed**, proper **Adjustment Reason** will be listed.

The **Total** *Approved*, *Discount*, *Patient Share*, *Net Claimed* and *Net Approved* will be calculated considering the item's Unit Price and all related conditions and limitations (limits, Co-parts and Excess).

If claim has no items, the calculation will be applied based on the claim *Estimated Cost*.

Claim **Total Amounts** will be displayed in bottom of the page and *Estimated Cost* will be updated and set equal to claim *Payer Share*.





item Code	Tem Description	Service	Qty Dained	Qty Ay	prmetd	Unit Price	Total Approved	Discout	Patient Share	Not Claim
1131905	(K	Liberatory		1	1	140.00	14530	a	90 29:30	

Figure 29 : Totals Computation

9.2 **Pre-certification Terms and Conditions**

To verify the *Decision* taken concerning a claim (Authorized, Declined, Pending...) and the Visa Notes filled by the Claims' Center Officer, click on the **Pre-certification Terms and Conditions** tab.

For "In-Patient" claims the Approved Length of Stay, Class and Priority Payer will be specified.



Figure 30 : Pre-certification Terms and Conditions

9.3 Add Claim Revision and Extension

To send requests related to claims to **NEXtCARE** such as an extension of the claim length of stay or addition on the applied **Services/Procedures**, or to deliver missing official papers or documents requested by **NEXtCARE**, go to the **Attached Document** tab.

Attachments and *Notes* added previously will be displayed in the grid. To open an attached document double click on its row or on its **Type Icon** displayed on page top beside the *Claim Status*.

To request modifications and additions or send requested documents, fill the **Notes** field with clear description of your request or of the document you are sending; and to attach a document, click on **Select** button and browse for it.

Click on the Post Note button to submit the Notes and the Attached Document.

9.4 Adjudication Notes

If the *Approved Amount* is adjusted and is different than the *Claimed Amount*, check the adjustment reason inserted by NEXtCARE Processing Officer, in addition to the justification under the **Adjudication Notes** tab.





Service/P	onlaw.	Per Carifo alors Tamis & conditions	Attached Documents	Adjustication ratios
Adjustice Tables				
_	_			

Figure 31 : Adjudication Notes

9.5 **Print Authorization**

To print the claim details and sign the **Registration Claim Form** with the patient before proceeding with

the claim, click on button

To print the claim (authorization, pended or declined), click on **Attached Documents** button and the latest document sorted at the top will have the necessary instruction.

This is the same form that is received through the fax.

Important Notes:

- 1- **NEXtCARE** will only approve medical charges directly and strictly related to the case registered above. The final bill is subject to our auditing doctors' approval.
- 2- NEXtCARE hereby clearly reserves the right to decline any claim settlement due to misuse, abuse or tentative of fraud related either to the entry of the aforementioned information or to its trueness.
- 3- Copy of this registration claim form should be attached to the claim on submission for reimbursement.

9.6 Mark Claim as Not Used

When a claim is sent and approved but is not proceeded, i.e. patient is not admitted to the hospital or has not performed any diagnostic tests which could happen for cases when the patient changes his mind or it may happen that the Provider noticed an inaccuracy in the saved information - claim should be set as **Not Used**.

In this case, click on **Mark Claim as Not Used** button Mark Claim as Not Used. Used Popup will be displayed.

8		8.	
Reson."			
	Deter Line		

Figure 32 : Mark Claim as Not Used Popup

Specify the Reason of your changes then click on **Confirm** button Confirm. Claim status will now be set to **Not Used** Claim Status: Not Used.

Note: Claim can only be marked as not used once "NEXtCARE" decision is provided.



9.7 Important Notes

- 1. Once a claim is submitted, it cannot be edited by the provider
- 2. Claim number that is generated after submission is essential for all claims communications with NEXtCARE
- 3. Any service item that requires more than 1 quantity will need to be submitted via the "attached notes" section, where you will need to state the "service item" number and the requested quantity for an additional approval.
- 4. When submitting the claim, all the service items have to be entered and if for additional clarification, documents or notes to be attached.

10. Search for Claims

For Claim Inquiry and examination, to find your target claim or list of claims, go to Claim Query page by clicking on **Claims Query** button from the Toolbar Or from the main menu Claims Query.

Claim Query						
Search Collaria Searc	to diamonth					
Desared Parliest Information Cont # Fig. 2 Beneficiary Name			Medical beformation Physician Diagnosis Type		Carendation Date	
Payer			Family of cause		Caute	
Claim Information Service Date from Reception Date from Date Date from	To To To	10	Claim & Batch Informatio Institut # Batch # Batch Label		Cain Reference #	
Payment Date Inovo	THE TO	10	Basch States		Clairs Statue	•
Sorting and Filtering Option	н					
Film By Sert By			* Maximum Retarned	Rows 200		
			Execute Query Orace			
Convergent Automatic residency	2010-2017 - Version: 1.8.0.3				Converted to TRITIN or	ruer since 18-04-2012 4-42

Figure 33 : Claim Query Page – Search Criteria

Available Search Criteria:

- Insured Patient Information: Card #, Pin #, Beneficiary Name, or Payer's Name
- Medical Information: Physician, Diagnosis, Type, Consultation Date, Family of cause, Cause
- Claim Information From/To: Service Date, Reception Date, Due Date, Payment Date
- **Claim and Batch Information:** Invoice #, Claim Reference, Batch #, Batch Reference, Batch Label, Batch Status, Claim Status

Sorting and Filtering Options:

- Filter By: filter claim by one of the following criteria in addition to above
 - Show Not Delivered Claims : Will only display Authorized or Registered claims having invoices or similar official papers that are not yet delivered by the provider to NEXtCARE (approved but not batched)
 - Show Expired Claims : Will only display claims that remained Not Delivered for more than three (3) months and are now considered as Expired.





