

IHX User Manual



INDEX

1. ABOUT	2
2. GETTING STARTED	3
2.1 SIGNING IN TO IHX	3
3. CLAIMS: IN-PATIENT MANAGEMENT	4
3.1 REGISTERING A NEW CLAIM	4
3.2 SUBMITTING ENHANCEMENT	8
3.3 SUBMITTING FINAL BILL AND DISCHARGE DOCUMENTS	11
3.4 SUBMITTING MISSING DOCUMENTS	14
3.5 SUBMITTING SETTLEMENT CLAIMS DOCUMENTS	16
3.6 CANCELLING A CLAIM	19
3.7 SEARCHING FOR A CLAIM	20
4. IHX MODULES	21
4.1. NAVIGATING MODULES	21
4.2 MODULE'S DASHBOARD	21
5. FINANCE DASHBOARD: REVENUE CYCLE MANAGEMENT	22
5.1 USING THE DASHBOARD	22
(I) INPATIENT ADMISSIONS	23
(II) HOSPITAL TREND	23
(III) SURGICAL AND MEDICAL CLAIM DETAILS	24
(IV) ROOM DETAILS	25
5.2 USING THE DASHBOARD FOR FINANCIAL RECONCILIATION	26
6. PROFILE	28
7. INVENTORY	28
8. IHX SUPPORT (SELF-HELP)	29
8.1 ACCOUNT LOCKED/ DON'T HAVE PASSWORD/ WRONG PASSWORD?	29
8.2 DON'T REMEMBER YOUR IHX USERNAME?	30
8.3 NOT ON IHX YET? GET REGISTERED!	30
9. GUIDELINES	31
10. HELP	36

1. About

IHX is an industry leading Hospital management platform.

- **In-Patient Management:** A simplified workflow to help insurance and hospital teams to manage and track in-patient workflows on a single platform from intimation to settlement.
- **Marketing & Inventory Management:** A feature that helps the hospitals to configure inventory of services like Doctors, Health check and IP packages that will assist in increasing footfall.
- **Revenue Cycle Management:** A solution that enables finance teams to view and download settlement and outstanding balances of Out-patient and In-patient services.
- **Database Security:** The secured cloud-based platform ensures that patient data and billing information is secure and protected at all times.

The IHX portal has been proven to be intuitive for its users. The purpose of this document is to act as a reference for the users for understanding the multiple benefits of the latest upgrade.

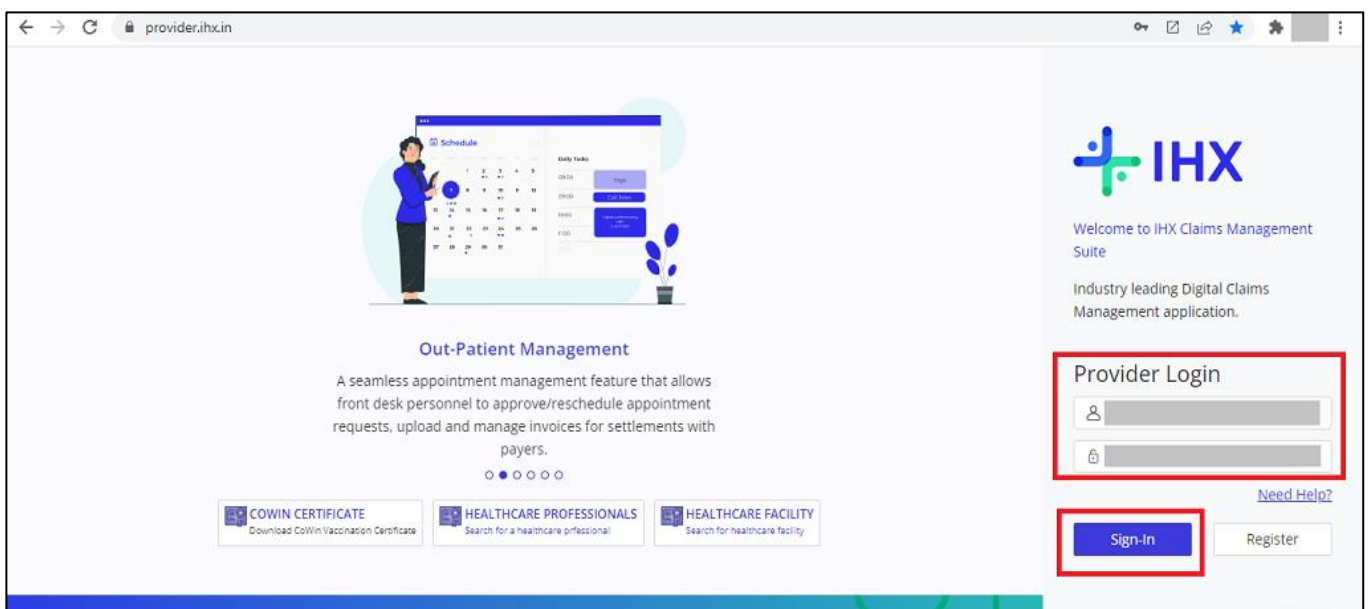
2. Getting started

2.1 SIGNING IN TO IHX

If you have IHX username and password, please sign in to efficiently manage all your cashless claims on a single platform.

Step 1: Open www.provider.ihx.in

Step 2: Enter username and password and click on Sign In



The screenshot shows the IHX Provider Login page. The browser address bar displays 'provider.ihx.in'. The page features the IHX logo and a welcome message: 'Welcome to IHX Claims Management Suite' and 'Industry leading Digital Claims Management application.' On the right side, there is a 'Provider Login' section with a red border. It contains two input fields for username and password, and a 'Sign-In' button, also highlighted with a red border. Below the login fields is a 'Register' button. On the left side, there is an illustration of a person at a computer, and a section titled 'Out-Patient Management' with a description: 'A seamless appointment management feature that allows front desk personnel to approve/reschedule appointment requests, upload and manage invoices for settlements with payers.' Below this, there are three buttons: 'COWIN CERTIFICATE' (Download CoWin Vaccination Certificate), 'HEALTHCARE PROFESSIONALS' (Search for a healthcare professional), and 'HEALTHCARE FACILITY' (Search for healthcare facility). A 'Need Help?' link is also present.

What else can you do on provider.ihx.in?

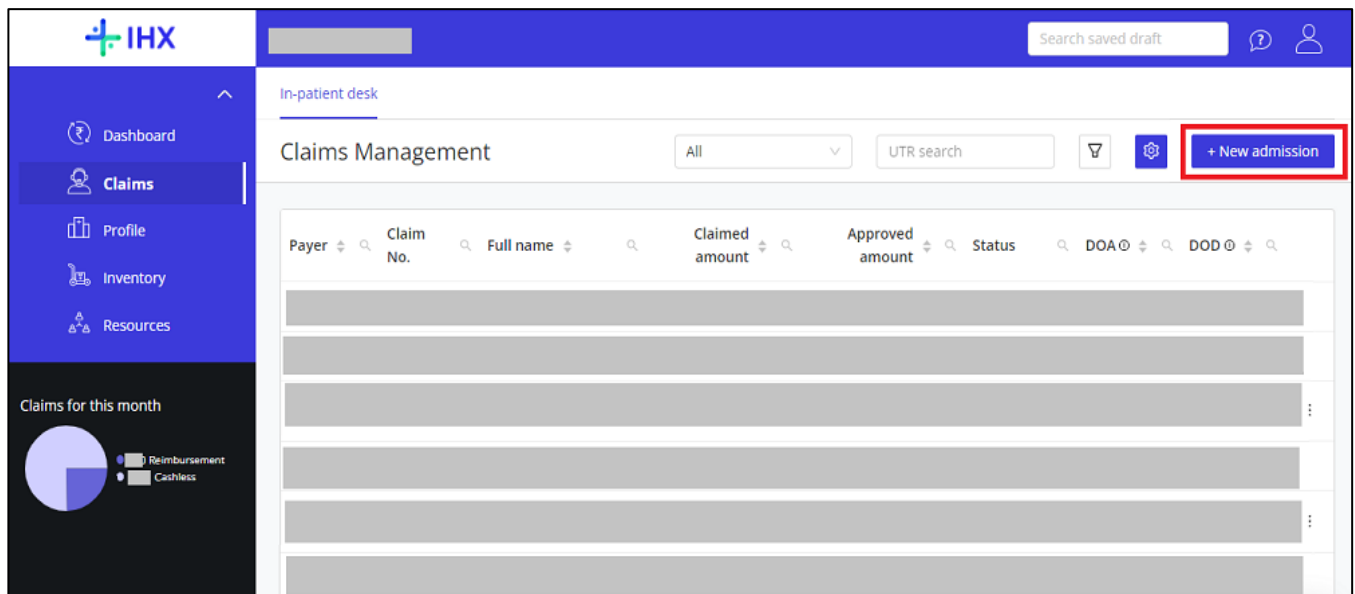
- **CoWin Certificate download:** You can download vaccination certificates
- **Healthcare professionals search:** You can search for the registered healthcare professionals
- **Healthcare facility search:** You can search for the registered healthcare facilities

3. CLAIMS: In-patient management

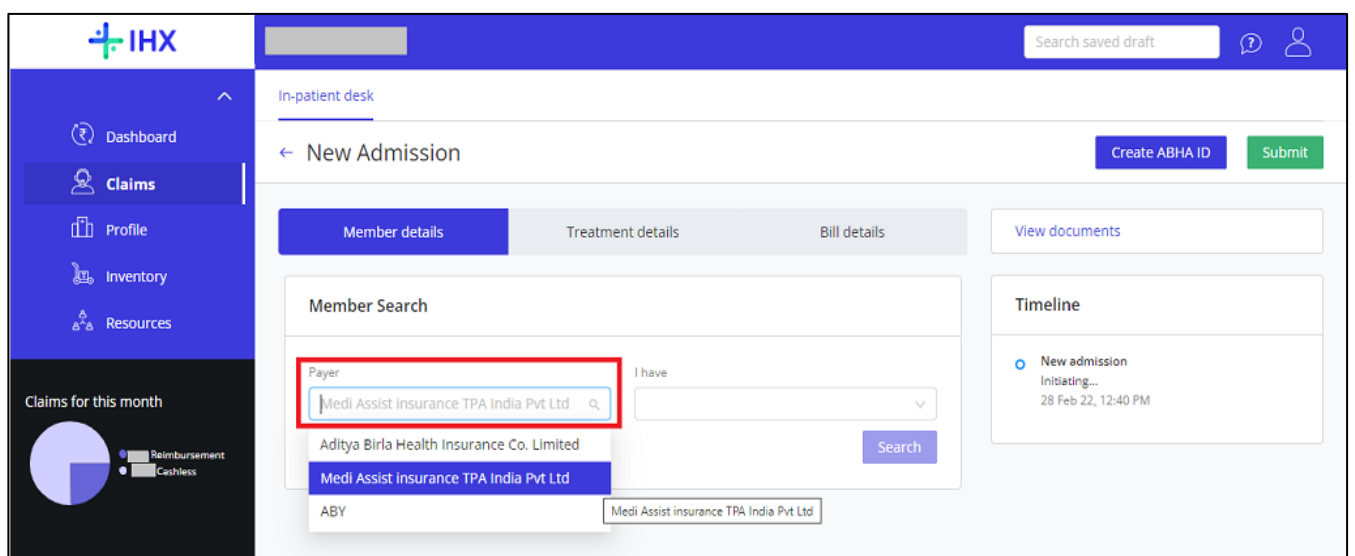
3.1 REGISTERING A NEW CLAIM

This can be used to submit a fresh claim to a payer.

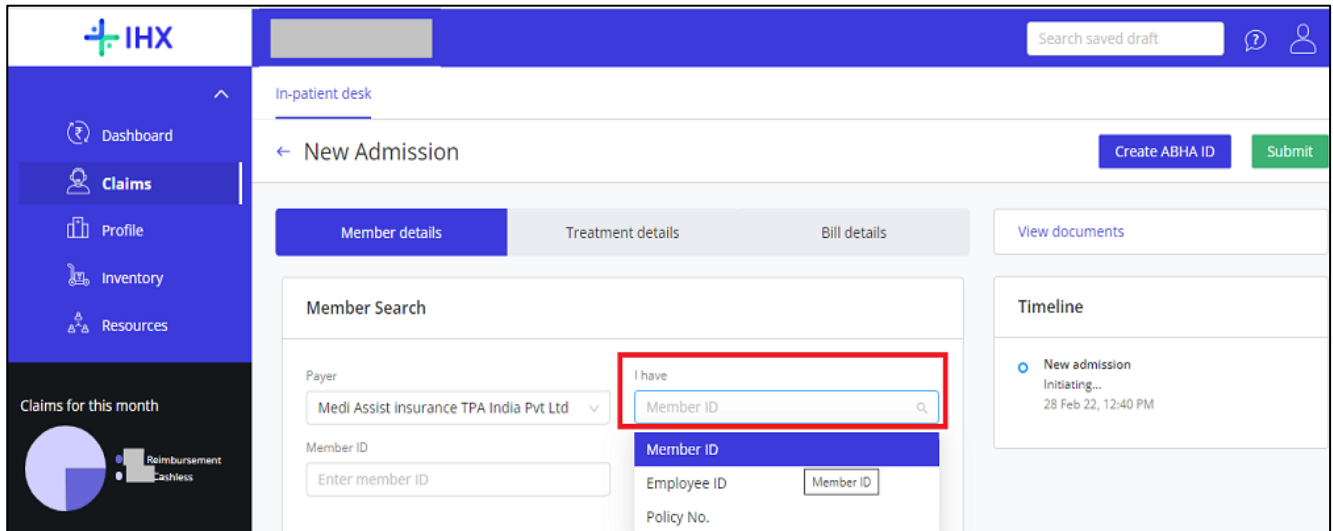
Step 1: Click on New Admission



Step 2: Under the Member details, select the Payer from the drop-down list.

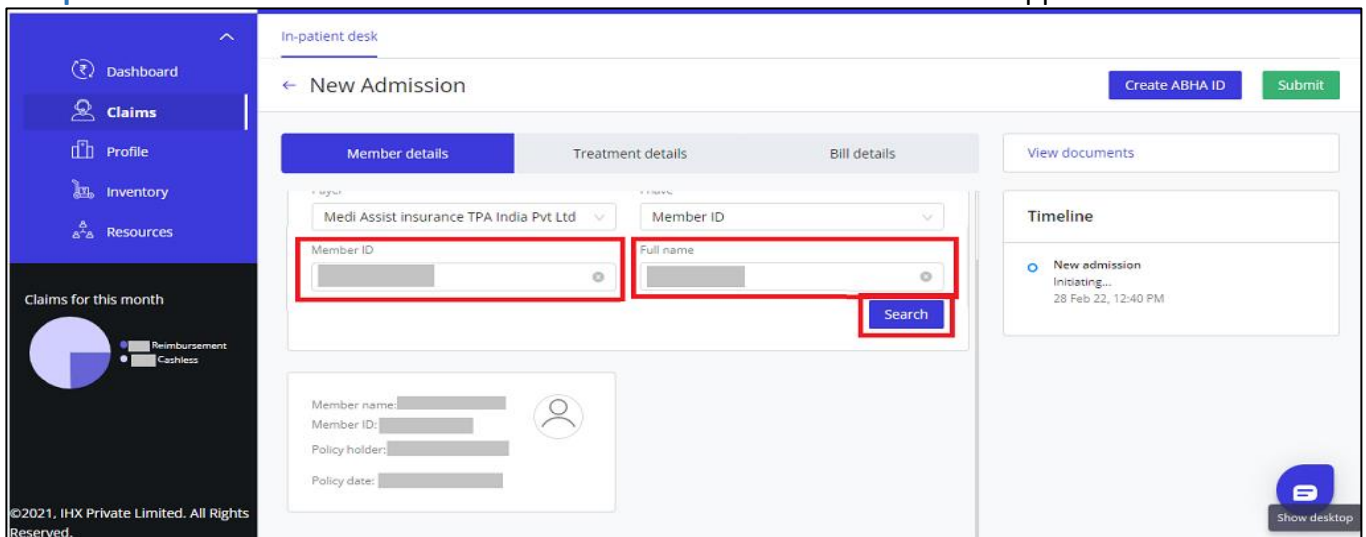


Step 3: Select the details that you have-Member ID/Employee ID/ Policy number from the list.



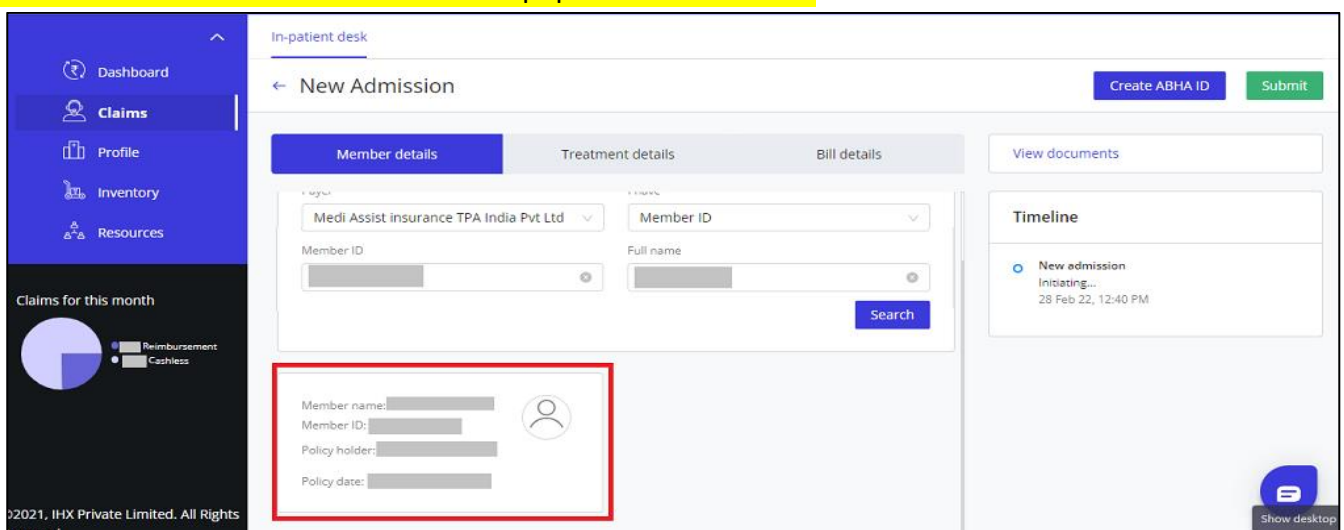
The screenshot shows the 'New Admission' form in the IHX system. The 'Member Search' dropdown menu is open, showing options: 'Member ID', 'Employee ID', and 'Policy No.'. The 'Member ID' option is highlighted. The form also includes fields for 'Payer' (Medi Assist insurance TPA India Pvt Ltd), 'Member ID' (with a search icon), and a 'Timeline' section on the right showing a 'New admission' event.

Step 4: Enter the member details and click on Search. The member card will appear at the bottom.



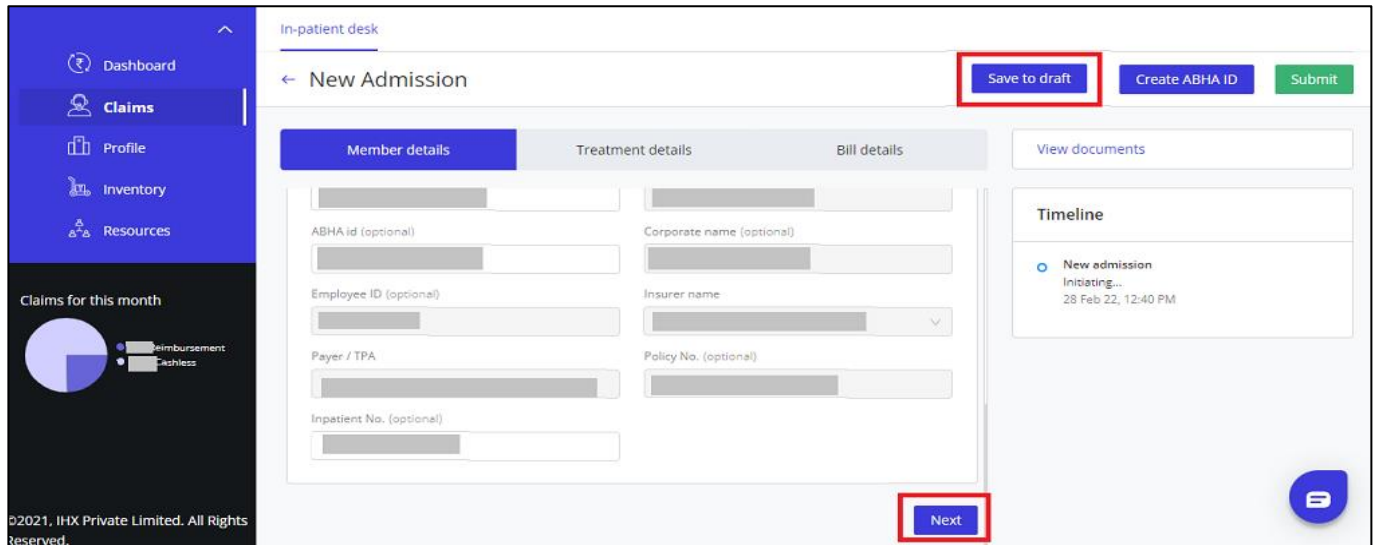
The screenshot shows the 'New Admission' form with the 'Member details' tab selected. The 'Member ID' and 'Full name' fields are highlighted with red boxes. The 'Search' button is also highlighted. Below the search fields, a 'Member card' is displayed with fields for 'Member name', 'Member ID', 'Policy holder', and 'Policy date'. The 'Timeline' section on the right shows a 'New admission' event.

