At Infocrossing Healthcare Services, Inc., we understand the complexities you face as a healthcare payer. Cost and competitive pressures are continually driving the need to improve business process automation, provider and member service, and implementation of regulatory requirements; all in addition to processing claims more efficiently. As a healthcare payer you need an IT solution that is flexible enough to address your changing needs quickly, efficiently and cost effectively.

Infocrossing Healthcare Services, Inc. presents Q/Care – a powerful, automated claims processing system designed to be an integral part of your day-to-day business process. As one of the market’s first rules-based solutions, Q/Care can be easily customized to specific requirements. Its inherent flexibility makes it valuable to a wide variety of healthcare payers, including managed care organizations, Medicare Advantage Plans, HMOs, Medicaid Managed Care Plans, PPOs and indemnity plans. It also enables support for dental, pharmacy and vision services. Q/Care is available under two types of contracts: Customized ASP model or a perpetual license agreement. In addition, we offer software maintenance services and software customization.

Q/Care offers an integrated HIPAA and multi-partner electronic data interchange (EDI) solution that supports HIPAA-mandated transactions, security and privacy (including a PHI tracking tool). Role-based security is defined down to field-level access.

The Q/Care Web Interface: Your Real-Time Provider Portal

The Q/Care Web Interface enables end-users to submit information to, and view information from, the Q/Care system in real time. Authorized users can:

- Access claim, member, pre-authorization, EOB, and remit information from easy-to-follow, user-friendly screens.
- Submit claims directly into Q/Care, or submit a batch file of claims to be processed during Q/Care’s batch processing cycle.
- Verify member eligibility, other health insurance and member deductible, and out-of-pocket information.
- Enter pre-authorizations into Q/Care and check pre-authorization status.

Q/Care maintains security profiles that contain user ID and password information, as well as information the user has set up to grant “privileges” for other users to access their claim, member, and pre-authorization data. Q/Care provides complete online documentation, including a self-guided demo with answers to frequently asked questions. The Q/Care Web site can also be co-branded with your own health plan Web site to create a seamless transition between the two sites.

Benefits of Q/Care Application Service Provider (ASP) Processing

Q/Care provides you the cost-effectiveness of an ASP, but the flexibility of your own application. You will realize cost savings with affordable, predictable fees, and the freedom from managing and updating system hardware. Plus, you get the benefit of 99.9999% availability, data security, and 24x7x365 operations, support and system monitoring. Your account manager will work with you to create a customized solution that fits your business today, and will scale as your business grows.
Q/Care Delivers a Wealth of Functionality

Q/Care from Infocrossing Healthcare Services, Inc. is an industry-leading claims processing solution that operates in a wide range of environments, including Medicaid Managed Care, Medicare Advantage, Integrated delivery systems, HMOs, PPOs, indemnity, dental, vision and pharmacy. You can process all lines of business in a single system, regardless of volume. Its' rich and flexible functionality covers a wide range of claims-processing requirements, including:

**Delivered On-Time, as Promised**
Since Infocrossing instituted CMM development processes for Q/Care, we have delivered 100% of our releases on-time as promised since 1998. Furthermore, using CMM techniques, we have reduced our defect rate by 80%.

**Flexibility in Reporting**
Q/Care’s relational database and reporting toolset makes reporting a snap. All data elements can be easily accessed through our 4GL reporting tool. Both ad-hoc and predefined reporting capabilities are accessed through a user-friendly browser based interface. Reports are available for viewing via the web, in pdf files, downloadable files, or in traditional print.

**Painless Implementation**
Our experienced business analysts help you analyze current business processes and identify future processing needs. This information is used to configure plans, benefits, payment methodologies, edit enforcement, etc. The system’s rules based architecture keeps custom coding to a minimum and provides maximum flexibility in developing your business processes. Simultaneous to the configuration effort our systems staff can develop the data migration routines to load existing data to pre-populate the major function areas with data from your legacy system if needed. We have an extensive library of migration tools that minimizes the migration effort and ensures the quality of the data being loaded to your new system.

**Greater User Acceptance**
Q/Care’s graphical user interface is intuitive and easy to navigate. Additionally, Q/Care’s training is structured so students are fully involved in the hands-on sessions to enhance their training experience and promote a greater level of user acceptance. Our complete documentation and extensive context sensitive help facilities promote productivity.

**Security and Audit**
Allows you to control user/provider access locally or remotely, and to define levels of authority and access to functions. Includes full audit capability through date and time stamp records. Meets all HIPAA requirements and provides the ease and flexibility to facilitate future advances and requirements.

**Membership**
Includes comprehensive management of everything from coordination of benefits, to entry of pre-existing conditions to Medicaid/Medicare information. Enables automatic assignment of primary care and ancillary providers, and “flagging” members to alert claims or pre-authorization, as well as pending or holding claim payment.

**Provider Contracts**
For online setup and management of provider demographics with unlimited comments and field-level auditing. Allows flexible definition of contract and payment terms, creation of provider directories and individual provider rosters, and provider participation in an unlimited number of product offerings.

**Customer Service**
For tracking responsiveness to inquiries, problems and grievances for employer groups, providers, members and special documents. Allows unlimited comments and online audit trails, and automatic letter generation in multiple languages. Consolidates data for easy access to member and employer group-specific coverage.

**Claims and Encounters**
Real-time adjudication or online data entry with batch adjudication, as well as routing of pended claims. Calculates “would pay” amounts for capitated services, allows facility claims processing with a tiered pricing structure, and automatically applies coordination of benefits pricing during adjudication.

**Employer Group**
Identifies employer groups and their unique coverage options, such as network access, benefit coverage, and other payment calculations. Enables the tailoring of multiple products, including Medicaid MCO, commercial and TPA; and enables employer groups to control product portfolios.

**Interoperability**
Q/Care has the ability to interface with a variety of third party software. The architecture of the system makes it easy to share data with other systems, departments, agencies or insurers.

**And much more, including:**
- Plan Benefit Coverage
- Pre-Authorization and Referral
- Case Management
- Capitation
- Financial & Premium Billing

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Infocrossing IT Outsourcing Solutions
Infocrossing Healthcare Services, Inc. is an innovative and highly respected technology corporation specializing in “focused outsourcing” of IT infrastructure and business processes. Infocrossing offers a sterling record for improving the profitability and productivity for a diverse portfolio of clients in a broad range of industries, including healthcare, finance, manufacturing, retail, media and government.

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