• Show Adjusted Claims: Will only display claims that have difference between the Claimed Total and Approved Total amounts.



- Sort By: specify the sorting method of the search results

]	-
Batch #, Batch Reference, Service Date, Claim Ref, Invoice #	
Batch Reference, Invoice #	
Service Date, Invoice #	
Invoice #	

Maximum Returned Rows: the maximum number of rows to be returned by the query. Field is
mandatory * and it is set by default to 200 and may be changed. To return all rows, set the
Maximum Returned Rows to 0.

Fill as many search criteria as needed – at least one should be specified – then click on Execute Query

Execute Query button.

Search Result tab will be automatically displayed listing the resulted claims in a grid. You will be able to check the results in a grid and can **View Claim Details** by double-clicking on the claim row.

Frank Dates	u file								1427774	a na
Export Data (to hite								New S	earch
Rows return	ed as a search resu	it (8)							Advanced Sea	arch
Date	Reference#	Involce #	Class	Patient Name	Payer	Net Gaimed	Total Claimed	Total Approved	Discount	Pri
13/07/2012	C000000953/1		Out-Patient	Patient 1 Full Name	Payer Name	112.00	140.00	140.00	0.00	
13/07/2012	C000000954/1		Out-Patient	Patient 1 Full Name	Payer Name	112.00	140.00	140.00	0.00	
13/07/2012	C000000955/1	inv20120000012	In-Patient(Semi-P	Patient 1 Full Name	Payer Name	180.00	180.00	150.00	0.00	
13/07/2012	C0000000956/1	inv201200002	In-Patient(Semi-P	Patient 1 Full Name	Payer Name	100.00	150.00	150.00	0.00	
13/07/2012	C000000957/1	inv201200003	In-Patient(Semi-P	Patient 1 Full Name	Payer Name	180.00	180.00	180.00	9.00	
16/07/2012	C000000958/1	inv2012000003	In-Patient(Semi-P	Patient 1 Full Name	Payer Name	112.00	140.00	140.00	0.00	
25/07/2012	C000000975/1	imv20120000102	In-Patient(Semi-P	Patient 1 Full Name	Payer Name	180.00	180.00	180.00	0.00	
25/07/2012	C0000009976/1	inv20120000102	In-Pstient(Semi-P	Patient 1 Full Name	Payer Name	100.00	150.00	150.00	0.00	
1										12
8 4 1	+ H Pages	aze: 10 .							8-temp in 1 pr	ines

Figure 34 : Claim Query Page – Search Result

You may also save search results on your local machine by clicking on Export Data to File

Export Data to File button then on **Save** button Save on the File Download popup.



Do you r	vent to open or seve this bia?	
B)	Neve Date, 20-34-2012-se Tute Manualt Scientific Waterbert, 13-308 Full 1922/164009 Cpen Sone Could	
0	We lie for the internet call be useful, some lies can obtain any power can star if you do not that the starter, or not some of the first lies with the must	

Claims Search Results will be saved into an excel file as displayed below.

	Α.	B	t	U			6	н	Transie Lines	. Alexander	Kerne	L N
3	Date	* Reference #	* Imaice# *	Class -	Patient Name	Payer	Net Claim +	Total Claimed -	Total Approv *	Discout *	Patient Shi *	Payer Shat . Provder 1
-2	13/7/2012 8	00 C0000000953/1		Out-Patient	Patient 1 Full Nan	Payer Name	112	140	140	0	28	102
3	13/7/2012-0	00 C0000000954/1		Out-Patient	Patient 2 Full Nan	Payer Name	\$12	140	140	-0	28	112
4	13/7/2012.0	00 C000000955/1	#1/201206000012	In-Patient/ Semi-F	Patient 1 Full Nan	Paryer Name	180	180	180	. 0	0	100
5	13/7/2012 0	00 C0000000956/1	im/201200002	In-Patient(Semi-F	Patient 3 Full Nan	Payer Name	0	0	0	0	a	0
-10	13/7/2012 0	00 C0000000957/1	in/201299003	In-Patienti Semi-F	Patient 1 Full Nan	Payer Name	0	. 0	0	0	0	0
7	16/7/2012 0	00 0000000958/1	inv2012000003	In-Patient/ Semi-R	Patient 4 Full Nan	Payer Name	0	0	.0	0	c.	0
8												
÷9												
10												
11												
12												
비												
2.0												

Figure 35 : Claim Query Page – Export to Excel

11. Deliver Claims

To deliver claims to **NEXtCARE**, you should find the approved claims (**Registered** and **Authorized**) that are **Not Yet Delivered**, and add them to **Batches** under **PULSE**.

Click on Claims Not Delivered button Claims Not Delivered from the Toolbar or on Claims Not Yet

Delivered button Claims not yet Delivered from the Main Menu. Claims Not Delivered page will be displayed. Apply the following steps:

- 1) Select Payer Name or Contract Name as needed from the Tree Panel
 - a. Claims Nodes are displayed in Tree Panel grouped by claim Year and Month, Payer Name and Contract Name
 - b. Only **Current Month** and **Last Month** claims may be selected. **Older than Last Month** group will be displayed in tree node and are not displayed in grid
- 2) Select the **Claims** you intend to deliver
 - a. Claims related to Selected Nodes will be displayed in grid
 - b. Only Registered/Authorized claims will be displayed
 - c. Only claims having **Services/Procedures** Items can be selected (Claims with no items are displayed but may not be selected and added to a batch)
- 3) Fill the **Batch Reference**
 - a. All other fields in **New Batch information** are automatically filled by the system according to the claims displayed in grid
- 4) Click on **Create Batch** button Create Batch
 - a. Selected Claims will be delivered under the newly created Batch
 - b. Page will be refreshed to update Tree Panel and Claims Grid