Step 5: Click on the member card to select the member getting admitted. **Note:** The member will be identified and the details will be auto-populated in the form.



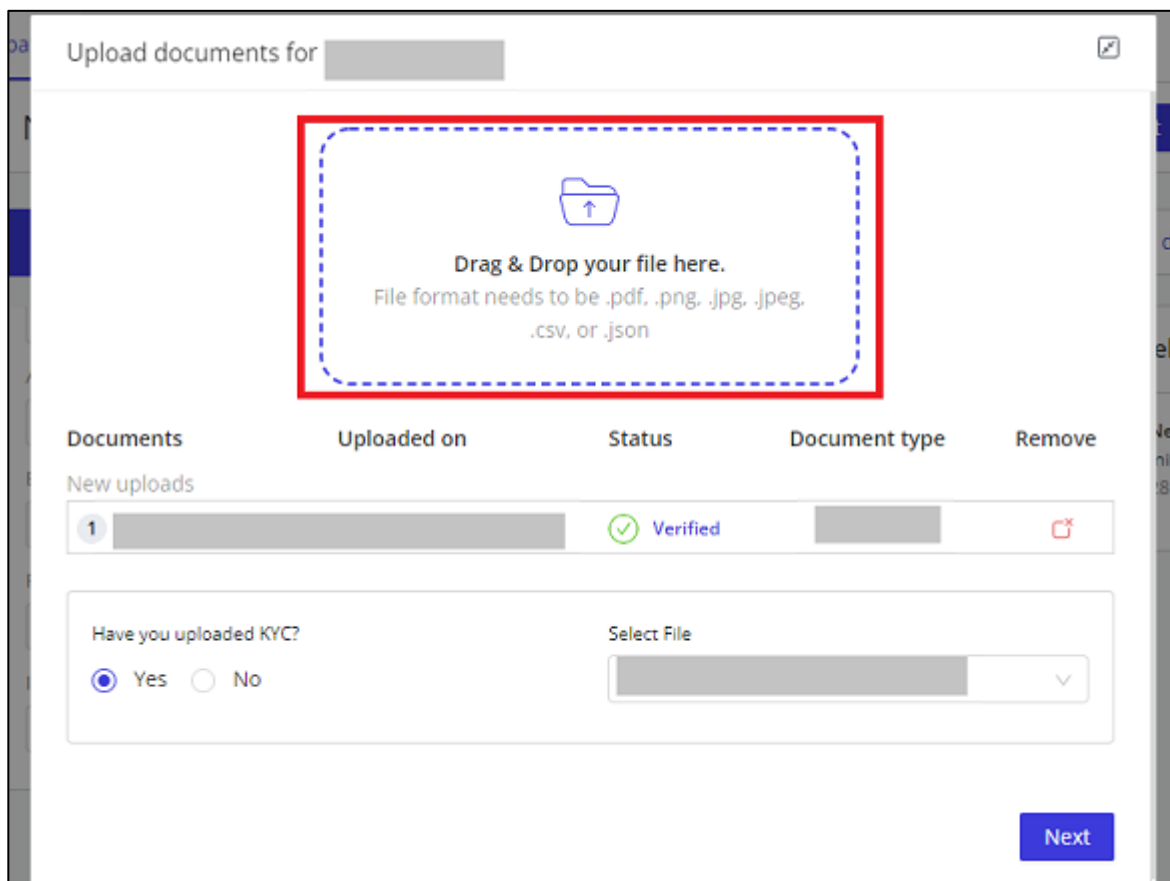
The screenshot shows the 'New Admission' form with the 'Member details' tab selected. The 'Member card' is highlighted with a red box, indicating it has been selected. The 'Member name', 'Member ID', 'Policy holder', and 'Policy date' fields are populated with data. The 'Timeline' section on the right shows a 'New admission' event.

Step 6: Enter the member details & click on **Next**. To save the claim details for later- click on **Save to draft**.



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Step 7: Upload the supporting documents for the claim.



Documents	Uploaded on	Status	Document type	Remove
1		✓ Verified		

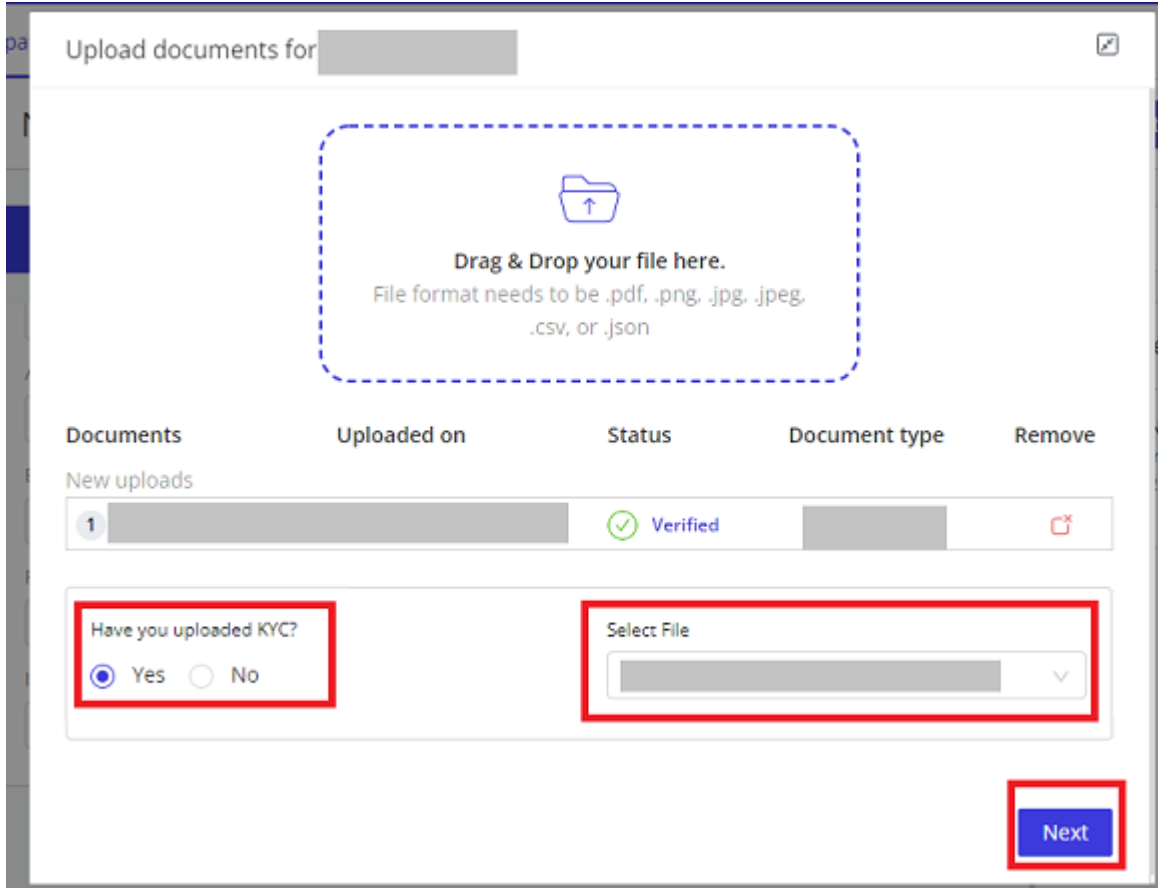
Have you uploaded KYC?

☒ Yes ☐ No

Select File

Step 8: The system will verify the document type and if any document is missing, you will be prompted to upload it.

Note: This is only to make sure that all the mandatory documents are submitted to help in faster processing.



Upload documents for [redacted]

Drag & Drop your file here.
File format needs to be .pdf, .png, .jpg, .jpeg, .csv, or .json

Documents	Uploaded on	Status	Document type	Remove
New uploads				
1 [redacted]		✓ Verified	[redacted]	[Remove]

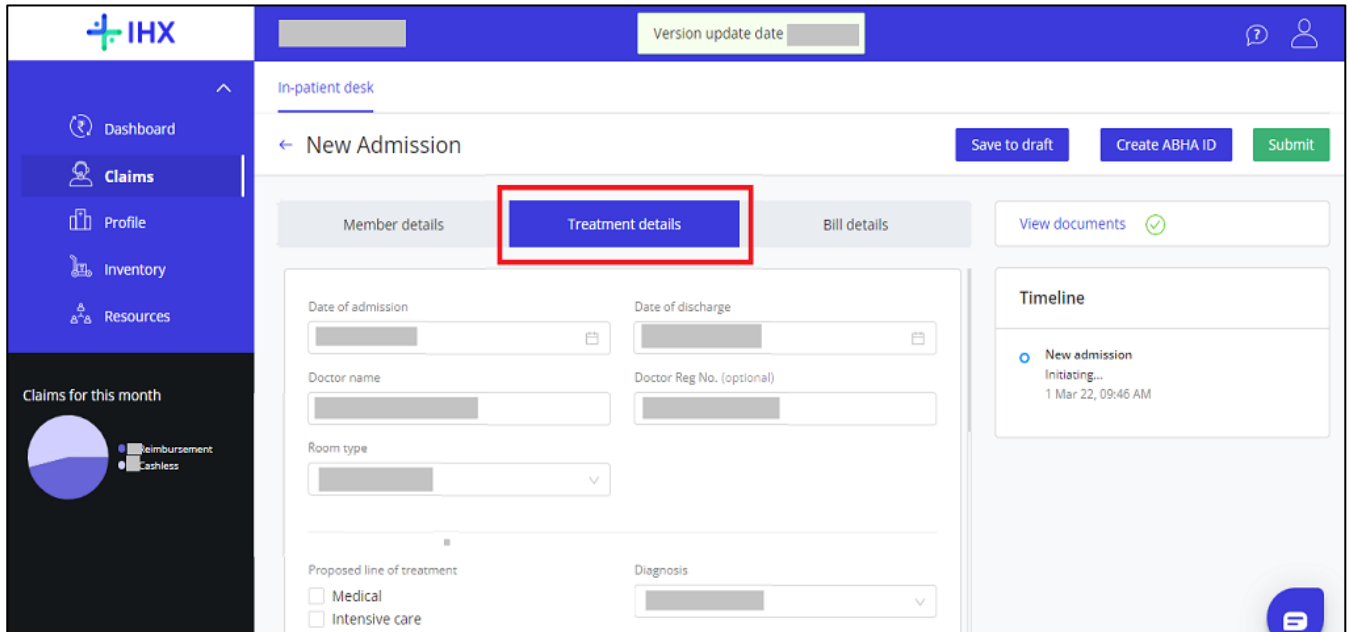
Have you uploaded KYC?
☒ Yes ☐ No

Select File
[redacted] v

Next

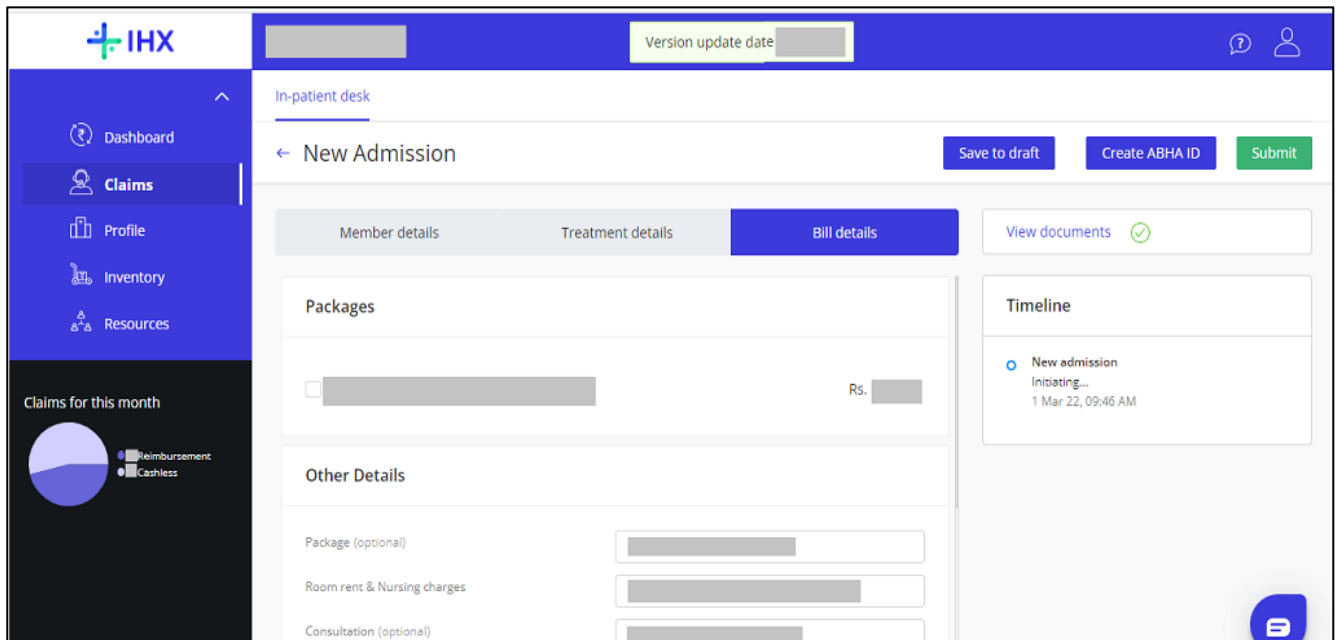
Step 9: Enter the treatment details and click on Next.

Note: More than one type of diagnosis and treatment can be added.



The screenshot shows the 'New Admission' form in the IHX system. The 'Treatment details' tab is selected and highlighted with a red box. The form includes fields for Date of admission, Date of discharge, Doctor name, Doctor Reg No. (optional), Room type, Proposed line of treatment (Medical, Intensive care), and Diagnosis. A 'Timeline' section on the right shows a 'New admission' event initiated on 1 Mar 22, 09:46 AM. The left sidebar shows the 'Claims' section with a pie chart for 'Claims for this month'.

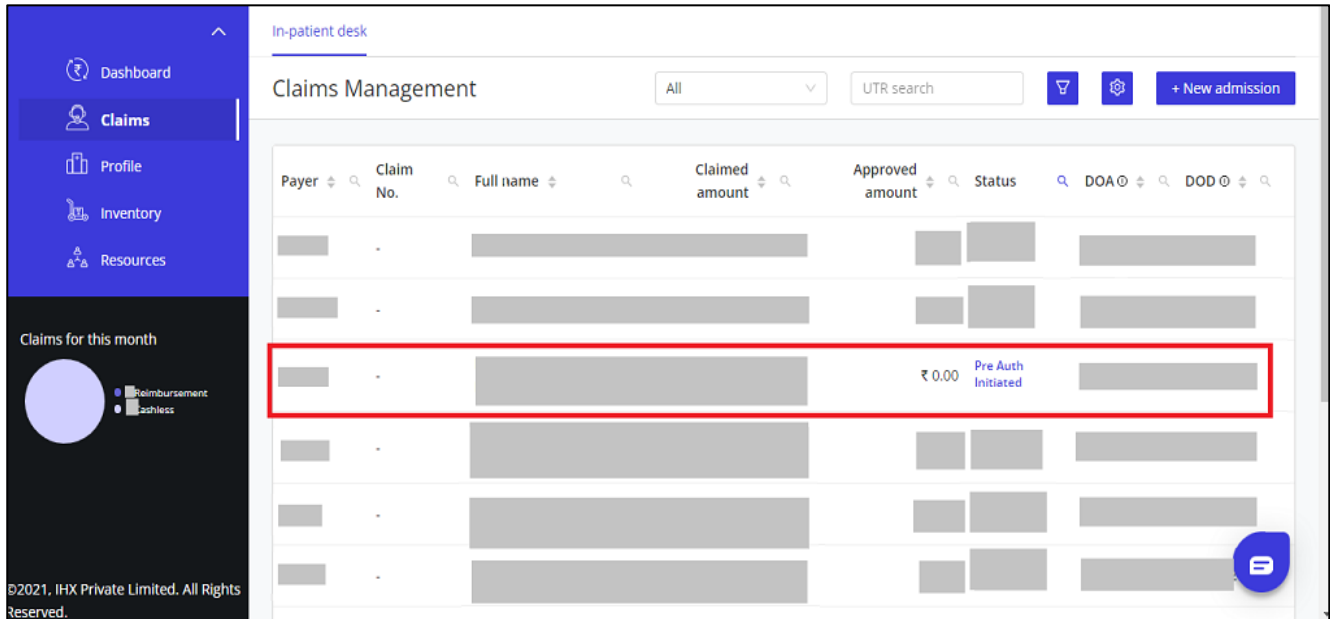
Step 10: Select the package/ enter bill amount under bill details and click on **Submit** to submit the claim to the payer.



The screenshot shows the 'New Admission' form in the IHX system, now on the 'Bill details' tab. The 'Packages' section includes a checkbox and a field for the amount in Rupees (Rs.). The 'Other Details' section includes fields for Package (optional), Room rent & Nursing charges, and Consultation (optional). The 'Timeline' section on the right shows the same 'New admission' event. The left sidebar shows the 'Claims' section with a pie chart for 'Claims for this month'.

Step 11: Click on Claims to check the status in claims queue.

Note: After the claim is received by the payer, the claim number will be generated and the status will be 'Processing'.



Claims Management

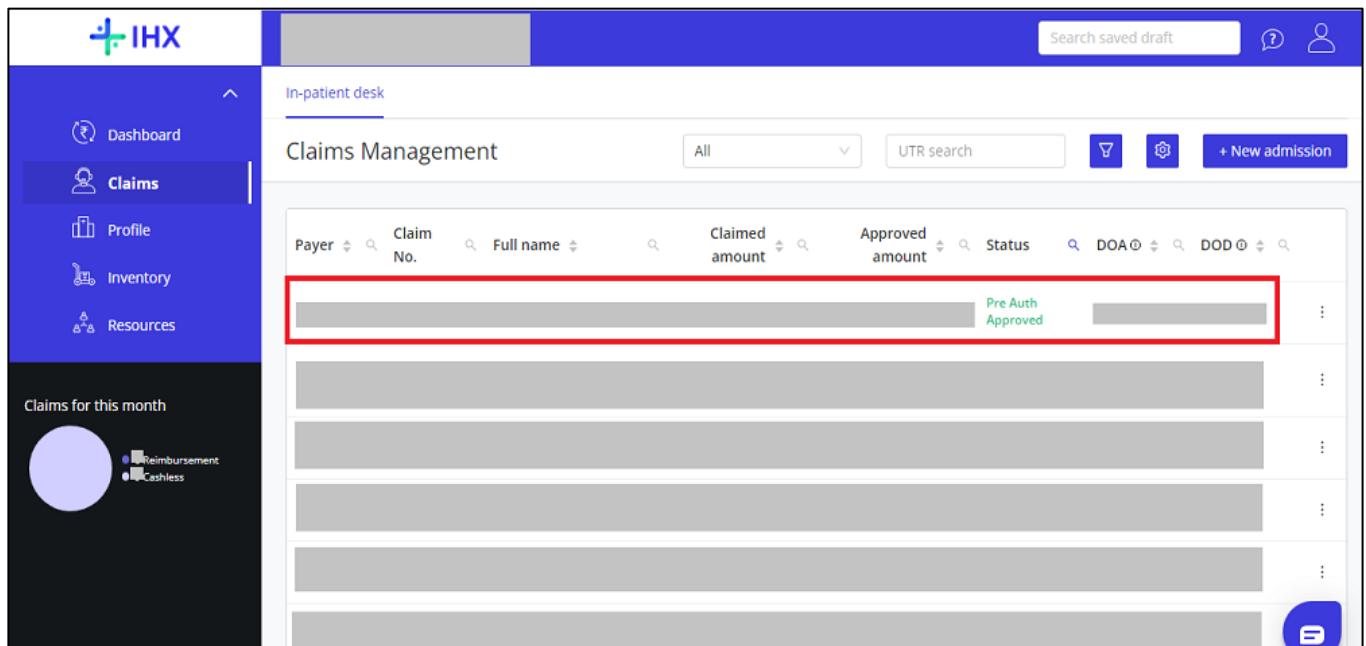
Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA	DOD
	-						
	-						
	-			₹ 0.00	Pre Auth Initiated		
	-						
	-						
	-						

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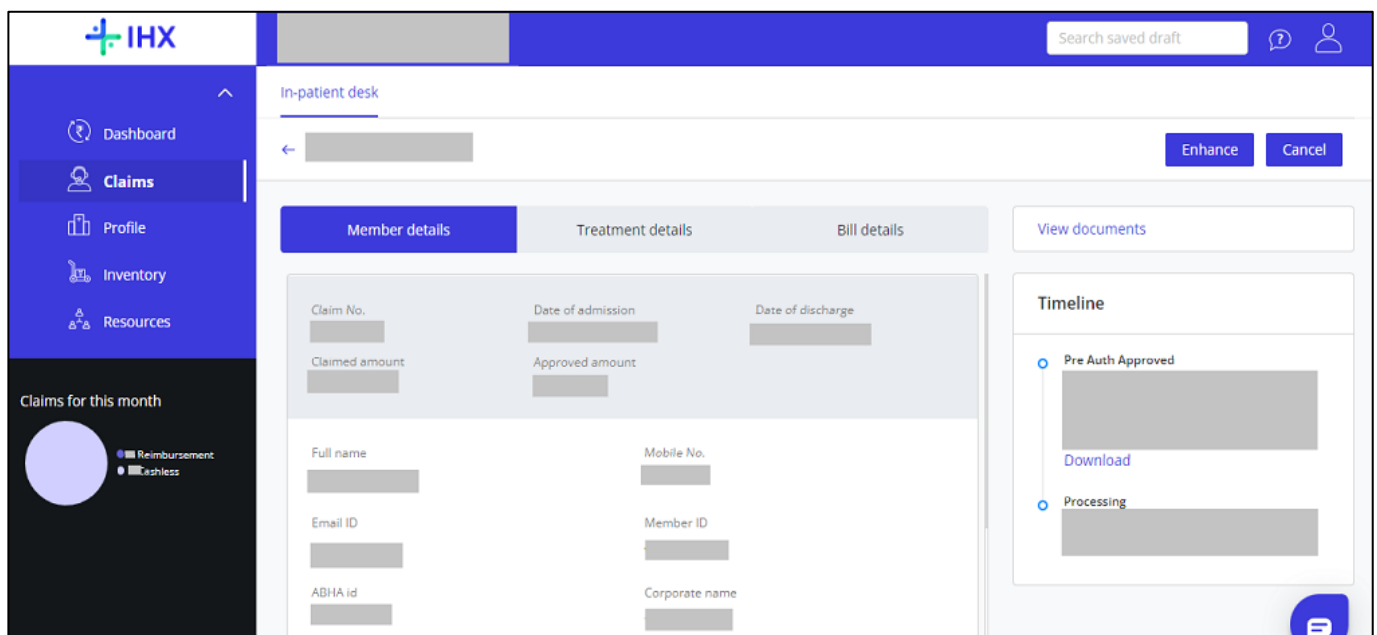
3.2 SUBMITTING ENHANCEMENT

For a claim which is already approved and needs enhancement, as the patient is going to stay longer in the hospital or if there is a change in the treatment plan.