Clain	n Batches	X							
Clair	ms Batches	Claims Not Deliv	rered	2					
Ilaim	is Not Delivered	d.		³ 🗗	tew Batch Information				
0	lder than Last	month (39)			Reference Germenzorzor-P1	* Period	2012-7 to 2012-7	- Paye	er Payer Name
	urrent month:	2012-07			* #Claims 3	 Claimed Amount 	224		4
1		nvas-V/	(10)						Create D
1.2	ETTER Prover	11 12-							
-	A PERI POVEL	Name(5)							
1		Name(5)							
1		Name(5) roup 2 Policy							
1		Name(5) roup 2 Policy tient 1 Series							
1		Name(5)							
1 Payer	r Name 2012-	-7/224/SAR(3)		022722		1.22003			Advanced S
Payer	r Name 2012-	7/224/SAR(3) Reference #	Invoice #	Class	Patient Name	Payer	Net Claimed	Currency	Advanced Status
Payer	Name 2012- Date 13-07-2012	-7/224/SAR(3) Reference # C000000953/1	Invoice #	Class	Patient Name Patient 1 Full Name	Payer Payer Name	Net Claimed 112	Currency USD	Advanced S Status Registered
Payer	r Name 2012- Date 13-07-2012	Name(5) roup 2 - Point cases 2 Source r/[224]SAR(3) Reference # C000000953/1 C000000956/1	Invoice # inv201200002	Class Semi-Private (3 & 4 l	Patient Name Patient 1 Full Name Beds) Patient 1 Full Name	Payer Payer Name Payer Name	Net Claimed 112 0	Currency USD USD	Advanced S Status Registered Authorized
1 tayer	r Name 2012- Date 13-07-2012 13-07-2012 13-07-2012	Name(5) roop 2 - Point access 2 Sector r7[224[SAR(3) Reference # C000000953:/1 C000000956:/1 C000000954:/1	Invoice # inv201200002	Class Semi-Private (3 & 4 i	Patient Name Patient 1 Full Name Beds) Patient 1 Full Name Patient 1 Full Name	Payer Payer Name Payer Name Payer Name	Net Claimed 112 0 112	Currency USD USD USD	Advanced S Status Registered Authorized Registered
ayer	Name 2012- Date 13-07-2012 13-07-2012	Name(5) 1000 2 - 2016 1224[SAR(3) Reference # C0000000953/1 C0000000954/1	Invoice # inv201200002	Class Semi-Private (3 & 4 l	Patient Name Patient 1 Full Name Beds) Patient 1 Full Name Patient 1 Full Name	Payer Payer Name Payer Name Payer Name	Net Claimed 112 0 112	Currency USD USD USD	Advanced 1 Status Registered Authorized Registered
ayer	Name 2012- Date 13-07-2012 13-07-2012	Name(5) 77(224)SAR(3) Reference # C000000953/1 C000000954/1	Invoice # inv201200002	Class Semi-Privote (3 & 4 l	Patient Name Patient 1 Full Name Beds) Patient 1 Full Name Patient 1 Full Name	Payer Payer Name Payer Name Payer Name	Net Claimed 112 0 112	Currency USD USD USD	Advanced S Status Registered Authorized Registered
1 Payer	Name [2012- Date 13-07-2012 13-07-2012 13-07-2012	Name(5) roup 2 Point accel 2 Point (2224)SAR(3) Reference # C0000000953/1 C0000000956/1 C0000000954/1	Invoice # inv201200002	Class Semi-Private (3 & 4 l	Patient Name Patient 1 Full Name Beds) Patient 1 Full Name Patient 1 Full Name	Payer Payer Name Payer Name Payer Name	Net Claimed 112 0 112	Currency USD USD USD	Advanced S Status Registered Authorized Registered
1 'ayer	Name 2012- Date 13-07-2012 13-07-2012 13-07-2012	Name(5) roup 2 - Point deact - 2 - Source -7/224(SAR(3) Reference # C0000000953/1 C0000000956/1 C0000000954/1	Invoice # inv201200002	Class Semi-Private (3 & 4	Patient Name Patient 1 Full Name Beds) Patient 1 Full Name Patient 1 Full Name	Payer Payer Name Payer Name Payer Name	Net Claimed 112 0 112	Currency USD USD USD	Advanced S Status Registered Authorized Registered

Figure 36 : Claims Not Delivered

12. Find Created Batches

12.1 Check Batch Information

To check and verify created batches, click on **Claims Batches** Tab Claims Batches to display the **Claim Batches** page. Page may also be reached by clicking on **Claims Batching Form** button

Claims Batching Form from the Main Menu.



Conver Forcher Chairm Halt Deformed Food Cha							Claim Batches
Field Cherne Batch Latent Latent Reference Ref Status • Doarted frame Doarted frame Ref Retain # Latent Reference # Claims # Claims # Retain # Latent Reference # Claims # Claims # Retain # Latent Reference # Claims # Claims # Retain # Latent Reference # Claims # Claims # Retain # Latent Reference # Claims # Claims # Retain # Latent Reference # Claims # Claims # Retain # Latent Reference # Claims # Claims # Retain # Reference # Invalue # FOB (Class) Patient Ranke						Claims Not Della and	Claims Ratches
Earch # Level Metrosce Metrosce <th< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td>Find Claims Batch</td></th<>							Find Claims Batch
States - Dested Free Dested For Image: Control of the con	eriol	Period	Reference		Later		Batch A
t en en lanzene (b) Retole # Label Reference # Chaires # Chaire	Find Birtoli Reset	18	Created To	田	Deated from	•	Sates
Batch # Lakel Reference # Claims # Claimed Areaant Claim							Course Annotes (2)
Notes and the state of the	Advanced Search	Chalman Annual Conner		Children R.	Balance R	Lefter 1	best f
In the State of S	COVER STATE	Cannet Alexand		Creating a.	Harden and a	Labor	No seconds to display.
c e-res he second Date Reference # Invidue # FOB (Claud Pattern Rame Pager No records to display.) Domest pripe					Papane 10 •	
Data Bafarent Barren P Dovake # FOB (Claus) Pullant Barren Player Fån reconditio display.	Advanced Search					a.	Count he ared to him
The records to display.	wr N	Patient Bane Pager	6	TOB (Clavel	Develop 4	Belgroup #	Date
							Tie recarde to display.
· ·							a 1
1 Pageane 10	Differences A proper					Fage size: 10	
		Francisco Tables			241	the state of the second	

Figure 37 : Claims Batches

Fill the search criteria and click on **Find Batch** button. At least one search criterion should be filled.

laims Batch								
Botch #	Label			Reference getwell		Period		
Status	Created From 01/07/2	012	=	Created To 30/08/2012	100		Find Batch	Reset

Related batches will be displayed in Batches grid.



Claim Batche	s (13)				0					
										Advanced Search
Batch #	Label	Reference #	Claims #	Claimed Amount	Currency	Status	Created	Period	Reception Date	Processing Date
4910	Payer Name 2012-5 2	GetWell201205	1	200	USD	Created	04-05-2012	2012-4 to 2012-4		
4907	Payer Name 2012-4 1	GetWell201204	1	1024.52	USD	Created	27-04-2012	2012-3 to 2012-3		
4898	Payer Name 2012-2 4	GetWell201202	2	44.52	USD	Created	29-02-2012	2012-2 to 2012-2		
4911	Paver Name 12012-511	GetWell201205	1	12(USD	Created	04-05-2012	2012-4 to 2012-4		
4										>

Figure 38 : Claim Batches Grid

If you want to apply a new search, use the **Reset** button Reset to empty the search criteria and results grid.

12.2 View Batch Claims

After searching for a **Batch**, to view the **Batch Claims**, double-click on the **Batch** row. All claims in the **Selected Batch** will be displayed in the **Claims** grid.



											Advanced Searc
Batch#	Label	Reference #	Claims #	Claimed Amount	Currency	Status	Created	Period	Rece	eption Date	Processing Date
4910	Payer Name (2012-5)2	GetWell201205	1	200	USD.	Created	04-05-2012	2012-4 to 2012-4			
4907	Payer Name 2012-4 1	GetWell201204	1	1024.52	USD	Created	27-04-2012	2012-3 to 2012-3	_		
4898	Paver Name (2012-214	Getwen201202	2	44.52	USD	Created	29-02-2012	2012-2 to 2012-2			
4911	Paver Name 12012-511	GetWell201205	. 1	120	USD	Created	04-05-2012	2012-4 to 2012-4			
Concerne	2 B B B Pape size	10 -								13	items in 2 name
	- For Mar Page size	- 40									ntring in a pages
laims Related	d to Batch#4905 (2)										
Date	Padmanua #	Involve #	P // Long	Patient Name		Baund		Marchine		Enter	Advanced Searc
08.02.2012	C000000210/1	invoices ro	D (Class)	Patient 1 Euli M		Payer Dever Manua		ret Calm	30.5	Claim Ratchad	usp
13 03 2012	C000000013/1	1 00	e Patient	Patient 1 Full N	unie .	Payer marine			14.02	Claim Batched	lico
11-03-1011	C0000000011		r Faden.	POUCHLIPHIN		Payo name				Claim Decircu	0.00

Figure 39 : Claims Related to Batch Grid

You may also view the details of a claim by double-clicking on the claim row.

Batch Information tab will be added to **View Claims Details** page for delivered claims displaying all details related to batch creation and processing.

							the ball of the second
y Date	Delivery Date	eli201207-P1	GetM	Reference		4905	Batch #
n Date	Reception Date				SAR(3)	Payer Name (2012-7)224(5	abei
e Date	Due Date						Payer
it Date	Payment Date	ed	Creat	Batch Status		2012-7 to 2012-7	Period
erence	Payment Order Reference		2	Claims	SAR	224	Claimed Amount

Figure 40 : Batch Information

You can click on advance search in order to find a specific claim in a **Selected Batch**. This is applicable by clicking on the filter next to each field and choosing from the drop-down list (Patient name, invoice #, estimation cost...)





Cipinis Relate	d to Batch#14628	1 21										
											Advanced Sea	mh
Date	Reference #	Invoice #	FOB IClas	s) Patlen	t Name	Payer		Net Claimed		Currency	Status	
			x	7	Y		V		v			Y
18/03/2013	C000000128/1	0	Out-Patie	nt Patient	Full Name2	Insurance	Company		.0	LEP	Claim Batched	
18/03/2013	C000000127/1	0	Out-Patie	nt Patient	Full Namel	Insurance	Company		0	LEP	Claim Batched	

13. <u>Inbox</u>

To update the Provider with all news, manuals and official papers, **NEXtCARE** will send **Emails** under **PULSE**. Provider should always check the **Inbox** by clicking on **Inbox** button from the **Toolbar** or under the **Main Menu**.

Pulse 2012			Username Med	ical Center 🖒
TATSH Main Menu O Home	🥩 Eligibility Check 🔃 New Claim 🛕	Claims Not Delivered 🕜 Claims Query		
📥 Inbox			Search	2
SenderName	Subject	Category	Date/Time	Attachments
💼 Officer 1 Welcome to	PULSE		15-May-2012 12:00:00 AM	:2
H I H Pagesize 20 •				1 items in 1 pages
Copyright NEXICARE Holding 2010-2012 - Versi	ion: 13.02	Conn	ected to TATSH server since 24	-Jul-2012 3:13:10 PM

Figure 41 : Inbox

Newly Sent Emails will be displayed in Bold font to notify the user that there are still not read emails.

Emails with embedded Attachment will be marked with the attachment logo "

Double-click on a message to view **Message Details**.