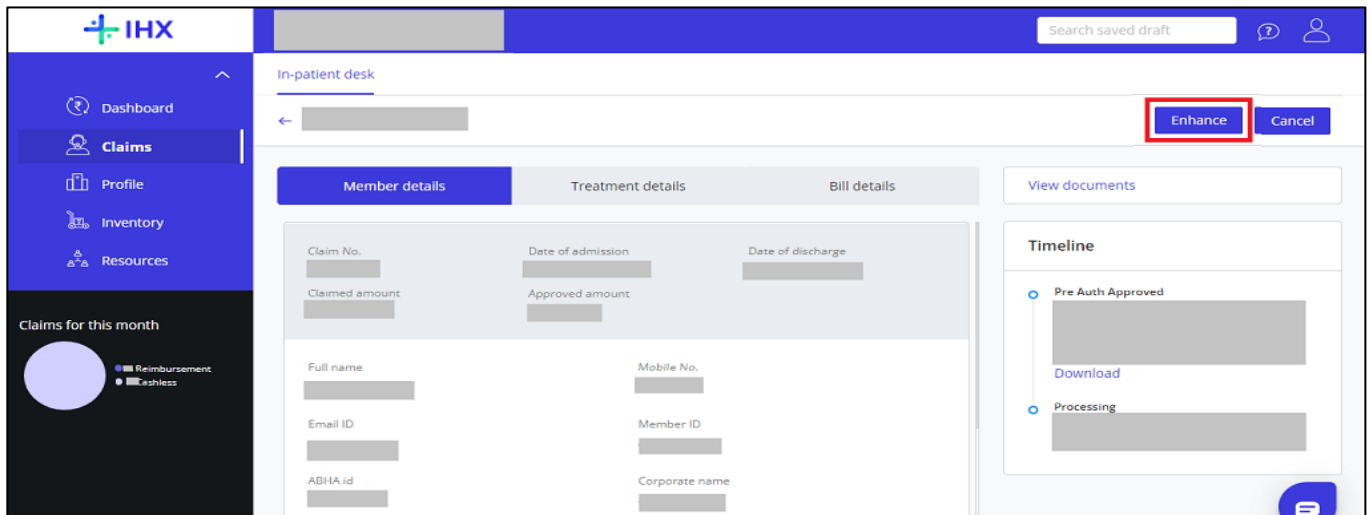
Step 1: Go to the claims queue and select the claim



Step 2: Click on the claim to open.

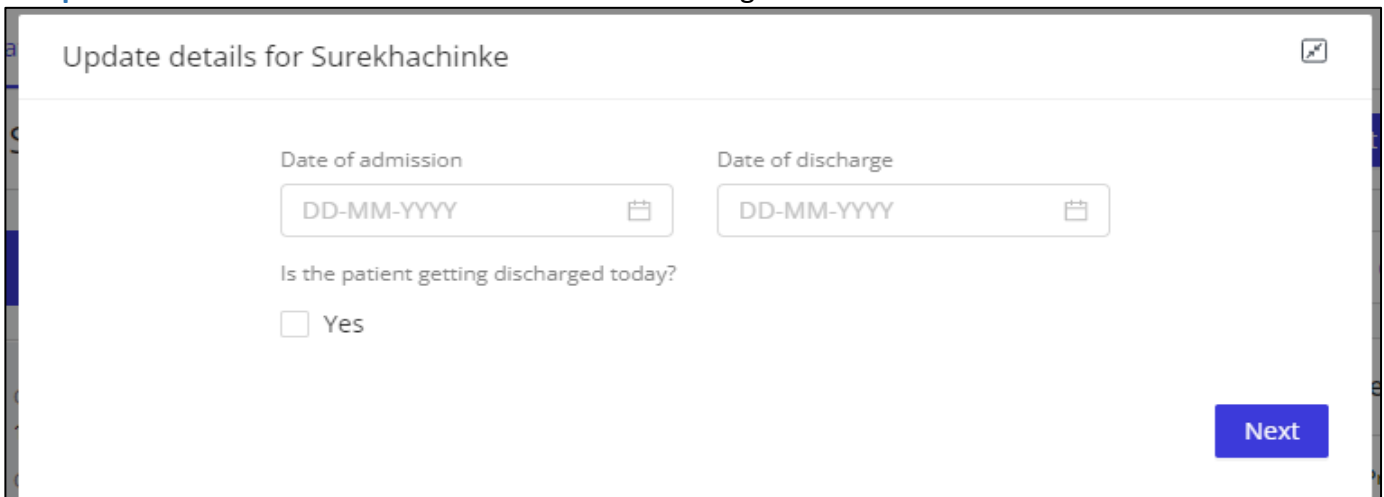


Step 3: Click on Enhance.



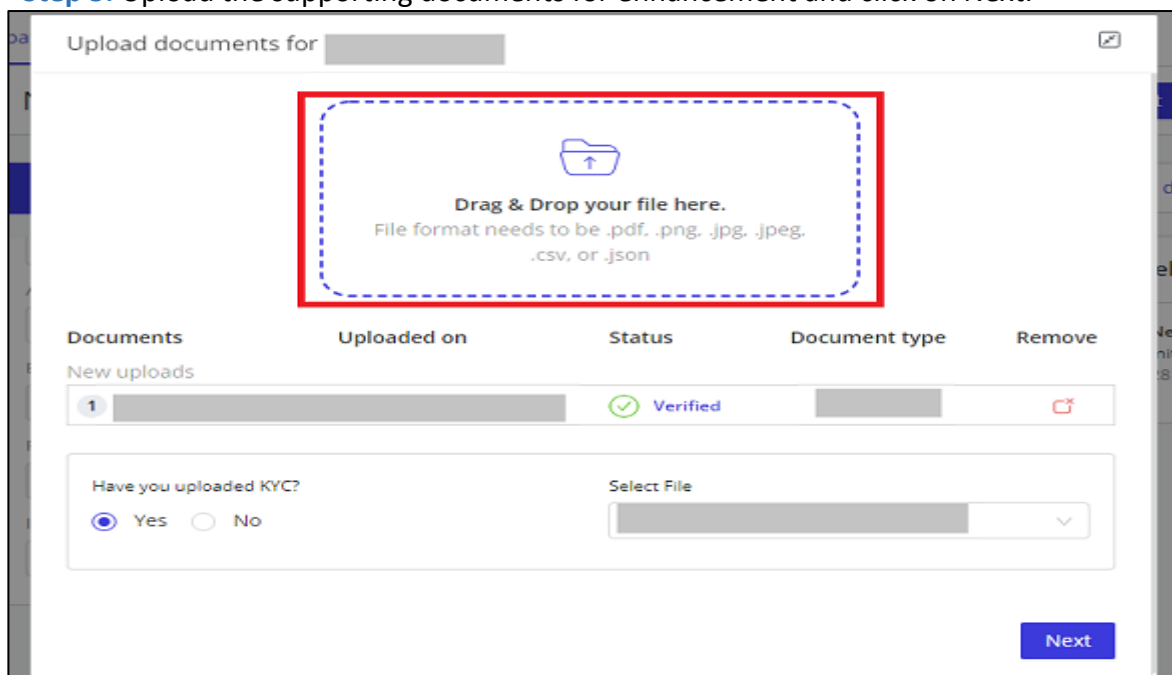
The screenshot shows the IHX 'in-patient desk' interface. On the left is a sidebar with navigation links: Dashboard, Claims (selected), Profile, Inventory, and Resources. Below the sidebar is a 'Claims for this month' section with a pie chart and legend for Reimbursement and Cashless. The main area is titled 'in-patient desk' and contains tabs for Member details, Treatment details, and Bill details. The 'Member details' tab is active, showing fields for Claim No., Date of admission, Date of discharge, Claimed amount, Approved amount, Full name, Mobile No., Email ID, Member ID, ABHA id, and Corporate name. On the right, there is a 'View documents' button and a 'Timeline' section with 'Pre Auth Approved' and 'Processing' stages. A red box highlights the 'Enhance' button in the top right corner.

Step 4: Select the date of admission and date of discharge.



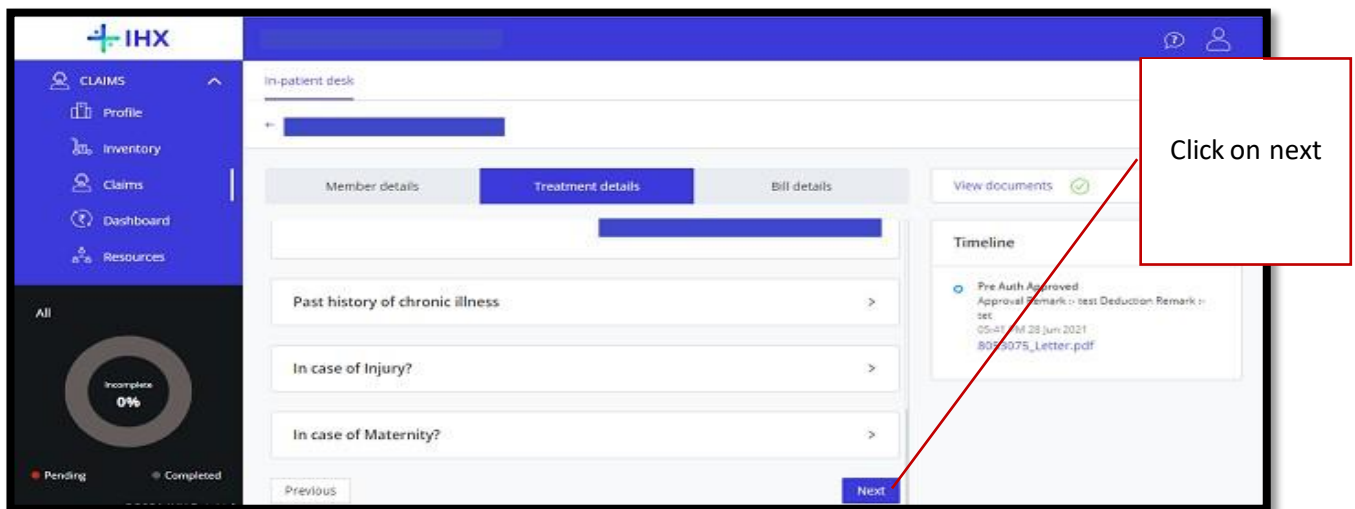
The screenshot shows the 'Update details for Surekhachinke' form. It has two date pickers: 'Date of admission' and 'Date of discharge', both showing 'DD-MM-YYYY'. Below these is a question 'Is the patient getting discharged today?' with a 'Yes' radio button. A 'Next' button is at the bottom right. The 'Date of admission' and 'Date of discharge' fields are highlighted with red boxes.

Step 5: Upload the supporting documents for enhancement and click on Next.



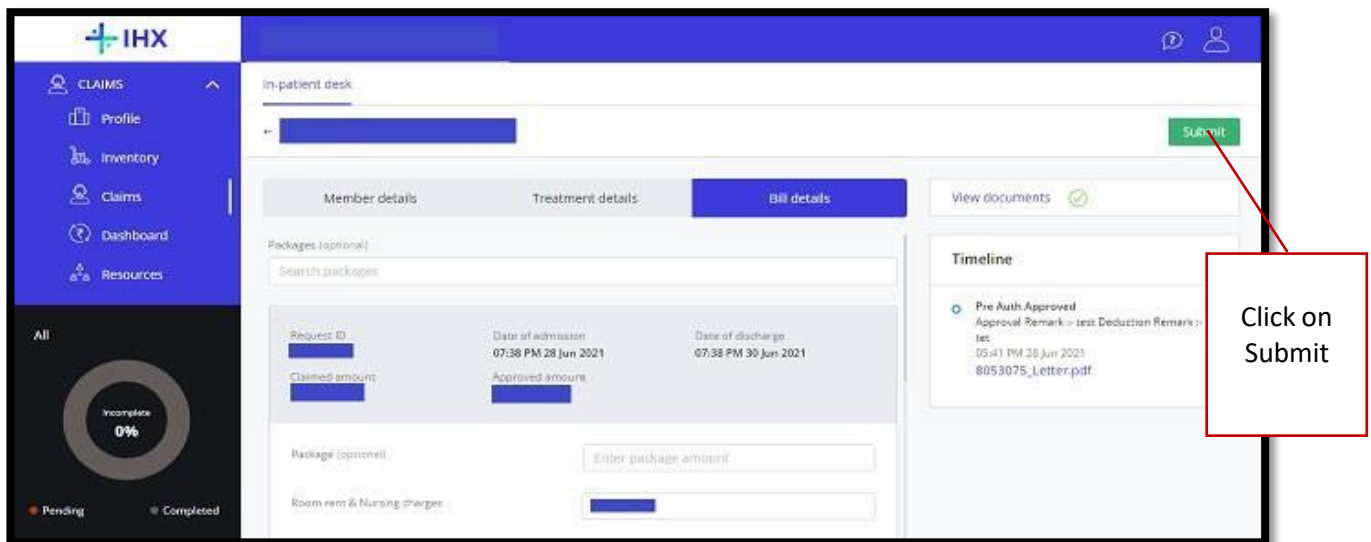
The screenshot shows the 'Upload documents for' form. It features a 'Drag & Drop your file here' area with a folder icon and text indicating supported file formats: .pdf, .png, .jpg, .jpeg, .csv, or .json. Below this is a table with columns: Documents, Uploaded on, Status, Document type, and Remove. The table shows one 'New uploads' entry with a status of 'Verified'. At the bottom, there is a 'Have you uploaded KYC?' section with 'Yes' and 'No' radio buttons, and a 'Select File' dropdown menu. A 'Next' button is at the bottom right. The 'Drag & Drop your file here' area is highlighted with a red box.

Step 6: Edit the treatment details (if applicable) and click on Next



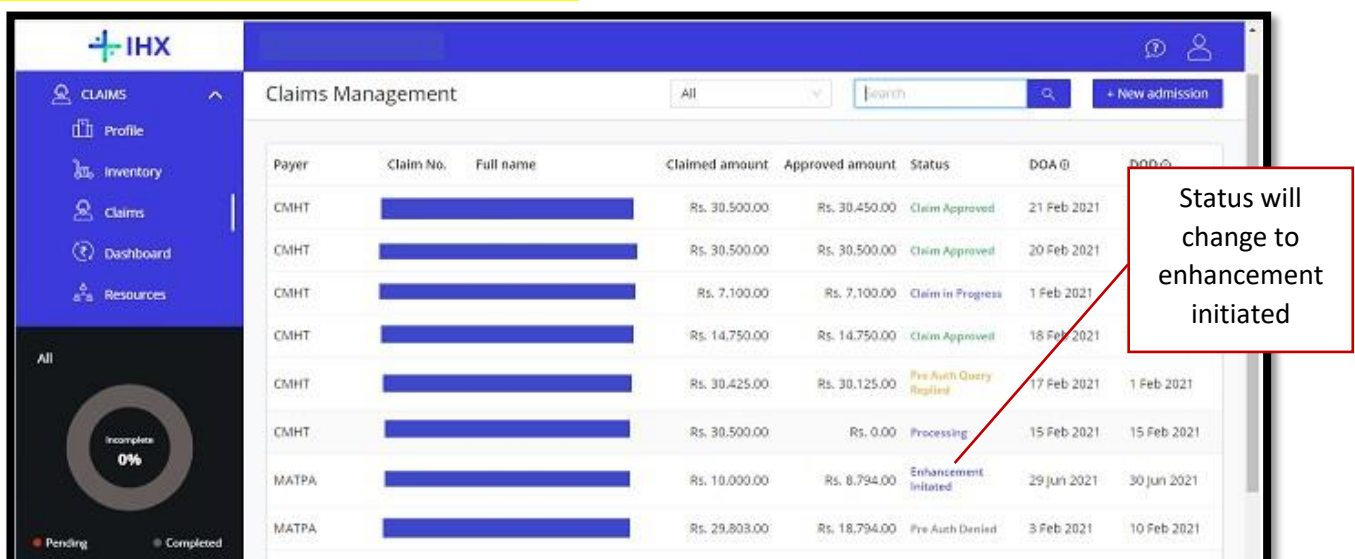
The screenshot shows the 'In-patient desk' interface with the 'Treatment details' tab selected. The 'Next' button is highlighted with a red box and the text 'Click on next'.

Step 7: Enter the Bill details and click on Submit to raise an enhancement



The screenshot shows the 'In-patient desk' interface with the 'Bill details' tab selected. The 'Submit' button is highlighted with a red box and the text 'Click on Submit'.

Step 8: Click on Claims to check the status. **Note:** The status of the claim will change to 'Enhancement Initiated' in the claims queue.



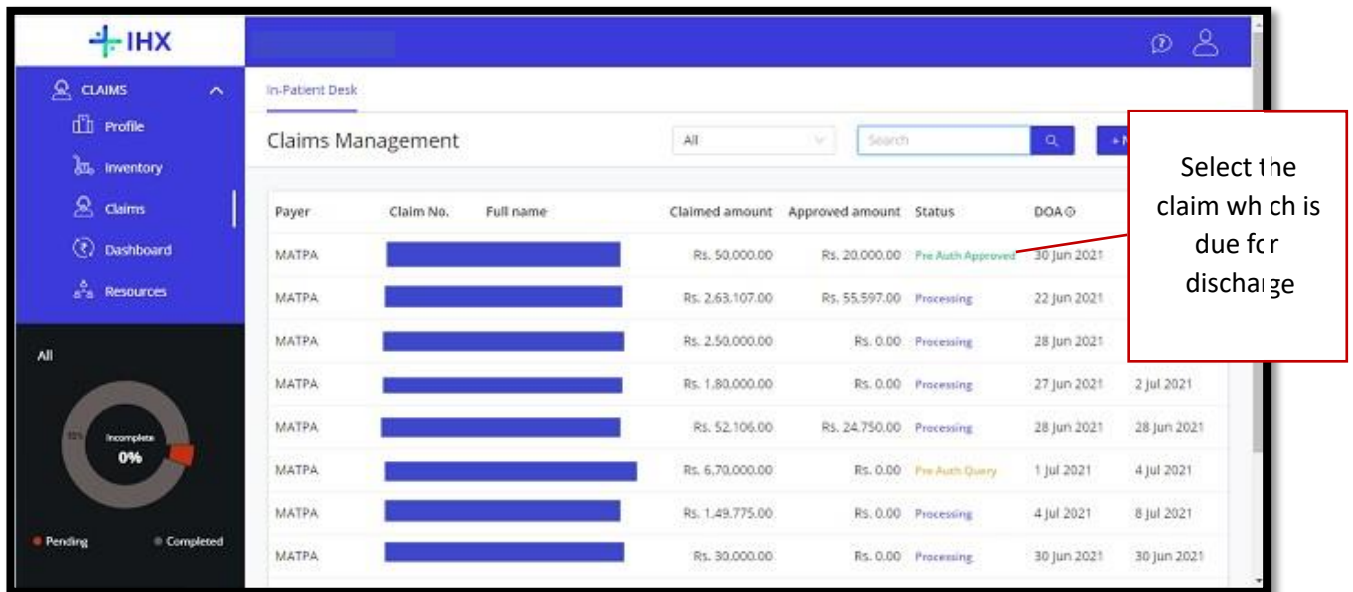
The screenshot shows the 'Claims Management' interface with a table of claims. The 'Enhancement Initiated' status is highlighted with a red box and the text 'Status will change to enhancement initiated'.

Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA @	DOB @
CMHT			Rs. 30,500.00	Rs. 30,450.00	Claim Approved	21 Feb 2021	
CMHT			Rs. 30,500.00	Rs. 30,500.00	Claim Approved	20 Feb 2021	
CMHT			Rs. 7,100.00	Rs. 7,100.00	Claim in Progress	1 Feb 2021	
CMHT			Rs. 14,750.00	Rs. 14,750.00	Claim Approved	18 Feb 2021	
CMHT			Rs. 30,425.00	Rs. 30,125.00	Pre Auth Query Replied	17 Feb 2021	1 Feb 2021
CMHT			Rs. 30,500.00	Rs. 0.00	Processing	15 Feb 2021	15 Feb 2021
MATPA			Rs. 10,000.00	Rs. 8,794.00	Enhancement Initiated	29 Jun 2021	30 Jun 2021
MATPA			Rs. 29,803.00	Rs. 18,794.00	Pre Auth Denied	3 Feb 2021	10 Feb 2021

3.3 SUBMITTING FINAL BILL AND DISCHARGE DOCUMENTS

For a claim which is already approved and the patient is going to be discharged.

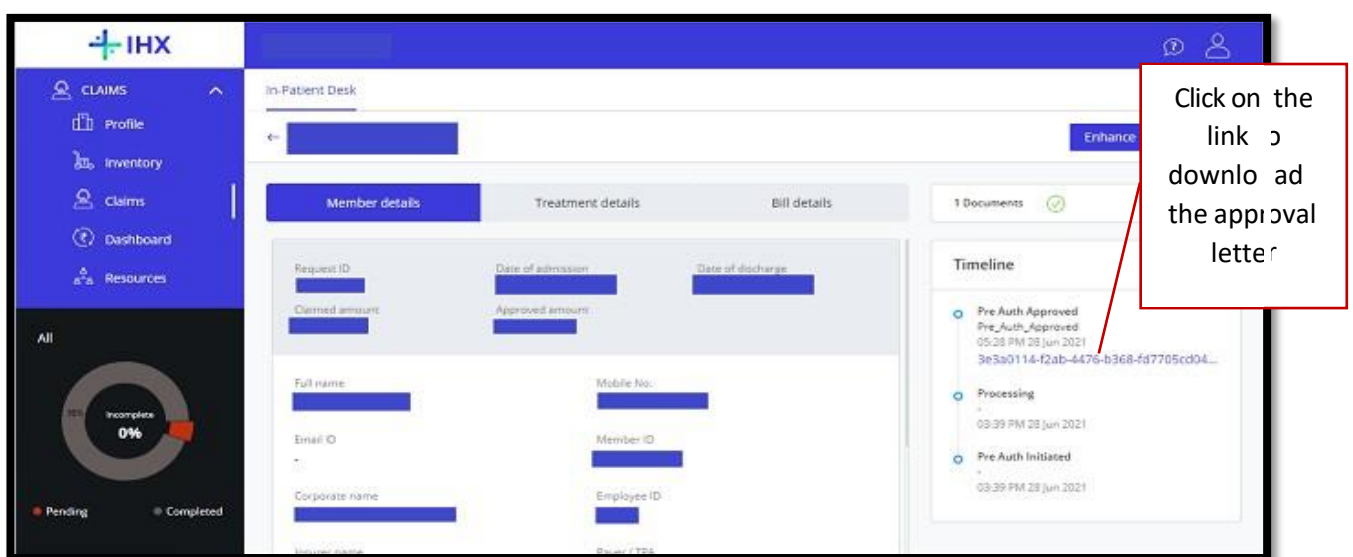
Step 1: Go to the claims queue and select the claim.



The screenshot shows the 'Claims Management' interface. On the left is a sidebar with navigation links: CLAIMS, Profile, Inventory, Claims, Dashboard, and Resources. Below the sidebar is a circular progress chart showing 0% Incomplete and 100% Pending. The main area displays a table of claims with columns: Payer, Claim No., Full name, Claimed amount, Approved amount, Status, and DOA. The first claim is highlighted with a red box and a callout that says 'Select the claim which is due for discharge'.

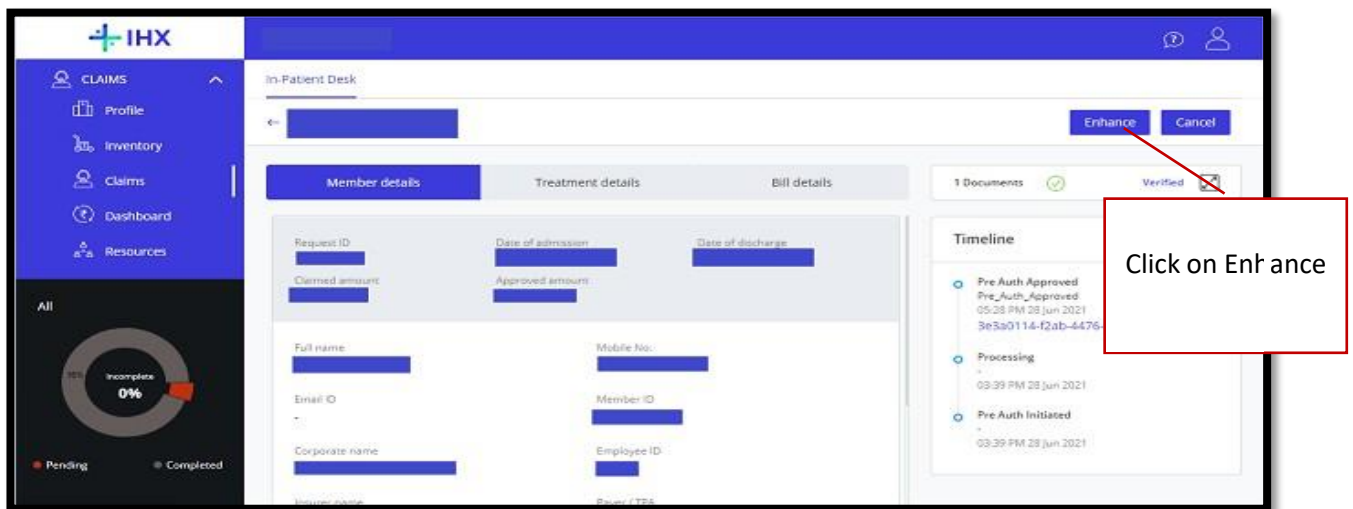
Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA
MATPA			Rs. 50,000.00	Rs. 20,000.00	Pre Auth Approved	30 Jun 2021
MATPA			Rs. 2,63,107.00	Rs. 55,597.00	Processing	22 Jun 2021
MATPA			Rs. 2,50,000.00	Rs. 0.00	Processing	28 Jun 2021
MATPA			Rs. 1,80,000.00	Rs. 0.00	Processing	27 Jun 2021
MATPA			Rs. 52,106.00	Rs. 24,750.00	Processing	28 Jun 2021
MATPA			Rs. 6,70,000.00	Rs. 0.00	Pre Auth Query	1 Jul 2021
MATPA			Rs. 1,49,775.00	Rs. 0.00	Processing	4 Jul 2021
MATPA			Rs. 30,000.00	Rs. 0.00	Processing	30 Jun 2021

Step 2: Click on the claim to open.

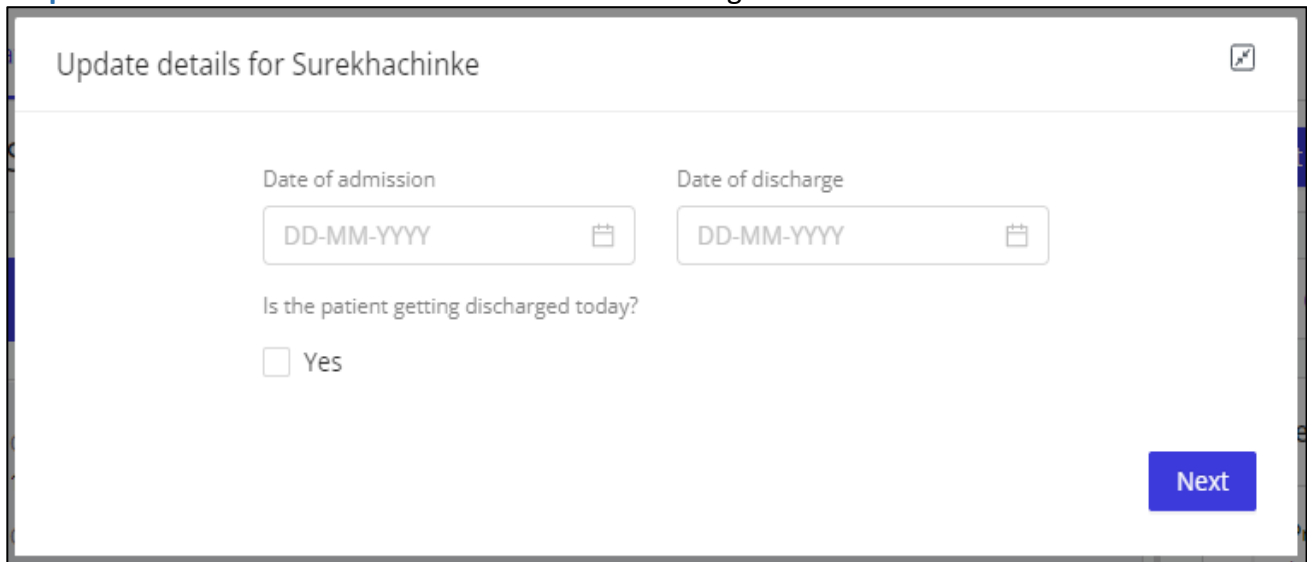


The screenshot shows the 'Member details' page. The left sidebar is the same as in Step 1. The main area is divided into three tabs: Member details, Treatment details, and Bill details. The 'Member details' tab is active, showing fields for Request ID, Date of admission, Date of discharge, Claimed amount, Approved amount, Full name, Mobile No., Email ID, Member ID, Corporate name, and Employee ID. On the right, there is a 'Timeline' section showing a list of events. The first event is 'Pre Auth Approved' with a 'Download' link. A red box highlights this link, and a callout says 'Click on the link to download the approval letter'.

Step 3: Click on Enhance.

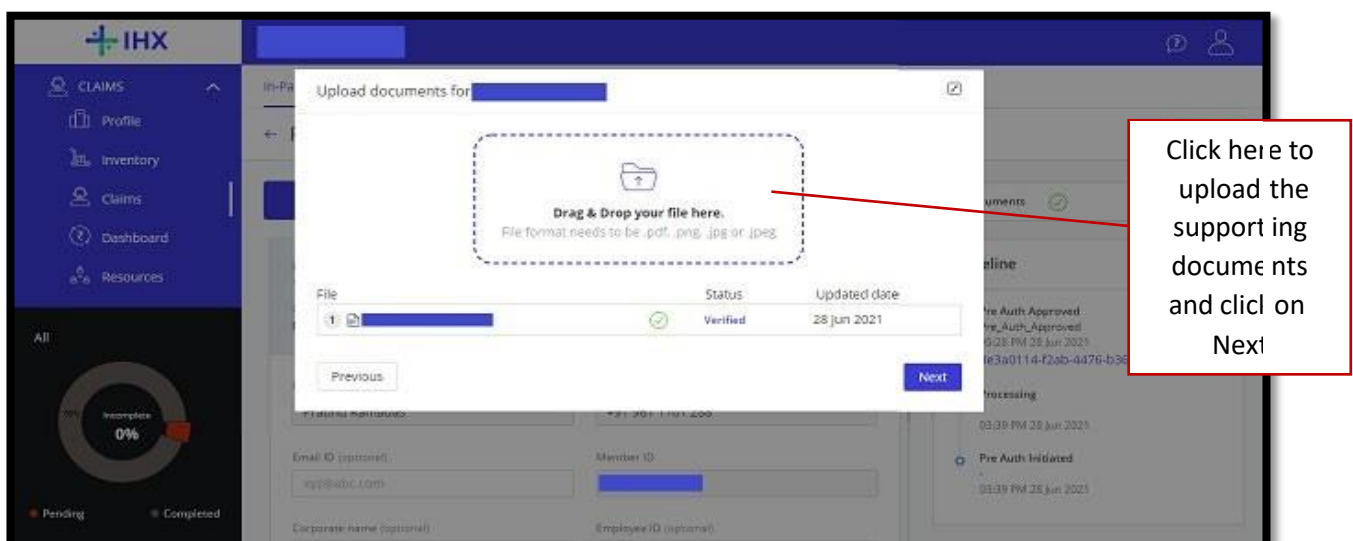


Step 4: Select the date of admission and date of discharge.

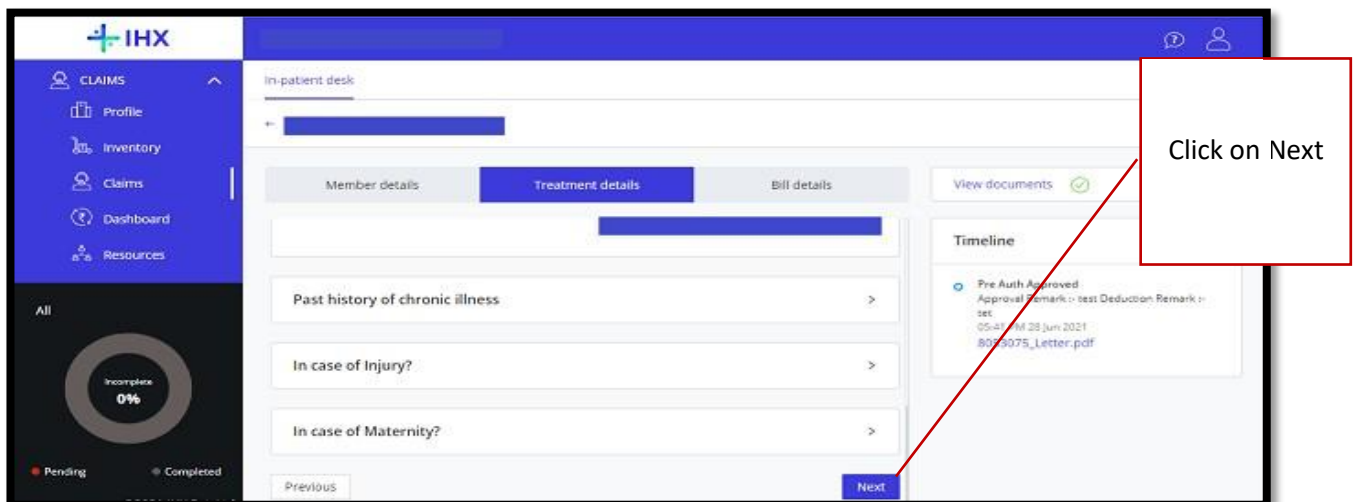


The screenshot shows the 'Update details for Surekhachinke' form. It has two date pickers for 'Date of admission' and 'Date of discharge', both showing 'DD-MM-YYYY'. Below these is a checkbox for 'Is the patient getting discharged today?' with 'Yes' selected. A 'Next' button is located at the bottom right.

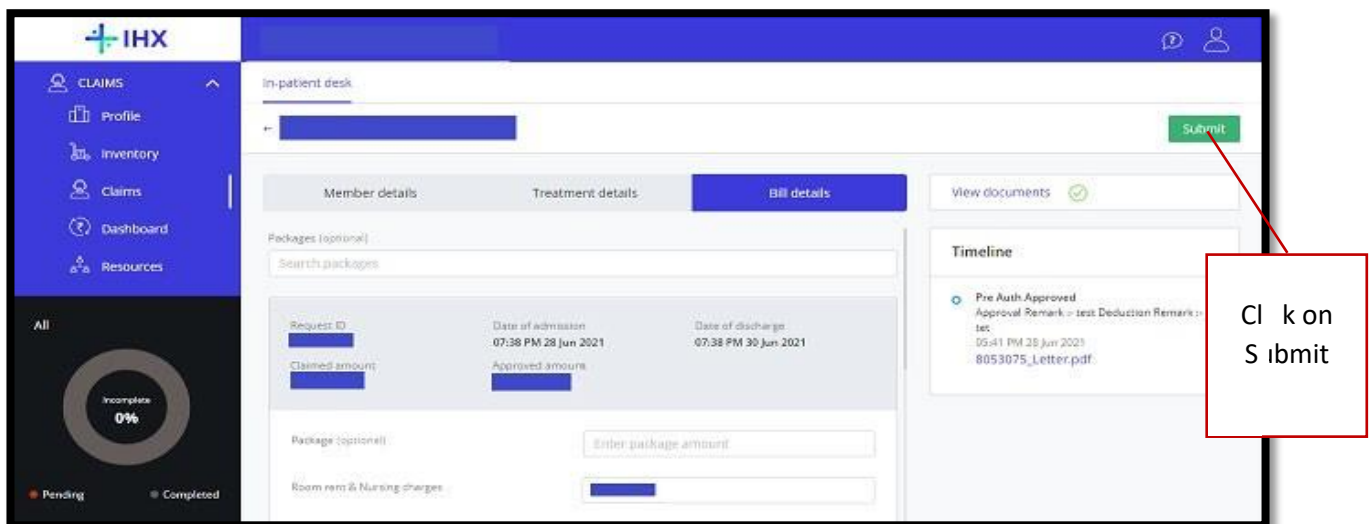
Step 5: Upload the supporting documents for discharge and click on Next to submit.



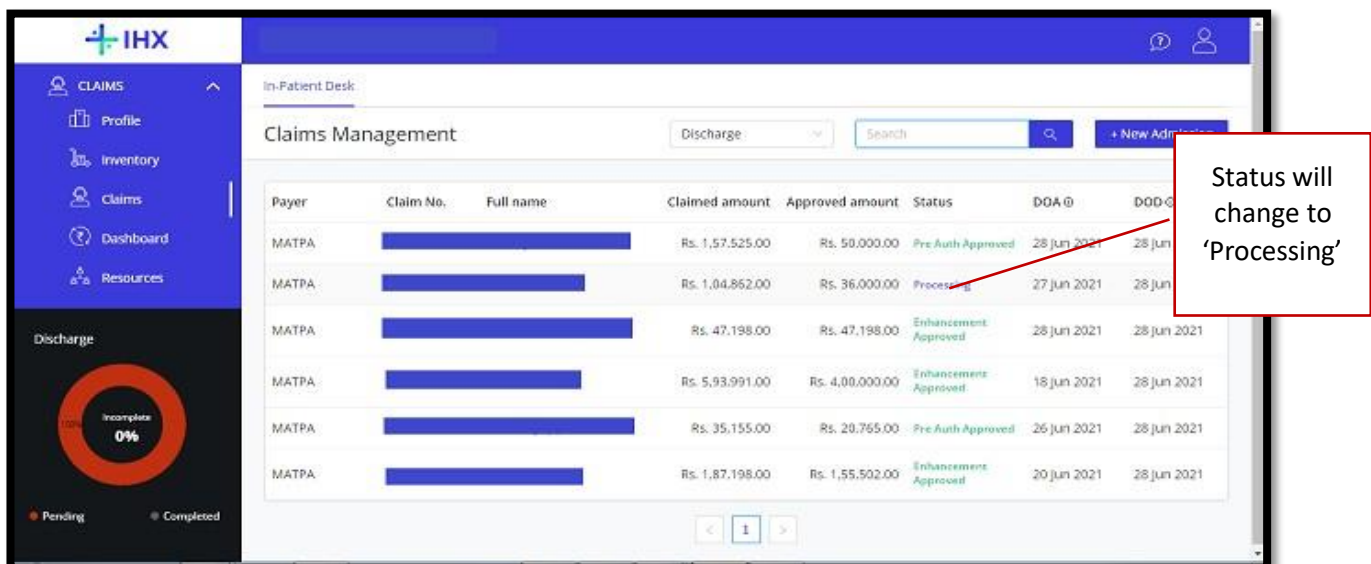
Step 6: Edit the treatment details (if applicable) and click on Next.



Step 7: Enter the Bill details and click on Submit.



Step 8: Click on Claims to check the status. **Note:** After submitting a discharge, the status of the claim will change from discharge initiated to 'Processing' in the claims queue.

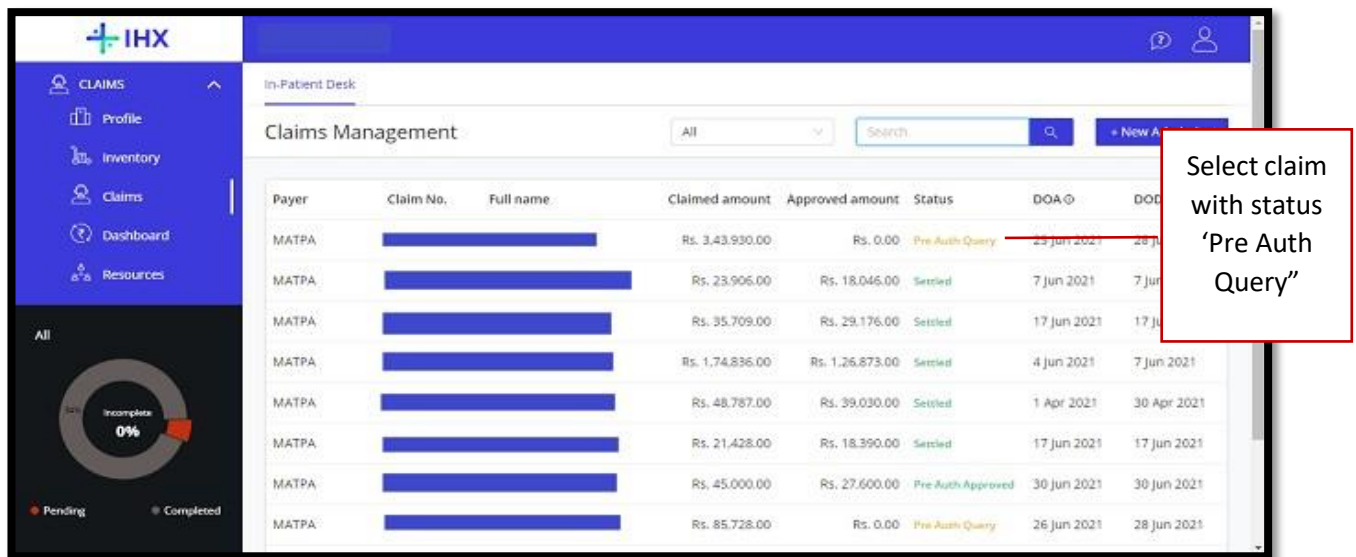


Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA @	DOD @
MATPA			Rs. 1,57,525.00	Rs. 50,000.00	Pre Auth Approved	28 jun 2021	28 jun 2021
MATPA			Rs. 1,04,862.00	Rs. 36,000.00	Processing	27 jun 2021	28 jun 2021
MATPA			Rs. 47,198.00	Rs. 47,198.00	Enhancement Approved	28 jun 2021	28 jun 2021
MATPA			Rs. 5,93,991.00	Rs. 4,00,000.00	Enhancement Approved	18 jun 2021	28 jun 2021
MATPA			Rs. 35,155.00	Rs. 20,765.00	Pre Auth Approved	26 jun 2021	28 jun 2021
MATPA			Rs. 1,87,198.00	Rs. 1,55,502.00	Enhancement Approved	20 jun 2021	28 jun 2021

3.4 SUBMITTING MISSING DOCUMENTS

For a claim which for which the payer has raised a query.