Messages	9
×	
From:	Officer 1
Date/Time:	15-May-2012 12:00:00 AM
Category:	
Subject:	Welcome to PULSE
Attachments:	🕺 PULSE User Guide.pdf
MessageBody	
Dear GetWellUser,	
please find attach PULSE User	Guide document to help you start using PULSE.





Figure 42 : Message Details

Double-Click on the **Attachment** link, and click on **Save** button **Save** in the File Download popup to save the attached document on your local machine.





14. Briefing

14.1 Claims Extended Status

Find below a briefing on the list of claim statuses previously explained in the claim registration and delivery process.

Claim Position	Description and Specification
Registered	Claim covered automatically by PULSE
Authorized	Claim saved as "Pending NEXtCARE Response" by Pulse and "Authorized" by NEXtCARE.
Declined	Claim not covered
Pending	Claim saved as "Pending NEXtCARE Response" by Pulse and awaiting NEXtCARE Decision (To be <i>Authorized</i> or <i>Declined)</i>
Not Delivered	Claim <i>Authorized</i> or <i>Registered</i> and not yet delivered to NEXtCARE
Expired	Claim that remained <i>Not Delivered</i> for more than three (3) months
Not Used	Claim have not been utilized by patient
Claim Packed for NEXtCARE	Claim has been added to a batch but not yet received by NEXtCARE
Batch received by NEXtCARE	Batch received by NEXtCARE
Batch is under Processing	Batch has been pre-validated by NEXtCARE
Batch Processed	Batch has been validated by NEXtCARE
Payment order Validated	Payment Order has been issued for claims by NEXtCARE
Payment order settled to provider	Payment Order for claims validated has been settled by NEXtCARE

14.2 Grids functionalities

For **Claims** and **Batches** grids under **PULSE**, the following Functionalities are available:

Width Adjustment: click on a column border and drag to adjust column width



Date	Reference #	Card #	FOB (Class)	Patient Name	Payer
20-07-2012	C000000970/1	9D20EB8895D58F28	In-Patient (Semi-Private (3 &	Marid Salemeh	Payer Name
20-07-2012	C0000000971/1	9D20EB8895D58F2B	Out-Patient	Marid Salemeh	Payer Name
19-07-2012	C000000962/1	9D20EB8B95D58F2B	In-Patient (Semi-Private (3 &	Marid Salemeh	Payer Name

Sorting: Click on a column header to sort by the column value in ascending order, click again to sort in descending order, click again to cancel sorting by the column.

Date	Reference #	Card #	FOB (Class)	Patient Name	Payer Click here to sort
23-07-2012	C000000973/1	9D8EA07DD247A3AS	Out-Patient	Marid Salemeh	Al Sagr For Co-operative Ins
23-07-2012	C000000974/1	9D8EA07DD247A3AS	Out-Patient	Marid Salemeh	Al Sagr For Co-operative Ins
20-07-2012	C000000970/1	9D20EB8B95D58F2B	In-Patient (Semi-Private (3 &	Marid Salemeh	Payer Name
20-07-2012	C000000971/1	9D20EB8B95D58F2B	Out-Patient	Marid Salemeh	Payer Name
19-07-2012	C000000962/1	9D20EB8B95D58F2B	In-Patient (Semi-Private (3 &	Marid Salemeh	Payer Name

Change Order: Drag a column header to change its order and place it after or before any other column

Date	Reference #	Card #	FOB (Class) -	Patient Name	Payer	E	stimation
20-07-2012	C000000970/1	9D20EB8B95D58F2B	In-Patient (Semi-Private	(3 & Marid Sale	(lass) A Payer Hame		0.00
19-07-2012	C000000962/1	9D20EB8B95D58F2P	n-Patient (Semi-Private	3 & Marid Salemeh	Payer Name		0.00
19-07-2012	C000000964/1	9D20EB8B95D58	In-Patient (Semi-Private	3 &, Marid Salemeh	Payer Name		0.00
19-07-2012	C000000965/1	9D20E88895D/ F28	In-Patient (Semi-Private	(3 &- Marid Salemeh	Payer Name		545.00
19-07-2012	C000000963/1	9D20EB88950 8F2B	In-Patient (Semi-Private	3& Marid Salemeh	Payer Name		0.00
Date	Reference #	Card # Pa	itient Name F	OB (Class) #	Payer	Estimation	Currency
Date 20-07-2012	Reference # C0000000970/1	Card # Pa 9D20EB8895D58F2B	ntient Name F	OB (Class) - n-Patient (Semi-Private (3 &	Payer Payer Name	Estimation 0.00	Currency USD_
Date 20-07-2012 19-07-2012	Reference # C000000970/1 C000000962/1	Card # Pa 9D20EB8895D58F2B 9 9D20EB8895D58F2B MIa	arid Salemeh	OB (Class) - n-Patient (Semi-Private (3 & n-Patient (Semi-Private (3 &	Payer Payer Name Payer Name	Estimation 0.00 0.00	Currency USD ŪSD
Date 20-07-2012 19-07-2012 19-07-2012	Reference # C000000970/1 C000000962/1 C000000964/1	Card # Pa 9D20E88895D58F28 M 9D20E88895D58F28 M 9D20E88895D58F28 M	arid Salemeh arid Salemeh arid Salemeh arid Salemeh	OB (Class) / n-Patient (Semi-Private (3 & n-Patient (Semi-Private (3 & n-Patient (Semi-Private (3 &	Payer Payer Name Payer Name Payer Name	Estimation 0.00 0.00 0.00	Currency USD USD USD
Date 20-07-2012 19-07-2012 19-07-2012 19-07-2012	Reference # C000000970/1 C000000962/1 C000000964/1 C000000965/1	Card # Pa 9D20E88895D58F28 Mia 9D20E88895D58F28 Mia 9D20E88895D58F28 Mia 9D20E88895D58F28 Mia	arid Salemeh arid Salemeh arid Salemeh arid Salemeh arid Salemeh	OB (Class) - n-Patient (Semi-Private (3 & - n-Patient (Semi-Private (3 & - n-Patient (Semi-Private (3 & - n-Patient (Semi-Private (3 & -	Payer Payer Name Payer Name Payer Name Payer Name	Estimation 0.00 0.00 0.00 545.00	Currency USD USD USD USD