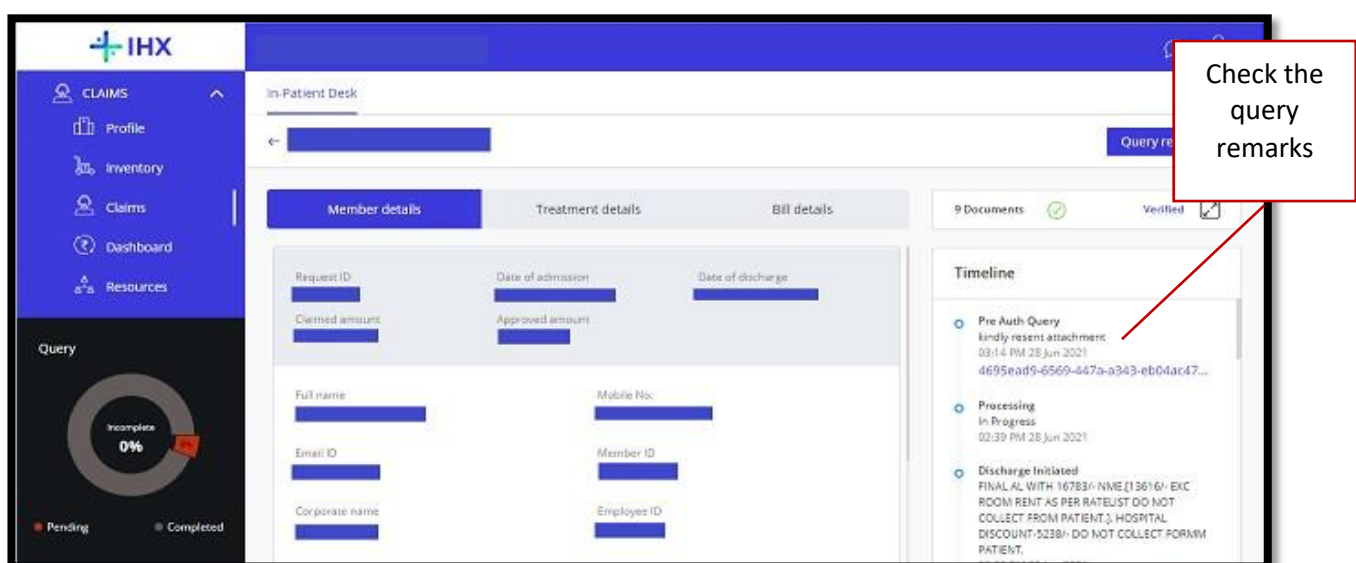
Step 1: Select the claim that has the status 'Pre Auth Query' and click on it to open.



The screenshot shows the 'Claims Management' interface. On the left is a sidebar with navigation links: CLAIMS, Profile, Inventory, Claims, Dashboard, and Resources. Below the sidebar is a circular progress chart showing 'Incomplete 0%' and 'Completed' status. The main area displays a table of claims with columns: Payer, Claim No., Full name, Claimed amount, Approved amount, Status, DOA, and DOD. The table lists several claims from MATPA. One claim with status 'Pre Auth Query' is highlighted, and a red box with a callout bubble points to it, stating 'Select claim with status 'Pre Auth Query''.

Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA	DOD
MATPA	[REDACTED]	[REDACTED]	Rs. 3,43,930.00	Rs. 0.00	Pre Auth Query	23 Jun 2021	28 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 23,906.00	Rs. 18,046.00	Settled	7 Jun 2021	7 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 35,709.00	Rs. 29,176.00	Settled	17 Jun 2021	17 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 1,74,836.00	Rs. 1,26,873.00	Settled	4 Jun 2021	7 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 48,787.00	Rs. 39,030.00	Settled	1 Apr 2021	30 Apr 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 21,428.00	Rs. 18,390.00	Settled	17 Jun 2021	17 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 45,000.00	Rs. 27,600.00	Pre Auth Approved	30 Jun 2021	30 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 85,728.00	Rs. 0.00	Pre Auth Query	26 Jun 2021	28 Jun 2021

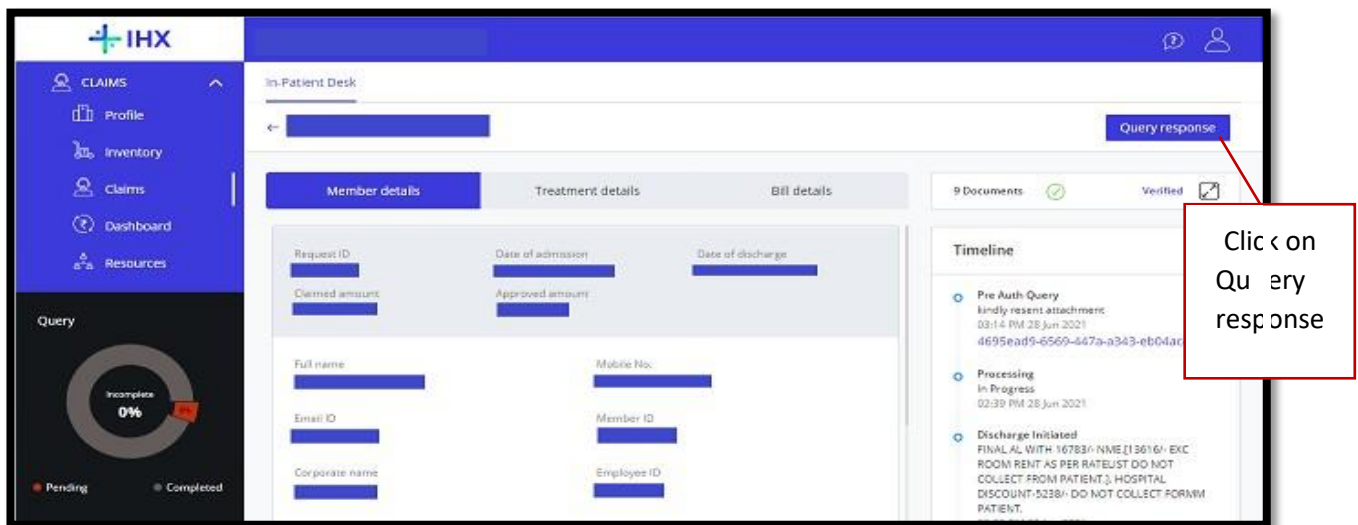
Step 2: Download the query document or check the remarks.



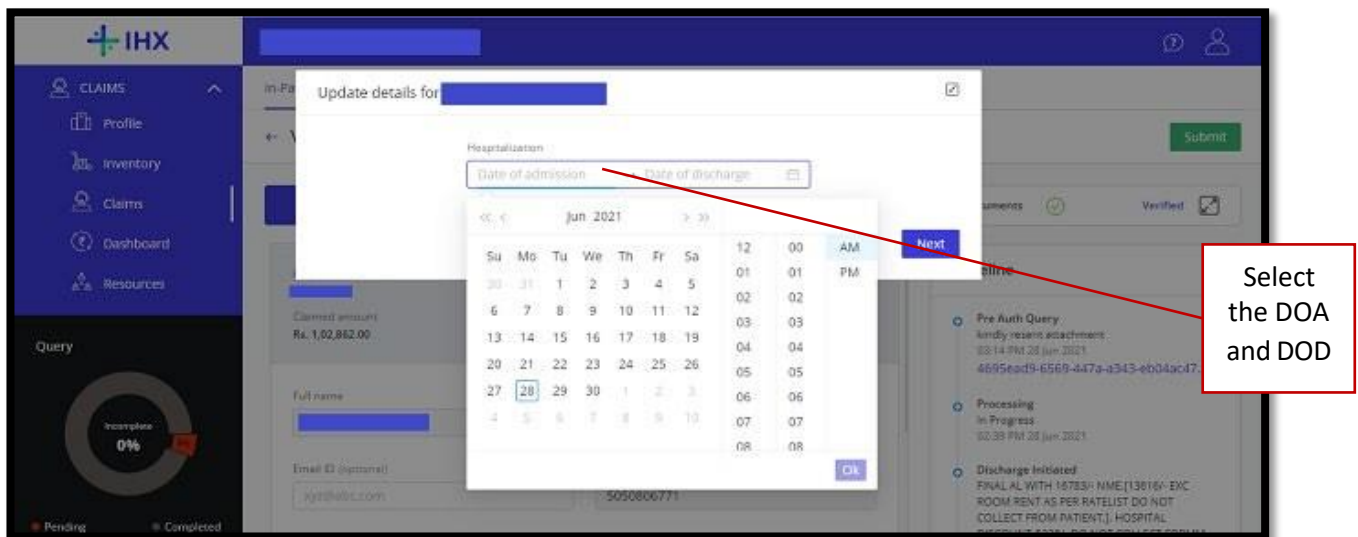
The screenshot shows the 'Query' details page for a claim. The left sidebar is the same as in the previous screenshot. The main area is divided into sections: Member details, Treatment details, Bill details, and a Timeline. The 'Query remarks' section is highlighted with a red box and a callout bubble stating 'Check the query remarks'. The Timeline shows the following steps:

- Pre Auth Query**: kindly resent attachment. 03:14 PM 28 Jun 2021. 4695ead9-6569-447a-a343-eb04ac47...
- Processing**: In Progress. 02:39 PM 28 Jun 2021.
- Discharge Initiated**: FINAL AL WITH 16783/- NME (13616/- EXC ROOM RENT AS PER RATE/ST DO NOT COLLECT FROM PATIENT & HOSPITAL DISCOUNT-5238/- DO NOT COLLECT FROM PATIENT.

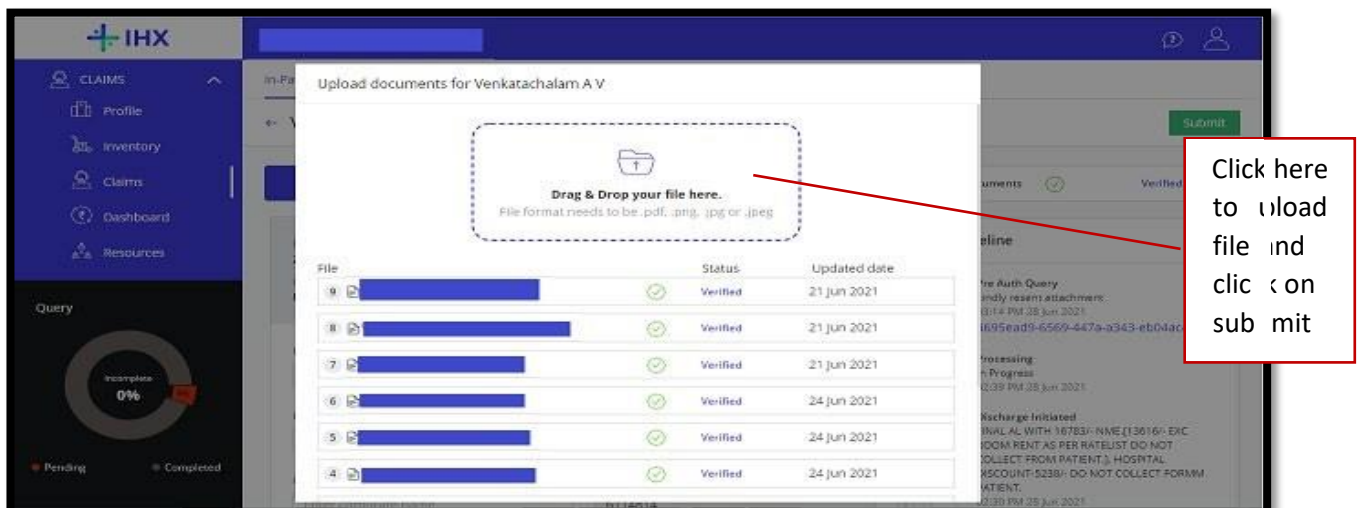
Step 3: Click on Query response.



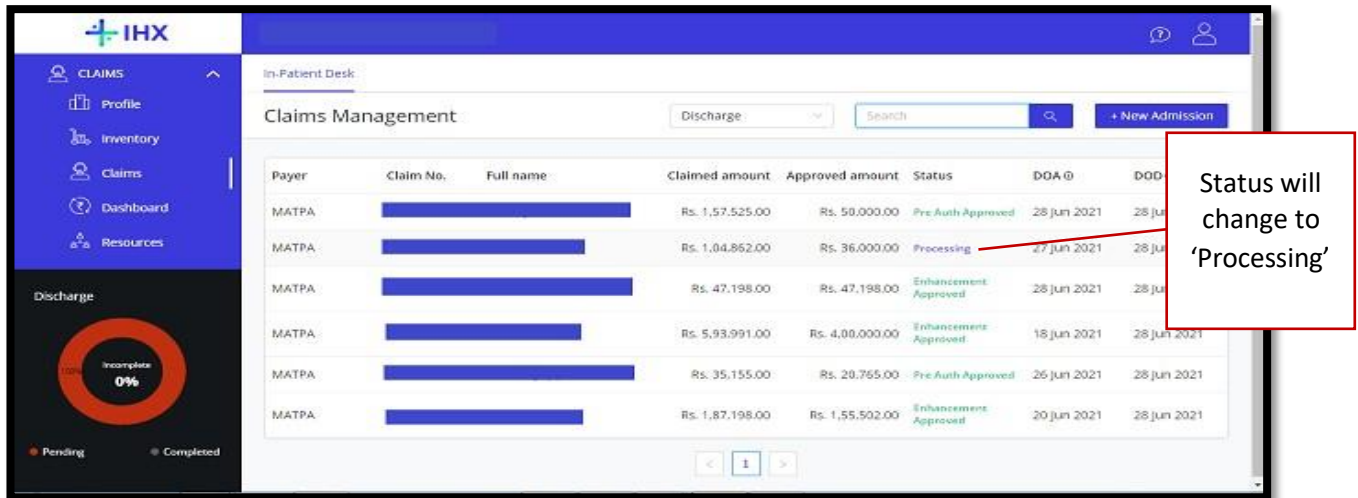
Step 4: Enter the date of admission and date of discharge.



Step 5: Upload the missing documents and click on Submit



Step 6: Click on Claims to check the status. **Note:** The status of the claim will change to 'Processing' in the claims queue.



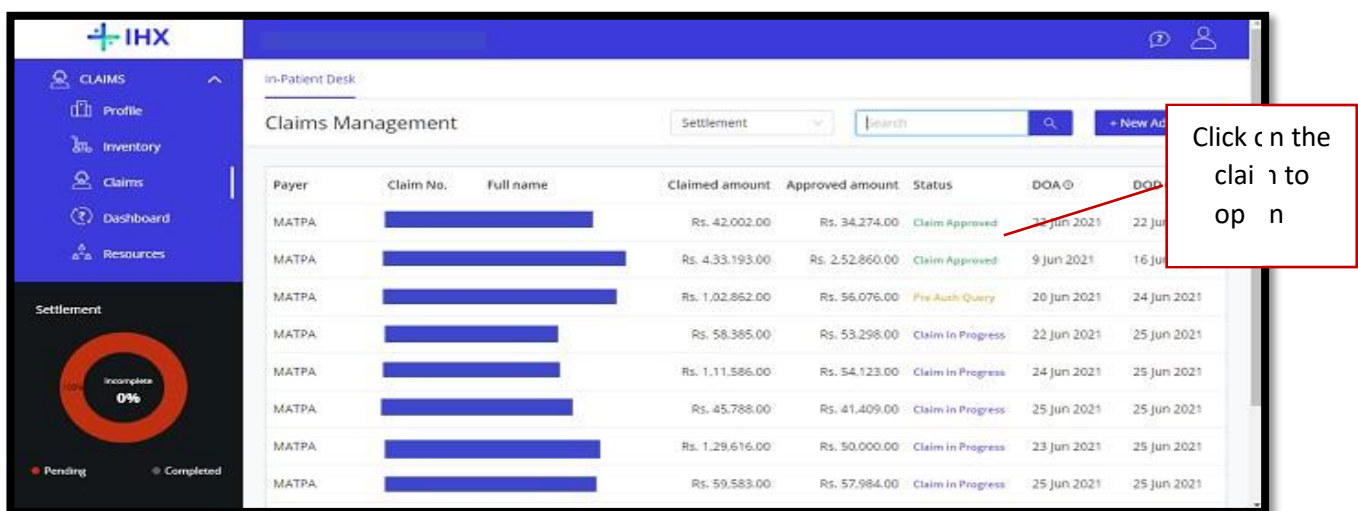
The screenshot shows the 'Claims Management' interface. On the left is a sidebar with navigation links: CLAIMS, Profile, Inventory, Claims, Dashboard, and Resources. Below the sidebar is a 'Discharge' section with a donut chart showing 'Incomplete 0%' and a legend for 'Pending' (red) and 'Completed' (green). The main area is titled 'Claims Management' and includes a 'Discharge' dropdown, a search bar, and a '+ New Admission' button. A table lists claims with columns: Payer, Claim No., Full name, Claimed amount, Approved amount, Status, DOA @, and DOD. One claim has a status of 'Processing', highlighted by a red callout box with the text 'Status will change to 'Processing''.

Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA @	DOD
MATPA			Rs. 1,57,525.00	Rs. 50,000.00	Pre Auth Approved	28 Jun 2021	28 Jun 2021
MATPA			Rs. 1,04,862.00	Rs. 36,000.00	Processing	27 Jun 2021	28 Jun 2021
MATPA			Rs. 47,198.00	Rs. 47,198.00	Enhancement Approved	28 Jun 2021	28 Jun 2021
MATPA			Rs. 5,93,991.00	Rs. 4,00,000.00	Enhancement Approved	18 Jun 2021	28 Jun 2021
MATPA			Rs. 35,155.00	Rs. 20,765.00	Pre Auth Approved	26 Jun 2021	28 Jun 2021
MATPA			Rs. 1,87,198.00	Rs. 1,55,502.00	Enhancement Approved	20 Jun 2021	28 Jun 2021

3.5 SUBMITTING SETTLEMENT CLAIMS DOCUMENTS

This is for submitting the claim documents for the settlement process to be initiated.

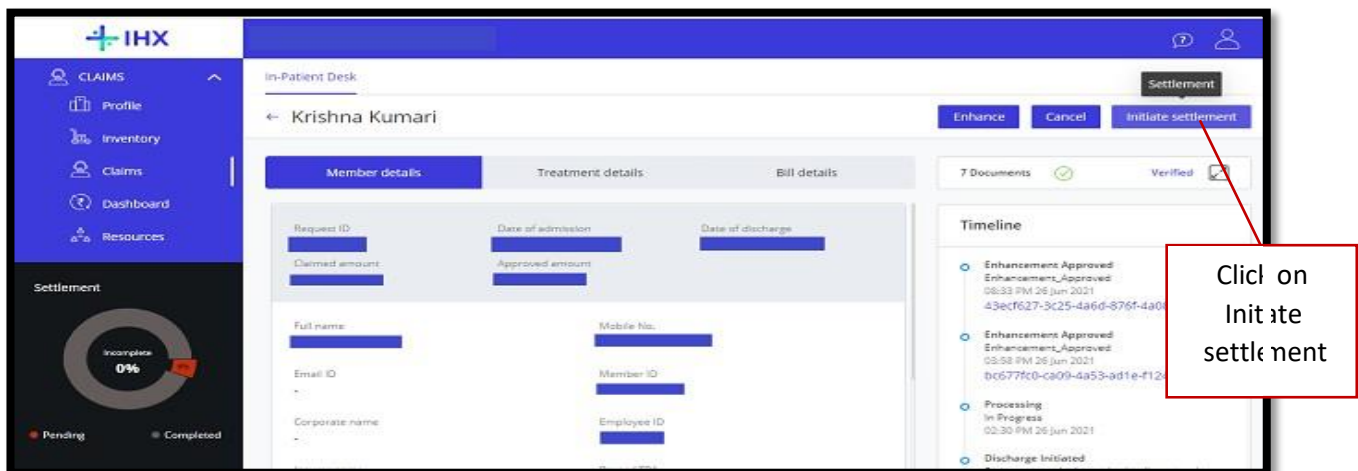
Step 1: Select a claim for which patient is discharged and click on the claim to open.



The screenshot shows the 'Claims Management' interface with the 'Settlement' dropdown selected. The table lists claims with columns: Payer, Claim No., Full name, Claimed amount, Approved amount, Status, DOA @, and DOD. A red callout box points to a claim with the status 'Claim Approved' and the text 'Click on the claim to open'.

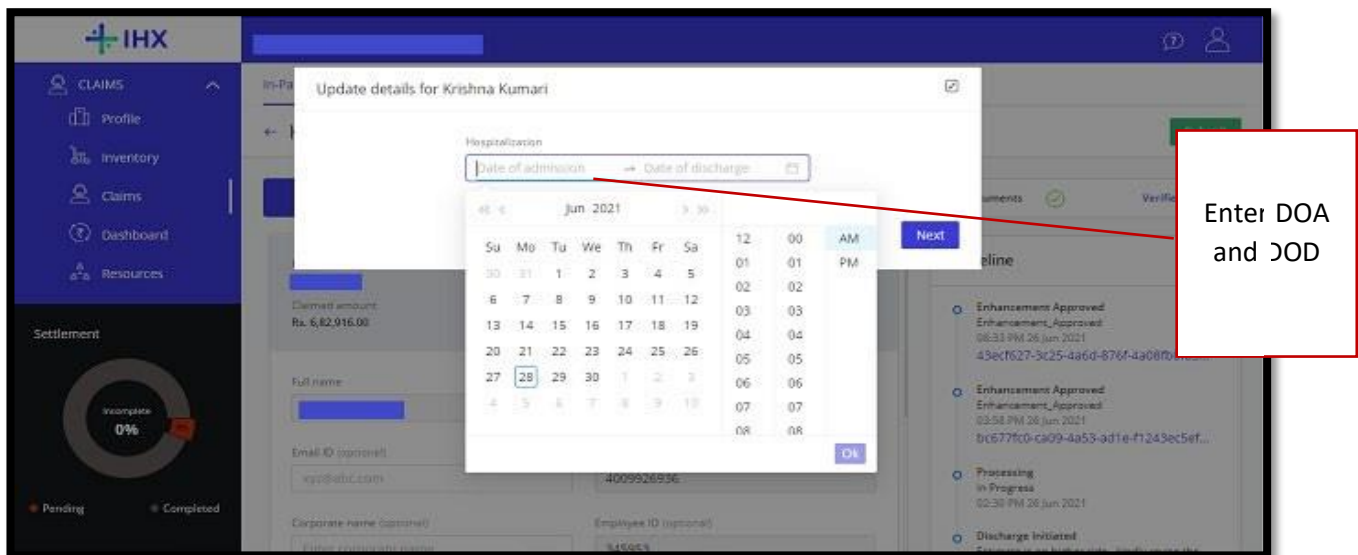
Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA @	DOD
MATPA			Rs. 42,002.00	Rs. 34,274.00	Claim Approved	22 Jun 2021	22 Jun 2021
MATPA			Rs. 4,33,193.00	Rs. 2,52,860.00	Claim Approved	9 Jun 2021	16 Jun 2021
MATPA			Rs. 1,02,862.00	Rs. 56,076.00	Pre Auth Query	20 Jun 2021	24 Jun 2021
MATPA			Rs. 58,385.00	Rs. 53,298.00	Claim In Progress	22 Jun 2021	25 Jun 2021
MATPA			Rs. 1,11,586.00	Rs. 54,123.00	Claim In Progress	24 Jun 2021	25 Jun 2021
MATPA			Rs. 45,788.00	Rs. 41,409.00	Claim In Progress	25 Jun 2021	25 Jun 2021
MATPA			Rs. 1,29,616.00	Rs. 50,000.00	Claim In Progress	23 Jun 2021	25 Jun 2021
MATPA			Rs. 59,583.00	Rs. 57,984.00	Claim In Progress	25 Jun 2021	25 Jun 2021

Step 2: Click on Initiate settlement button on top-right.



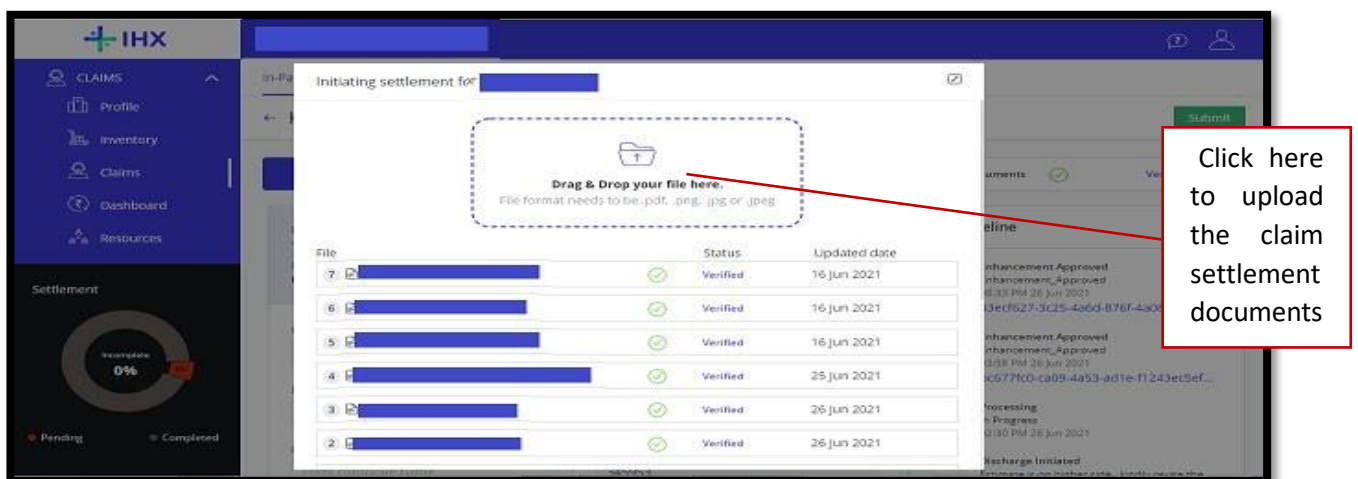
The screenshot shows the 'In-Patient Desk' for 'Krishna Kumari'. In the top right corner, there are buttons for 'Enhance', 'Cancel', and 'Initiate settlement'. The 'Initiate settlement' button is highlighted with a red box and a callout that says 'Click on Initiate settlement'. Below the buttons, there are tabs for 'Member details', 'Treatment details', and 'Bill details'. The 'Member details' tab is active, showing fields for Request ID, Date of admission, Date of discharge, Claimed amount, and Approved amount. There is also a 'Timeline' section on the right showing various status updates.

Step 3: Enter the date of admission and date of discharge.



The screenshot shows the 'Update details for Krishna Kumari' form. A date picker is open, showing the date of admission and date of discharge. The date picker has a calendar view for June 2021. A red callout box points to the date picker with the text 'Enter DOA and JOD'. The form also includes fields for Full name, Email ID, Corporate name, Mobile No., Member ID, and Employee ID.

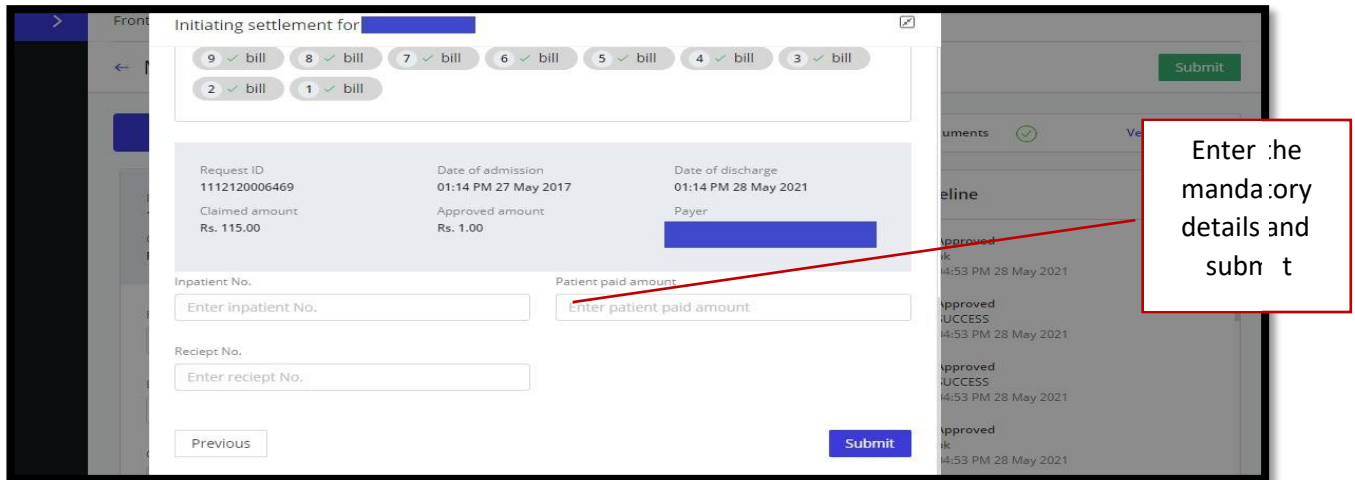
Step 4: Upload the claim settlement documents.



The screenshot shows the 'Initiating settlement for' dialog. It features a 'Drag & Drop your file here' area. Below this, there is a table listing files and their status. A red callout box points to the file upload area with the text 'Click here to upload the claim settlement documents'.

File	Status	Updated date
7 [icon]	Verified	16 Jun 2021
6 [icon]	Verified	16 Jun 2021
5 [icon]	Verified	16 Jun 2021
4 [icon]	Verified	25 Jun 2021
3 [icon]	Verified	26 Jun 2021
2 [icon]	Verified	26 Jun 2021

Step 5: Enter the mandatory details such as Inpatient No., Patient paid amount and receipt number and submit.



Initiating settlement for [Patient Name]

9 ✓ bill 8 ✓ bill 7 ✓ bill 6 ✓ bill 5 ✓ bill 4 ✓ bill 3 ✓ bill 2 ✓ bill 1 ✓ bill

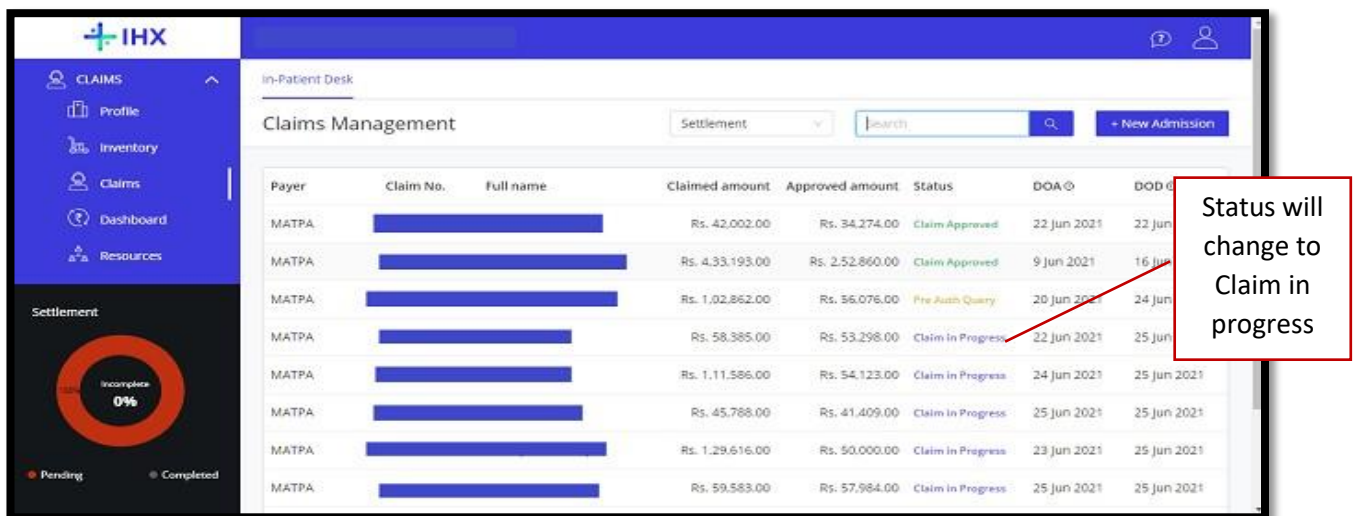
Request ID: 1112120006469
Date of admission: 01:14 PM 27 May 2017
Date of discharge: 01:14 PM 28 May 2021
Claimed amount: Rs. 115.00
Approved amount: Rs. 1.00
Payer: [Redacted]

Inpatient No.:
Patient paid amount:
Receipt No.:
Previous Submit

Enter the mandatory details and submit

Step 6: Click on Claims to check the status.

Note: The status will change to 'Claim in progress' in the claims queue.



Settlement

0% Incomplete

● Pending ● Completed

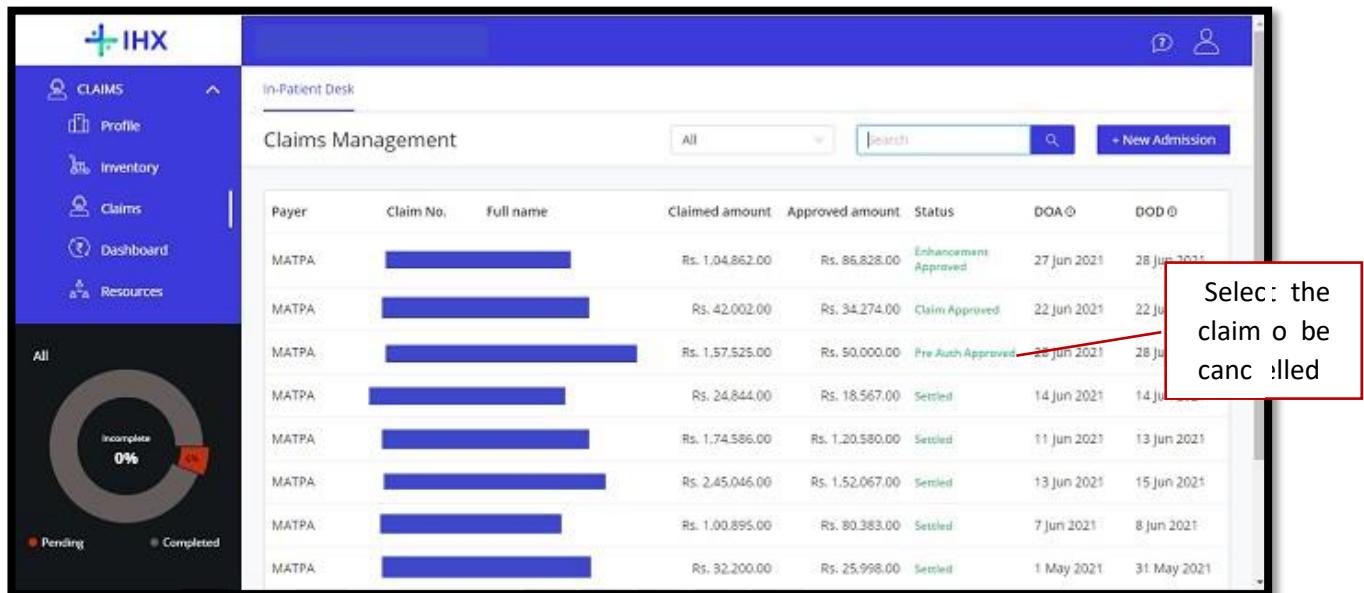
Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA	DOD
MATPA	[Redacted]	[Redacted]	Rs. 42,002.00	Rs. 34,274.00	Claim Approved	22 Jun 2021	22 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 4,33,193.00	Rs. 2,52,860.00	Claim Approved	9 Jun 2021	16 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 1,02,862.00	Rs. 56,076.00	Pending Audit Query	20 Jun 2021	24 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 58,385.00	Rs. 53,298.00	Claim In Progress	22 Jun 2021	25 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 1,11,586.00	Rs. 54,123.00	Claim In Progress	24 Jun 2021	25 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 45,768.00	Rs. 41,409.00	Claim In Progress	25 Jun 2021	25 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 1,29,616.00	Rs. 50,000.00	Claim In Progress	23 Jun 2021	25 Jun 2021
MATPA	[Redacted]	[Redacted]	Rs. 59,583.00	Rs. 57,984.00	Claim In Progress	25 Jun 2021	25 Jun 2021

Status will change to Claim in progress

3.6 CANCELLING A CLAIM

For the claims that were not utilized by the patients.

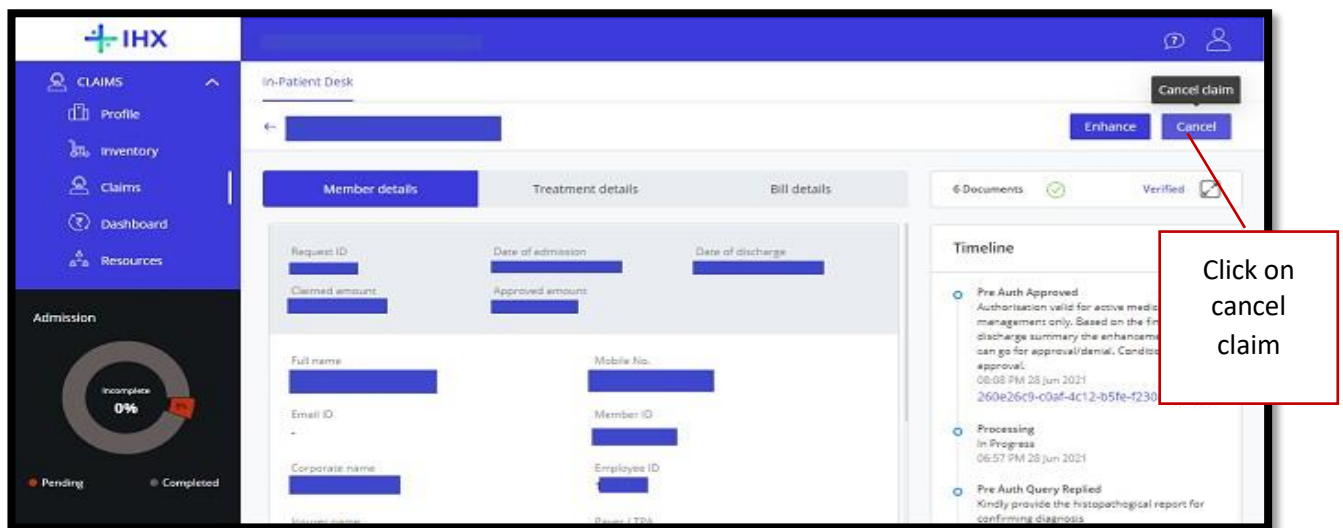
Step 1: Go to the claims queue and select a claim that was not utilized.



The screenshot shows the 'Claims Management' interface. On the left is a sidebar with navigation options: CLAIMS, Profile, Inventory, Claims, Dashboard, and Resources. Below the sidebar is a circular progress chart showing 'Incomplete 0%' with 'Pending' and 'Completed' status indicators. The main area displays a table of claims with columns: Payer, Claim No., Full name, Claimed amount, Approved amount, Status, DOA, and DOD. A red box highlights the 'Cancel' button for a claim with status 'Pre Auth Approved'.

Payer	Claim No.	Full name	Claimed amount	Approved amount	Status	DOA	DOD
MATPA	[REDACTED]	[REDACTED]	Rs. 1,04,862.00	Rs. 86,828.00	Enhancement Approved	27 Jun 2021	28 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 42,002.00	Rs. 34,274.00	Claim Approved	22 Jun 2021	22 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 1,57,525.00	Rs. 50,000.00	Pre Auth Approved	26 Jun 2021	28 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 24,844.00	Rs. 18,567.00	Settled	14 Jun 2021	14 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 1,74,586.00	Rs. 1,20,580.00	Settled	11 Jun 2021	13 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 2,45,046.00	Rs. 1,52,067.00	Settled	13 Jun 2021	15 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 1,00,895.00	Rs. 80,383.00	Settled	7 Jun 2021	8 Jun 2021
MATPA	[REDACTED]	[REDACTED]	Rs. 92,200.00	Rs. 25,998.00	Settled	1 May 2021	31 May 2021

Step 2: Click on Cancel claim.



The screenshot shows the 'Claim details' interface. It includes tabs for 'Member details', 'Treatment details', and 'Bill details'. The 'Member details' tab is active, showing fields for Request ID, Date of admission, Date of discharge, Claimed amount, Approved amount, Full name, Mobile No., Email ID, Member ID, Corporate name, and Employee ID. On the right, there is a 'Timeline' section with a list of events. A red box highlights the 'Cancel claim' button in the top right corner.

Step 3: Tick the checkbox and Submit. The claim cancellation request will be sent to the payer.

Claim cancellation

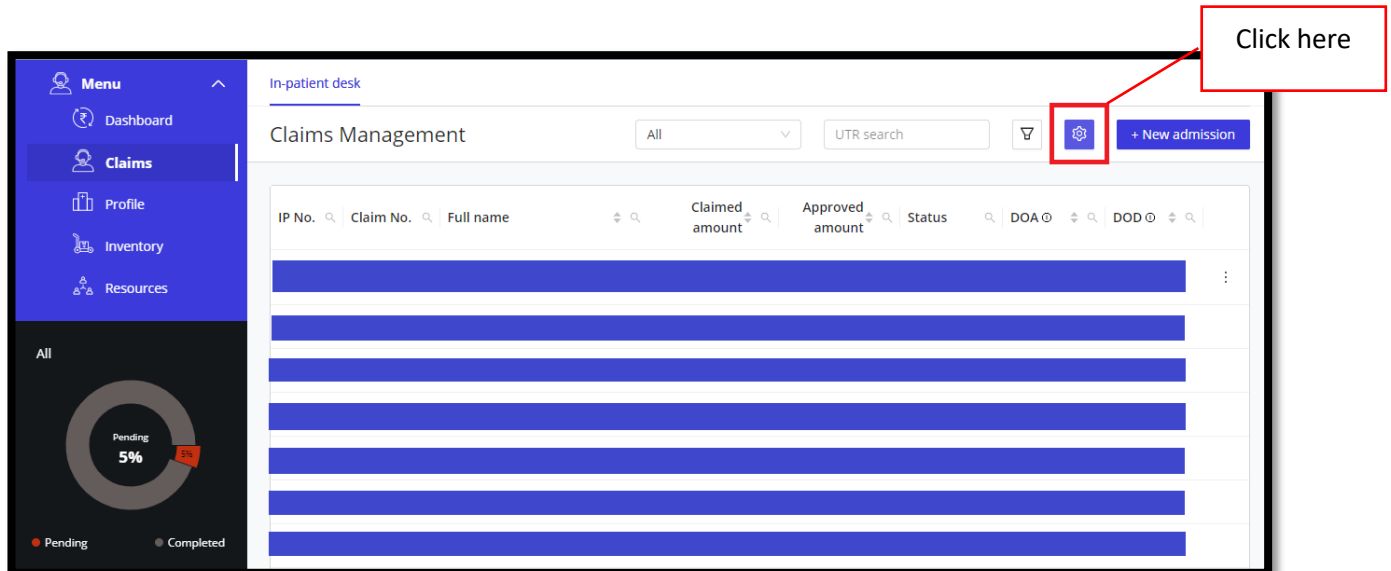
Helen Jeetha Quadros has not utilized the services and hence we are cancelling the claim from further processing.