Paging and Page size: Use the Paging toolbar to swap between pages and the Page size to specify the number of rows to be displayed in each page

Date	Reference #	Card #		Patient Name	FOB (Class) -	Payer	Estimation
23-07-2012	C000000973/1	9D8EA07	DD247A3AS	Marid Salemeh	Out-Patient	Payer Name	34.52
23-07-2012	C000000974/1	9D8EA07	DD247A3AS	Marid Salemeh	Out-Patient	Payer Name	34.52
20-07-2012	C000000971/1	9D20EB8	895D58F28	Marid Salemeh	Out-Patient	Payer Name	48.00
19-07-2012	C000000966/1	9D20EB8	895D58F2B	Marid Salemeh	Out-Patient	Payer Name	2222.00
19-07-2012	C000000969/1	9D20EB8	B95D58F2B	Marid Salemeh	Out-Patient	Payer Name	48.00
H 4 1	2) H P	age size:	5 -				
			5				
			10 20				
			50				



15. Appendix I: FOC List

Family of cause	Cause
Accidental Injury	Passive War Victim
Accidental Injury	Active War Participant
Accidental Injury	Sport
Accidental Injury	Deliberate Self-Inflicted Injury
Accidental Injury	Motor Vehicle Accident (Non work related)
Accidental Injury	Miccollangeus (Non-work related)
Dental	Dental
Mataraity	
Maternity	
Maternity	Cesarean delivery
Maternity	Miscarriage/termination of pregnancy
Maternity	Other
Other	Procreative Management - Infertility, Fertility
Other	Contraception
Other	Addiction Treatment
Other	Checking, Replacement or Care of Sutures, Dressings, Catheters, Openings
Other	Checking or Adjustment of Medical Devices
Other	Disability Evaluation Services
Other	Blood Donation
Other	Living Organ Donation
Other	Transplant Recipient
Other	Encounters for Administrative & or Legal Reasons
Other	Housing, Household, Economic Circumstance
Other	Pre-operative examination, tests
Other	Obesity
Other	Premartial tests
Physical Illness	to be specified under assessment
Poisoning	Work Related Poisoning
Poisoning	Non-work Related Poisoning
Preventive Care & Checkups	Well Newborn Care
Preventive Care & Checkups	Special Disease - Condition Screenings
Preventive Care & Checkups	Routine Wellness Checkups & Exams
Preventive Care & Checkups	Vaccinations / Immunizations
Preventive Care & Checkups	Other Checkups
Psychiatric	to be specified under assessment



16. <u>APPENDIX IV: Definitions & Interpretations</u>

The following words and expressions are used on Pulse shall have the meanings stated below:

i.	Username	The Username that is provided at the time of provider empanelment for Pulse, Used to Login into Pulse
ii.	Password	Is the confidential alphanumeric set used to Login into Pulse.
iii.	eASOAP	Is an electronic ASOAP form or an Medical Claim Form replacing the manual printed form
iv.	PULSE Support Center	Centralized contact center for all support queries related to Pulse.
v.	Claims Not Delivered	Claims that were not submitted to NEXtCARE with the service items
vi.	Claims Query	Is a reconciliation tool to be used by the provider for transparent view of claims contained within
vii.	Claims with Pending Pre Certification Reply	Claim needs pre-certification process by NEXtCARE Claim Center to decide if it should be Authorized or Declined
viii.	Registered Claims without Pre Certification	Claim that doesn't require NEXtCARE pre-certification
ix.	Pre Certified Claims	Claim pre-certified by NEXtCARE Claim Center with the appropriate decision if it is Authorized or Declined
Х.	Reference #	Claim Reference Number, also called as ASOAP number in many cases
xi.	Card #	Beneficiary Card Number, available on the Insurance Card. It is a 16 digit alphanumeric number separate by a '-' every 4 digits
xii.	FOB	Family of Benefits
xiii.	Payer	Insurance Company who is providing the medical coverage for the beneficiary
xiv.	Estimation	Estimated Amount of the claim after deductions
XV.	Pending Reason	Status of a claim pending decision from nextcare or the provider
xvi.	Status	Status of a claim post the decision - registered, approved, declined
xvii.	Eligibility	Process to check the eligible status of the patient for the requested services at the attending facility
xviii.	Туре	Type is referred to the "Family of Benefit" the patient is trying to avail at the facility.
xix.	Pin #	Alternate beneficiary PIN no that could also be used in some cases. Not applicable in most cases.
xx.	Beneficiary Name	Name of the patient that is at present at the facility
xxi.	Provider	Is the service provider / facility where the patient will visit
xxii.	Patient File No.	Optional field for the provider to note the file number of the patient as per the provider records
xxiii.	Policy Holder	Also referred as the patient
xxiv.	Category	Classification of the type of contract or policy the patient has been subscribed under.
xxv.	Coverage information	Is the type selected by the provider on request by the patient
xxvi.	Network	Type of provider network coverage available for the patient
xxvii.	Deductible	Is the deductible the patient will have to pay on final settlement of the claim bills if applicable.
xxviii.	Consultation	Is the type that is highlighted if covered or not.
xxix.	Class	Is the class of the policyholder (Class A or B)
xxx.	Limit	Displays the threshold limit of the selected Type of service
xxxi.	Consultation Date	Date the Consultation was done.
xxxii.	Service Date	Date the Service was carried out at the provider (could be same as consultation date or a different one in case of IP, Physio, etc)
xxxiii.	Family of Cause	A list of causes for the selected "FOB" or "Type"