☐ I agree that cancelled claims will be automatically cancelled on IHX and in Payers system and I will not be able to process further.

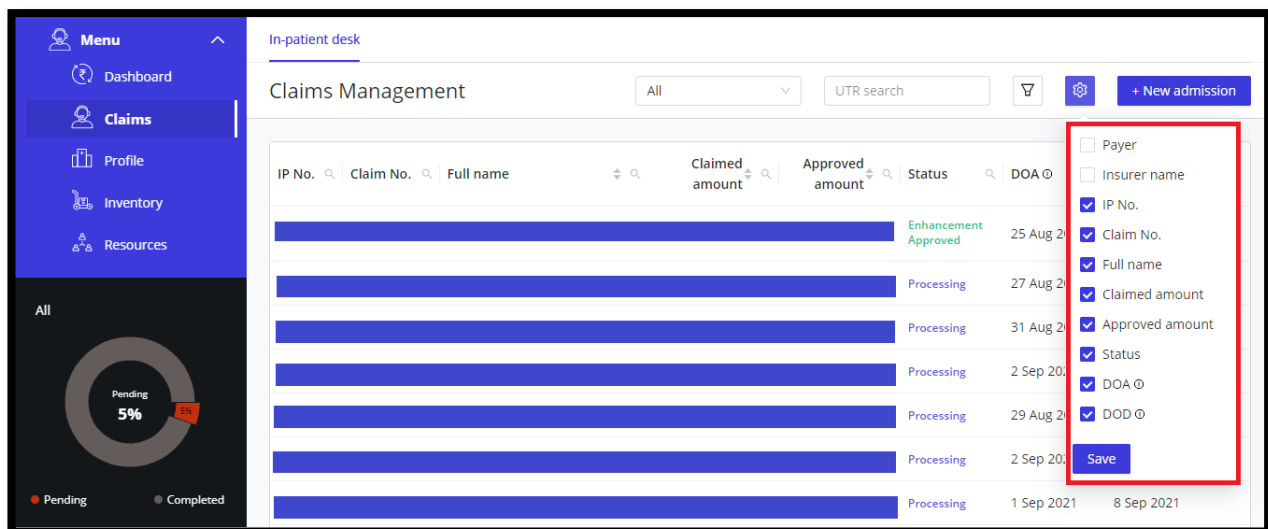
Submit

3.7 SEARCHING FOR A CLAIM

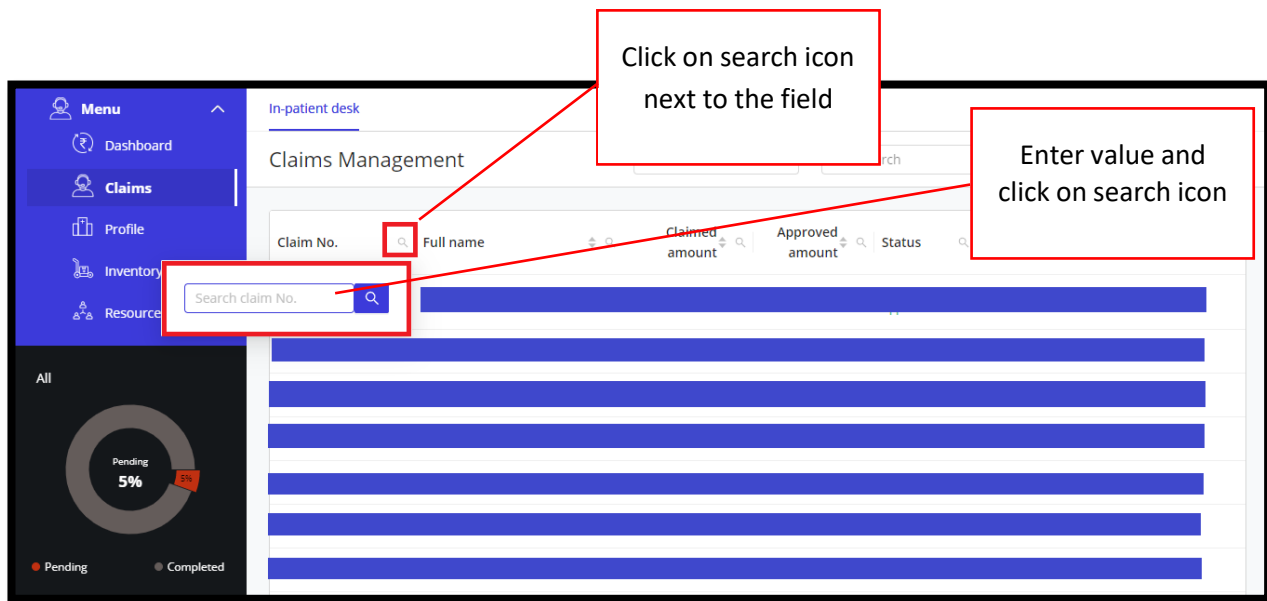
Step 1: Go to the claims management and click on the settings icon.



Step 2: Select minimum 6 and maximum 8 search criteria from the list. Please note that these fields will be visible in your claims management page as headers and you will be able to search for them.



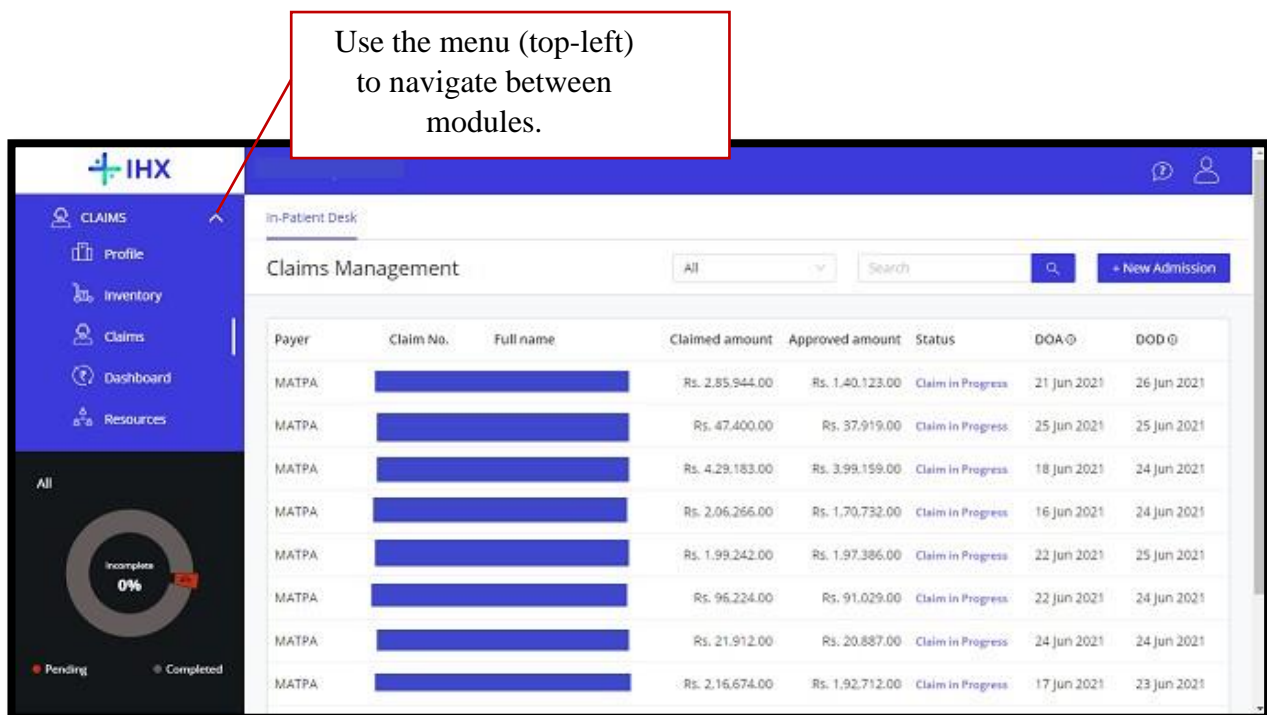
Step 3: Select and enter what you want to search for. For example, if you want to search a claim number. Click on the icon next to the claim number, enter the claim number in the box provided and search.



4. IHX Modules

IHX has 5 modules- Profile, Inventory, Claims, Dashboard and Resources.

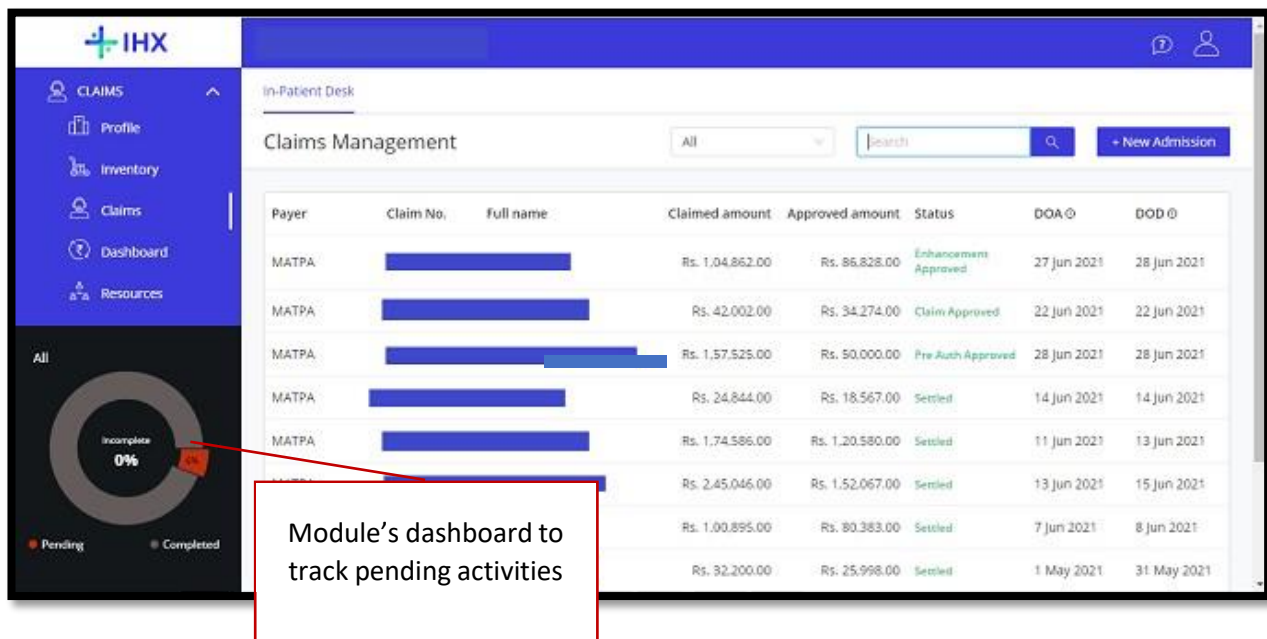
4.1. NAVIGATING MODULES



4.2 MODULE'S DASHBOARD

The dashboard on the left represents what percentage of activities is pending for each module and what percentage is completed.

In the profile module dashboard below, the hospital profile is incomplete. Pending activities (for e.g., submitting missing documents) can be checked for all the modules.

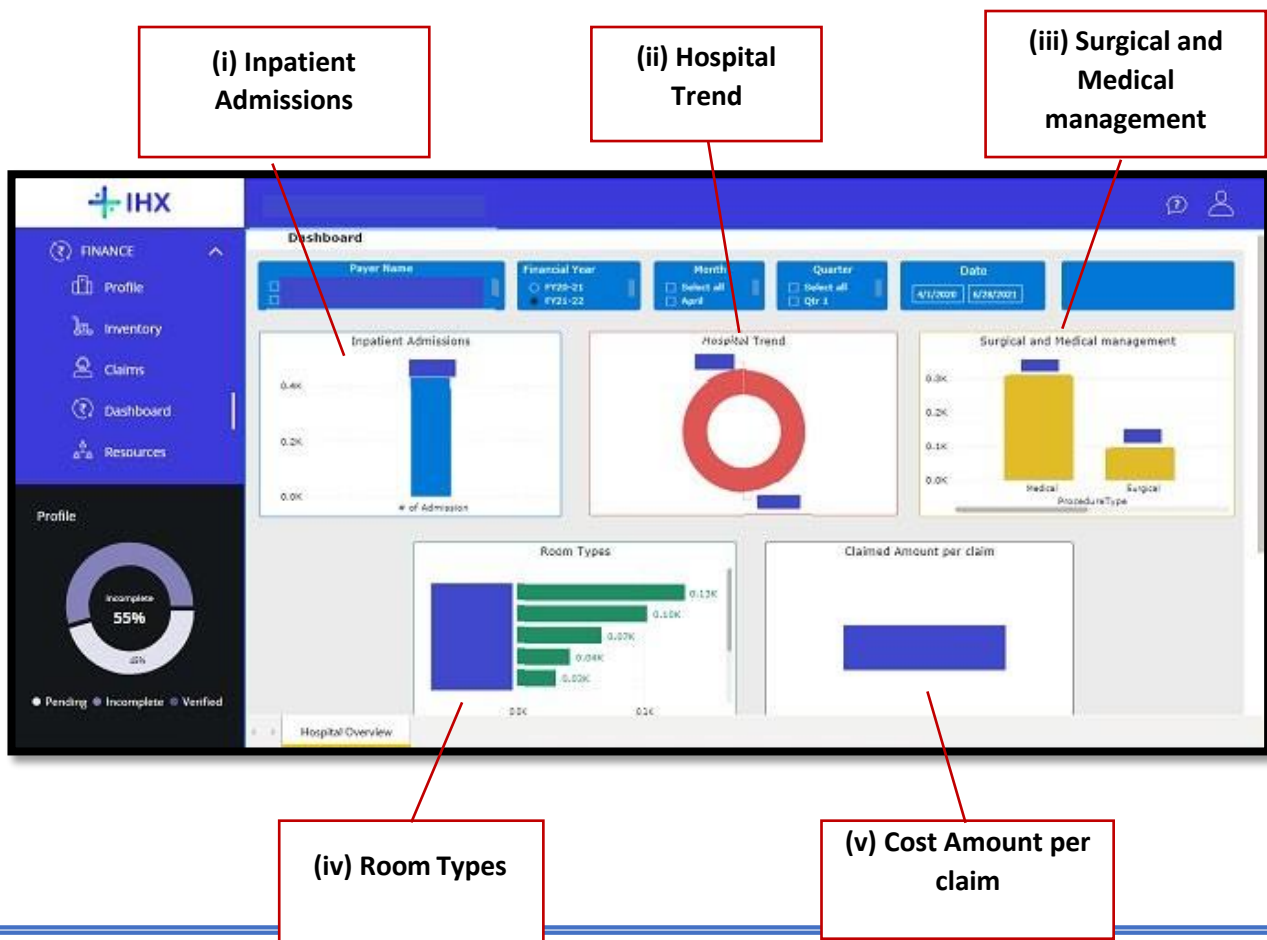


5. Finance Dashboard: Revenue cycle management

5.1 USING THE DASHBOARD

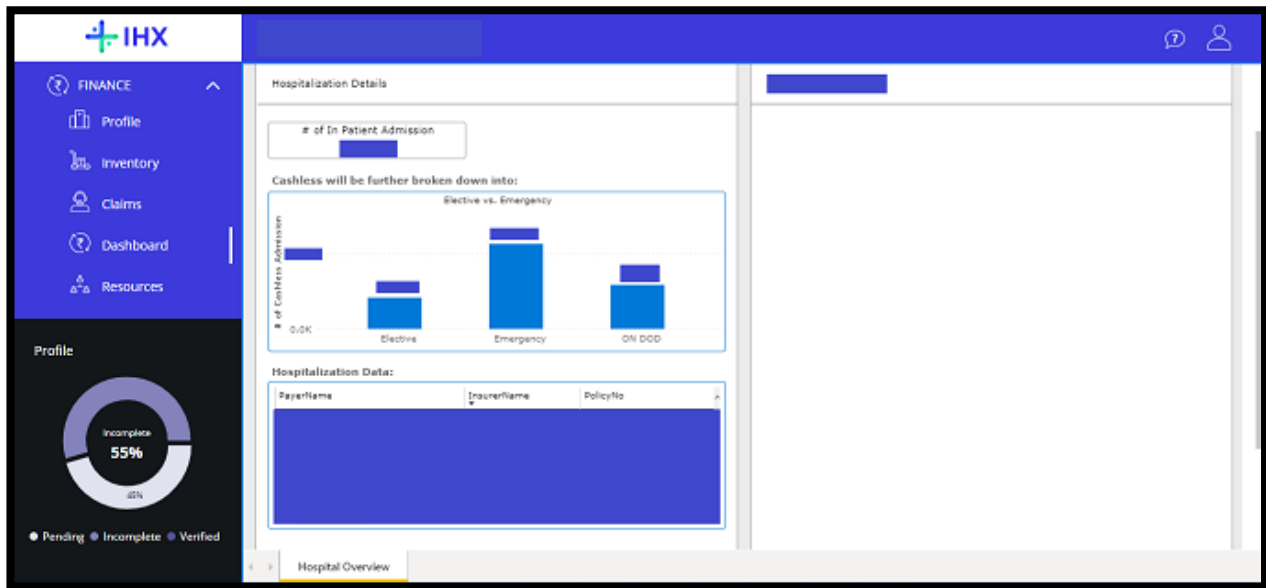
The dashboard provides an overview of the financial information at your hospital.

Filters on the top can be applied on the basis of Payer name, finance year, month, quarter and date.



(i) Inpatient Admissions

The inpatient admissions provide an insight into the hospitalization details at your hospital.



Hospitalization Details

- **Count of in-patient admissions:** A filter can be applied to view the total number of patients admitted for a selected period of time at the hospital.
- **Cashless claims at a glance:** A bar graph provides a comparison between the count of the elective and emergency cases at a hospital.
- **Settled and Outstanding reports:** The dashboard provides an option to download outstanding & settled raw data in one excel sheet which can be used for financial reconciliation.

(ii) Hospital Trend

The hospital trend is a comparison of your hospital with the other hospitals in your city.



An overall ranking by business is done on the basis of

- Number of admissions (cashless and reimbursement) as a percentage of total admissions in the city: The count provides an estimate of how much percentage of medical treatment is contributed by your hospital in the city.
- Number of admissions by Treatment: A bar graph gives a visual insight into which treatment the patients require the most at your hospital v/s the rest of the hospitals in the city.

Usage of IHX for claim submission

- Number of online pre authorisation transactions
- Number of complete documents submitted
- Number of Pending cashless submission

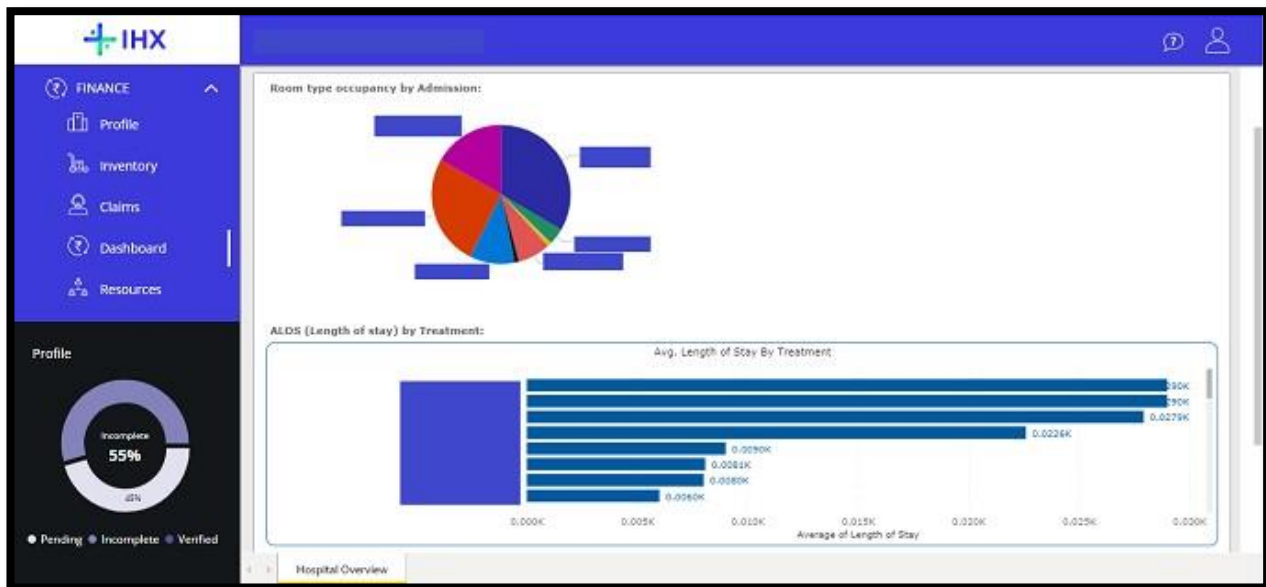
(iii) Surgical and Medical Claim Details

The bar graphs show the total surgical and medical claim details at your hospital on the basis of the treatment availed and room types occupied by the patients.