xxxiv.	Cause	A list of selections for the selected FOC, for eg: Physicall Illness, Accidental
xxxv.	Diagnosis	ICD 9 or ICD 10 coded diagnosis
xxxvi.	Attached Documents	Documents that are attached either from the provider or by the TPA
xxvii.	Pre-Certification Terms & conditions	Decision taken concerning a claim (Authorized, Declined, Pending) and the Notes filled by the Claims' Center Officer, click on the Pre-certification Terms and Conditions tab.
xx∨iii.	Adjudication notes	Approved Amount is adjusted and is different than the Claimed Amount , check the adjustment reason and justification under the Adjudication Notes tab
xxxix.	Item Code	Code of the Service Item as per the provider price list
xl.	Item Description	Description of the Service Item as per the provider price list
xli.	Qty Claimed	Quantity of Service Items claimed
xlii.	Qty Approved	Quantity of Service Items approved
xliii.	Unit Price	Unit Price of the Service Item (as per agreed terms)
xliv.	Patient Share	Share payable by the patient at the time of claim settlement
xlv.	Net Claimed	Amount claimed by the provider to the Payer
xlvi.	Payer Share	The same as Net Claimed amount, less any discounts if applicable
xlvii.	Adjustment Reason	If the claim amount was adjusted the reason related to that would be stated here.
xlviii.	DrugDD	Drug Daily Dosage
xlix.	DrugPOT	Drug Period of Treatment
Ι.	Mark Claim Not Used	Claims that are no longer required and which have been abandoned can be marked as "Not Used"
li.	Claim Query	Used for Finance Queries and reconciliation
lii.	Bank Reference	Transaction number of the bank related to the payments done



17. <u>Table of Figures</u>

Figure 1 : Login Page	4
Figure 2 : Change Password	4
Figure 3 : Locked Password	5
Figure 4 : Forgot Password	5
Figure 5 : Reset Password	6
Figure 6 : Error 1 – no registered email	6
Figure 7 : Password Reset Link	6
Figure 8 : Password Reset Link	7
Figure 9 : Password Reset	7
Figure 10 : Password Reset	7
Figure 11 : Password Reset	7
Figure 12 : New User Registration	8
Figure 13 : Login Section	9
Figure 14 : Dashboard – Home (Empty)	9
Figure 15 : Dashboard – Home (ShowData)	.10
Figure 16 : Dashboard – Home (Pending precert)	.10
Figure 17 : Registered claims	.11
Figure 18 : Pre Certified claims	.11
Figure 8 : PULSE Tools and Layout	.12
Figure 20 : New Claim Registration	.16
Figure 21 : Insured Patient Information Popup	.17
Figure 22 : Services/Procedures Search and Grid	.20
Figure 23 : Items Selected	.21
Figure 24 : Items Details	.21
Figure 25 : Attached Document Tab	. 22
Figure 26 : Claim Information	.23
Figure 27 : Claim Registration and Precertification Process	.26
Figure 28 : View Claim Details	.29
Figure 29 : Totals Computation	. 30
Figure 30 : Pre-certification Terms and Conditions	. 30
Figure 31 : Adjudication Notes	.31
Figure 32 : Mark Claim as Not Used Popup	.31
Figure 33 : Claim Query Page – Search Criteria	. 32
Figure 34 : Claim Query Page – Search Result	. 33
Figure 35 : Claim Query Page – Export to Excel	. 34
Figure 36 : Claims Not Delivered	. 35
Figure 37 : Claims Batches	.36
Figure 38 : Claim Batches Grid	. 37
Figure 39 : Claims Related to Batch Grid	. 38
Figure 40 : Batch Information	. 38
Figure 41 : Inbox	. 39
Figure 42 : Message Details	.40





18. <u>APPENDIX IV: FAQ</u>

1	I am trying to Login, but system says Invalid password, and I am not allowed to proceed further?
Ans	Please note that the system will LOCK the account in 3 attempts. Please contact the NEXtCARE
	call center [042095900] to request a RESET of your password.
2	We have a new user? How can we give them access to Pulse?
Ans	Please contact the NEXtCARE call center [042095900] to request for a new account. We will
	provide a form [FORM NO: P001/2012] that will need to be duly filled and sent across.
3	Can we use multiple users to LOGIN with the same account number?
Ans	By practice, you should not use any other LOGIN credentials other than your own.
4	What is the process when a user is suspended, or needs to be withdrawn?
Ans	Send a cancellation Notice [FORM NO: P001/2012] to NEXtCARE Call center [042095900] and
	they will action the needful and confirm on the same.
6	In Home page, old claims are no longer displayed
Ans	Each of the Home page grids only displays claims stated at the last 7 days, and a maximum of 10 records. To view all the records of a certain grid, click on the Show All button on top of that grid
7	Who can use which Sections on PULSE:
Ans	1. Insurance front desk: [Home, Eligibility, New Claim]
	2. Insurance back office: [New Claim, Claims Not Delivered, Claims Querv]
	The system can be used by all type of users within the provider across all sections, with adequate
	training
8	What is "Inbox"?
8 Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider" further details available in the
8 Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual
8 Ans 9	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can Lalso use the Main Menu to pavigate in the Pulse portal?
8 Ans 9 Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function.
8 Ans 9 Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function.
8 Ans 9 Ans 10	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active?
8 Ans 9 Ans 10 Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information
8 Ans 9 Ans 10 Ans 11	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do?
8 Ans 9 Ans 10 Ans 11	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do? Is Pulse link opening to the LOGIN page? If yes
8 Ans 9 Ans 10 Ans 11	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do? Is Pulse link opening to the LOGIN page? If yes Are you able to enter your user credentials? If No
8 Ans 9 Ans 10 Ans 11 Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do? Is Pulse link opening to the LOGIN page? If yes Are you able to enter your user credentials? If No Call NEXtCARE contact center [042095900] and request to reset "user credentials"
8 Ans 9 Ans 10 Ans Ans	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do? Is Pulse link opening to the LOGIN page? If yes Are you able to enter your user credentials? If No Call NEXtCARE contact center [042095900] and request to reset "user credentials" Is Pulse link opening to the LOGIN page? If No
8 Ans 9 Ans 10 Ans 11	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do? Is Pulse link opening to the LOGIN page? If yes Are you able to enter your user credentials? If No Call NEXtCARE contact center [042095900] and request to reset "user credentials" Is Pulse link opening to the LOGIN page? If No Try opening another webpage, for eg: www.google.com , if it works, then capture the screen and send to pulsesupport@nextcare.ae
8 Ans 9 Ans 10 Ans 11	What is "Inbox"? This is used communication from NEXtCARE to the "Provider", further details available in the manual. Can I also use the Main Menu to navigate in the Pulse portal? Yes, only use the relevant sections related to the respective job function. What do we do if the system is showing "Invalid" and Patient Medical Card seems to be active? Call NEXtCARE contact center [042095900] and verify the information Pulse System is down, no access and Patient is waiting, what can we do? Is Pulse link opening to the LOGIN page? If yes Are you able to enter your user credentials? If No Call NEXtCARE contact center [042095900] and request to reset "user credentials" Is Pulse link opening to the LOGIN page? If No Call NEXtCARE contact center [042095900] and request to reset "user credentials" Is Pulse link opening to the LOGIN page? If No Call NEXtCARE contact center [042095900] and request to reset "user credentials" Is Pulse link opening to the LOGIN page? If No Try opening another webpage, for eg: www.google.com , if it works, then capture the screen and send to pulsesupport@nextcare.ae Follow Up with a call



	For this case: If "Patient is Waiting" and the case is an "emergency case" follow the below steps:
	1. NC Agent will verify and confirm issue
	2. NC agent will email provider "scanned version" of ASOAP form
	The pre-approval request will be received by FAX or email
12	Discrepancy in the card data and the information printed on the "Medical Claim" form, what
	should we do?
Ans	Call NEXtCARE contact center [042095900] and verify the information
13	I am not able to View or Medical Claim Form after doing the eligibility?
Ans	1. Please check if POP Ups are enabling in the browser being used.
	2. PDF reader available in the client computer
	3. If all of the above is in place, refer to the internal Provider IT department
	After which you can Call NEXtCARE contact center [042095900] and request for IT support
14	Can we continue using the old pre-printed ASOAP forms?
Ans	As per the addendum in the SLA, once Pulse is used, no more pre-printed forms will be accepted.
	Exceptional case: If "Patient is Waiting" and the case is an "emergency case" follow the below
	steps:
	3 NC Agent will verify and confirm issue
	4 NC agent will email provider "scanned version" of ASOAP form
	5. The pre-approval request will be received by FAX or email
45	Since the previous ASOAD form was in the form of a triplicate, how should be menore the
15	Since the previous ASOAP form was in the form of a triplicate, now should be manage the current printed from for pharmacy claims or diagnostic referral claims?
Ans	Once the form is duly filled by the physician, signed and stamped, kindly take a copy of it and
	submit for pharmacy or diagnostic related claims with original stamp and signature. Also mention
	on the upper right corner "Pharmacy" or "Diagnostic"
16	Am trying to Login, but system says Invalid password, and am not allowed to proceed further?
?	Please note that system will LOCK the account in 3 attempts. Please contact the NEXtCARE call
	center [042095900] to request a RESET of your password.
17	We have a new user? How can we give them access to Pulse?
	Please contact the NEXtCARE call center [042095900] to request for a new account. We will provide a form [EOPM NO: P001/2012] that will need to be duly filled and sent across
18	Can we use multiple users to LOGIN with the same account number?
1	By practice, you should not use any other LOGIN credentials other than your own.
19	User is suspended, or needs to be withdrawn, what is the process?
ě.	Send a cancellation Notice [FORM NO: P001/2012] to NEXtCARE Call center [042095900] and
<u>N753</u>	they will action the needful and confirm on the same.



20	Eligibility Check always requires a Member card to be present?
Ê	It is extremely important to note that, at the time of an eligibility check to initiate a patient consultation and treatment at the provider, member card must be available.
21	If PULSE is down, how can we print the forms?
	In the event PULSE is down, please contact NEXtCARE Call center [042095900] first. Once confirmed that the system is temporarily unavailable, the team will inform you to use the "printed ASOAP forms"

CLAIMS	
1	At the Physician selection section, while selecting the appropriate physician, we can't find
	in the listed physician? What can we do?
Ans	In this case, Call NEXtCARE Network team 04-2095335 and get the physician added before
	creating the claim. If you are unable to reach by phone send an email to networks@nextcare.ae
2	Can the physician be searched by "MOH ID" or DHA License No?
Ans	Yes, search results are based on exact matches.
3	How can I enter the secondary diagnosis with some notes from the "Physician"
Ans	Once you have entered the Primary diagnosis and there is a need for the Secondary Diagnosis ,
	go to the attach documents section, kindly enter the notes and click on post it before submitting
	the claim.
4	While entering the service items, the service items quantity could be more than '1'?
Ans	As per the rules in PULSE, you are allowed to put in only 1 quantity per service, hence if you have
	a service that requires more than 1 quantity, create a note in the attached documents and state the
	required quantity and the name of the service item code.
5	We are trying to search patient information and it's not showing any results?
Ans	If this is the case, try and do the eligibility again, as the Patient may not be valid. If still persists,
	Call NEXtCARE contact center [042095900] and verify the information
6	Since the previous ASOAP form was in the form of a triplicate, how should we manage the current
	printed from for pharmacy claims & diagnostic centers claims?
	Once the form is duly filled by the physician, signed and stamped, kindly take a copy of the original
	eASOAP form, stamp and sign by the doctor,
	also write on the right TOP corner if it's a pharmacy claims & diagnostic center claims along with
	the Invoice Number.