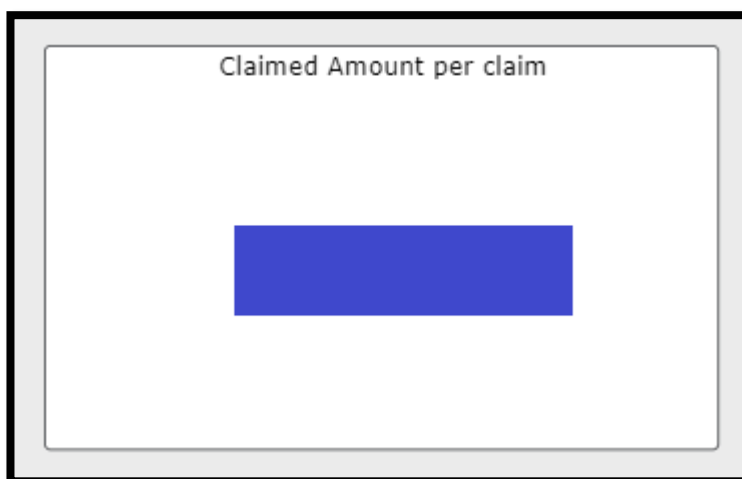
(iv) Room details

- A pie chart shows the room type occupied by patients at your hospital on the basis of the type of admission.
- A bar graph represents the average length of stay of patients at your hospital on the basis of the treatment.



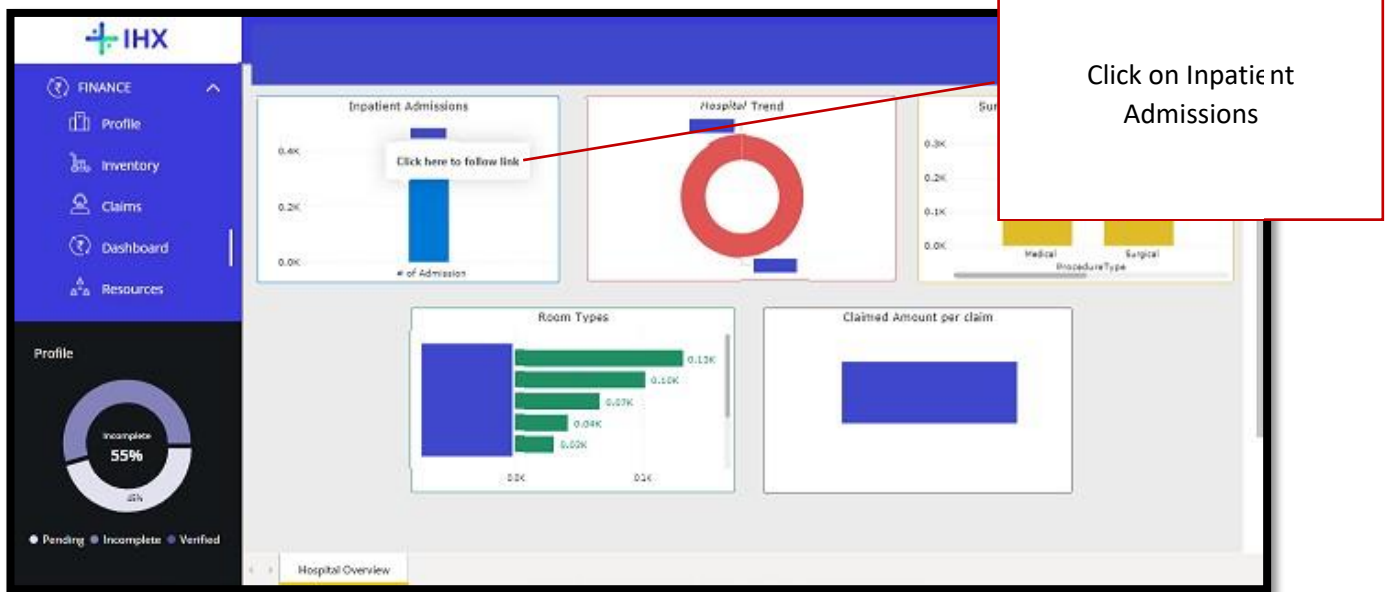
(v) Claimed amount per claim

It gives an estimate of the claimed amount per claim in your hospital.

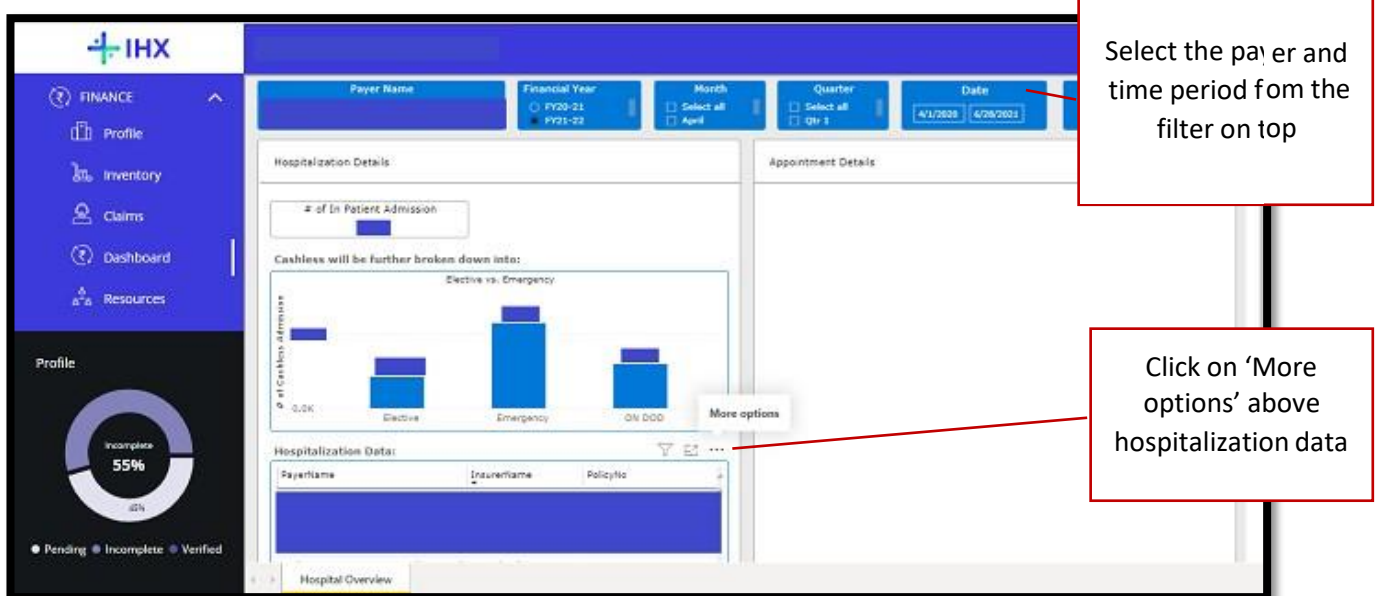


5.2 USING THE DASHBOARD FOR FINANCIAL RECONCILIATION

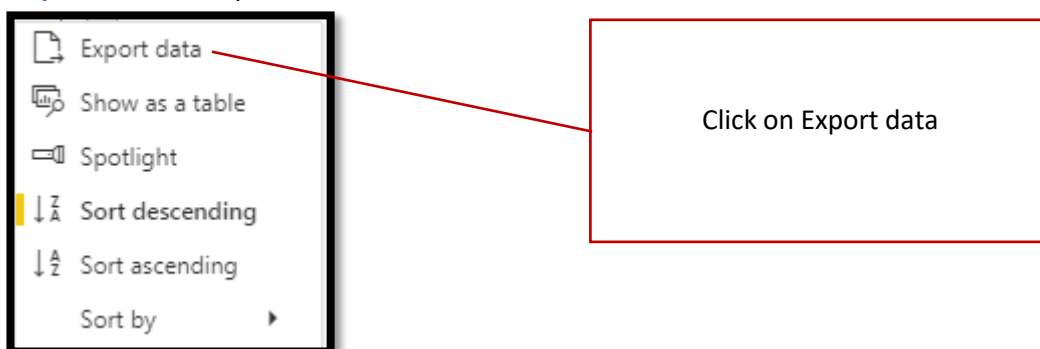
Step 1: Go to the finance dashboard and click on Inpatient Admissions.



Step 2: Apply filter on payer and time period and click on 'more options' above the hospitalization data.

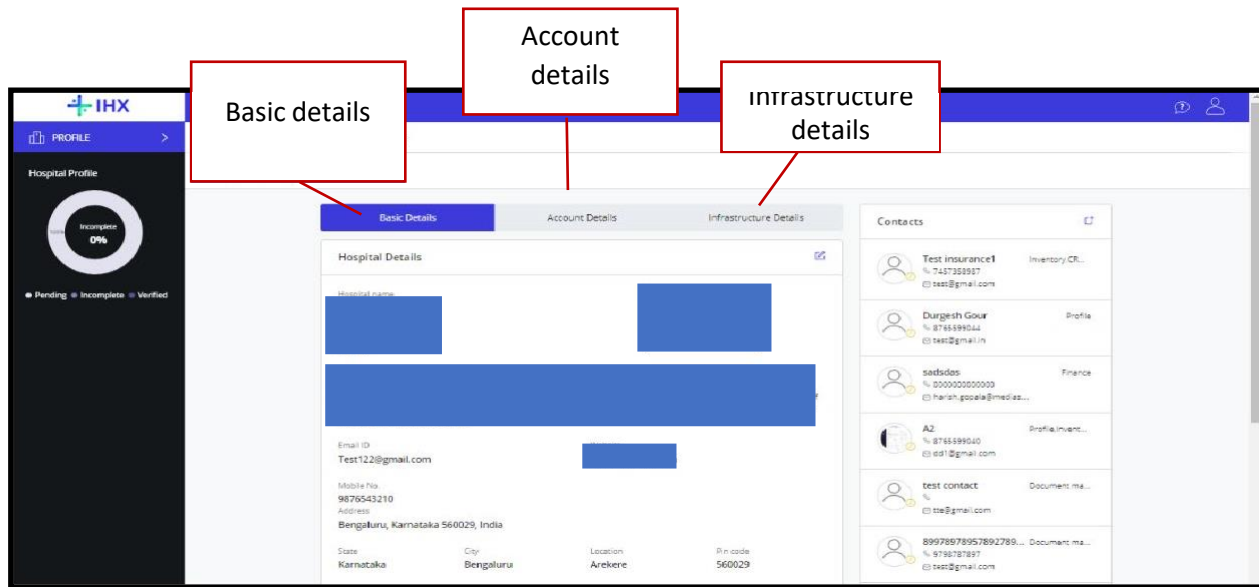


Step 3: Click on Export data



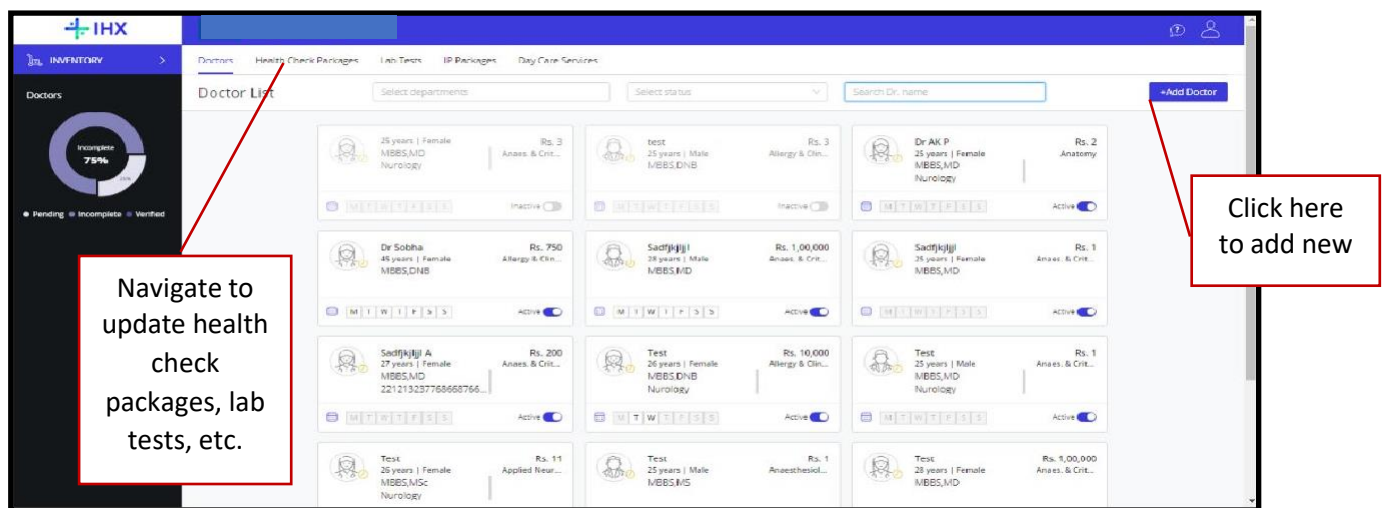
6. Profile

The profile module can be used to enter your hospital's details and facilities, contact details, manage events at the hospital, and upload documents such as tariff, certificates, etc.



7. Inventory

The inventory module helps you to manage all the services at your hospital like doctor's consultation, health check packages, lab tests, IP packages and day care services.

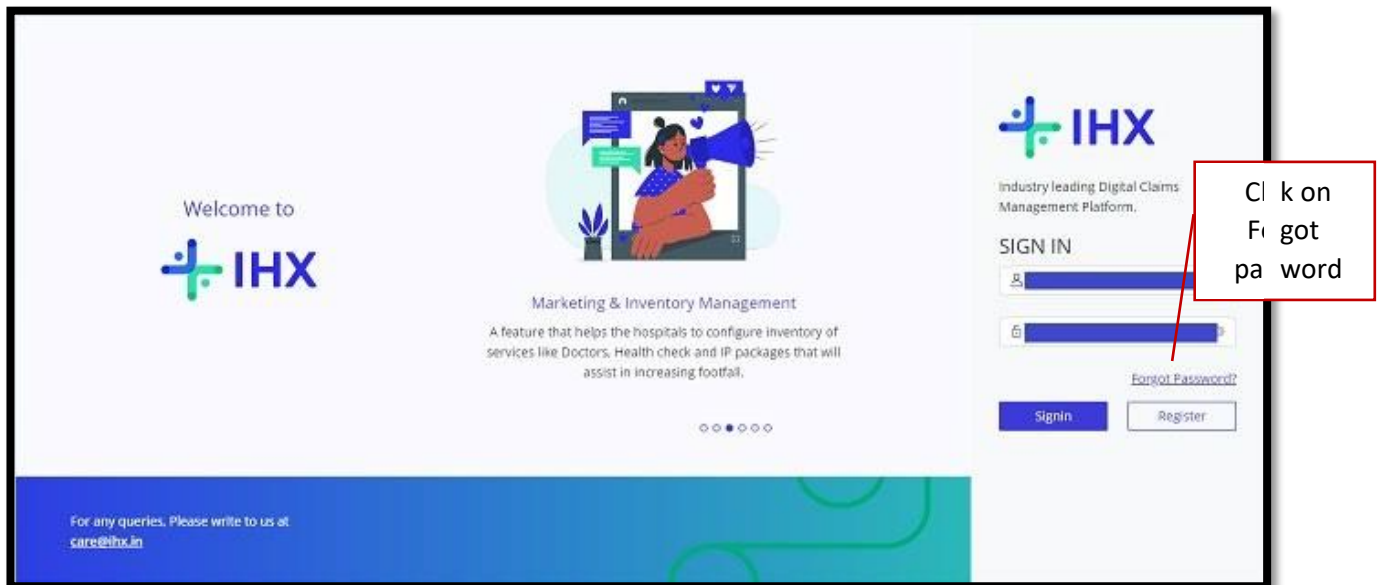


8. IHX Support (Self-help)

8.1 ACCOUNT LOCKED/ DON'T HAVE PASSWORD/ WRONG PASSWORD?

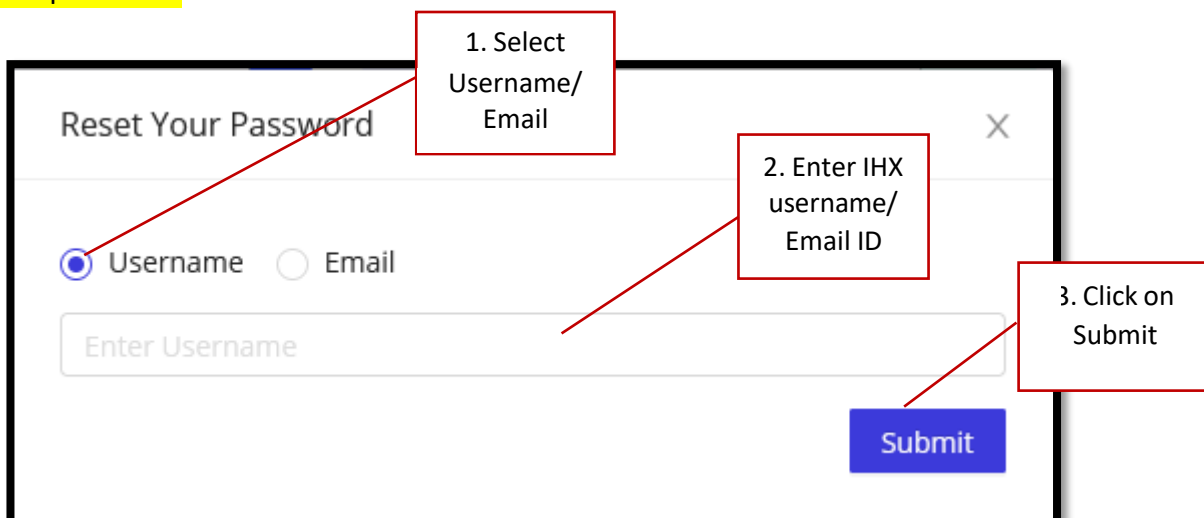
If you have IHX login credentials but are not able to login using your password.

Step 1: Open www.provider.ihx.in on your browser and click on Forgot Password.



Step 2: Select and enter your IHX username or registered email ID.

Note: The password reset link will be sent to the registered email ID. The link can be used to reset the password.

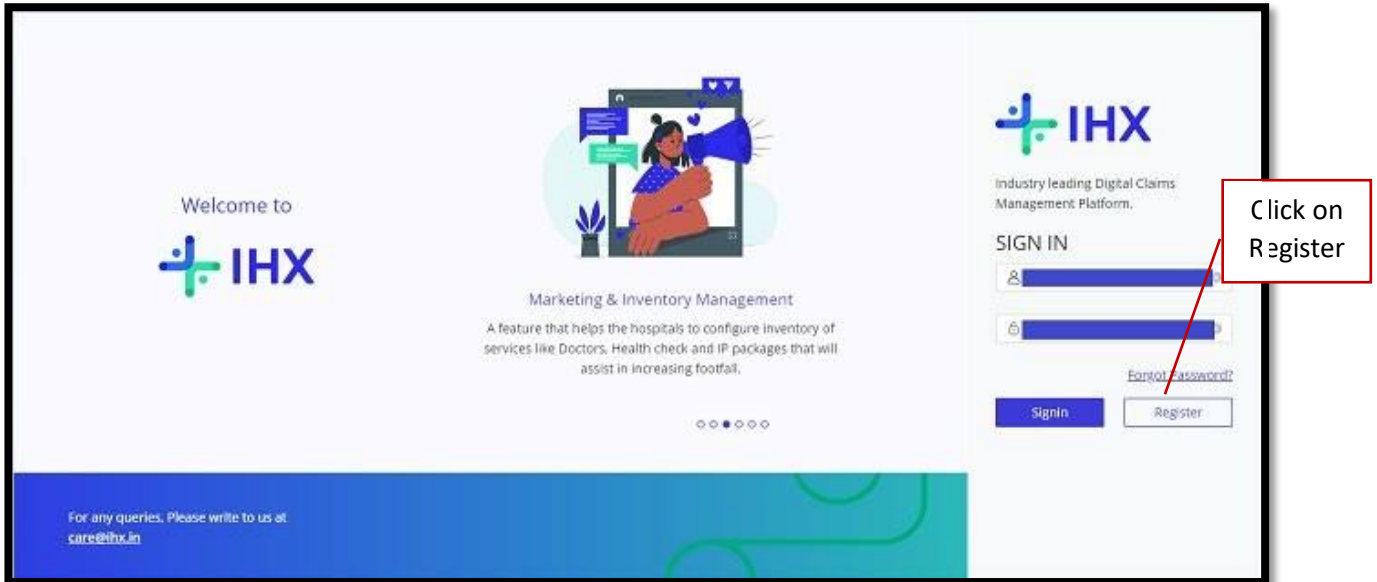


8.2 DON'T REMEMBER YOUR IHX USERNAME?

Send us an email on care@ihx.in with your hospital payer ID. Our team will be happy to help.

8.3 NOT ON IHX YET? GET REGISTERED!

Step 1: Open www.provider.ihx.in on your browser and click on Register.



Welcome to
IHX

Marketing & Inventory Management
A feature that helps the hospitals to configure inventory of services like Doctors, Health check and IP packages that will assist in increasing footfall.

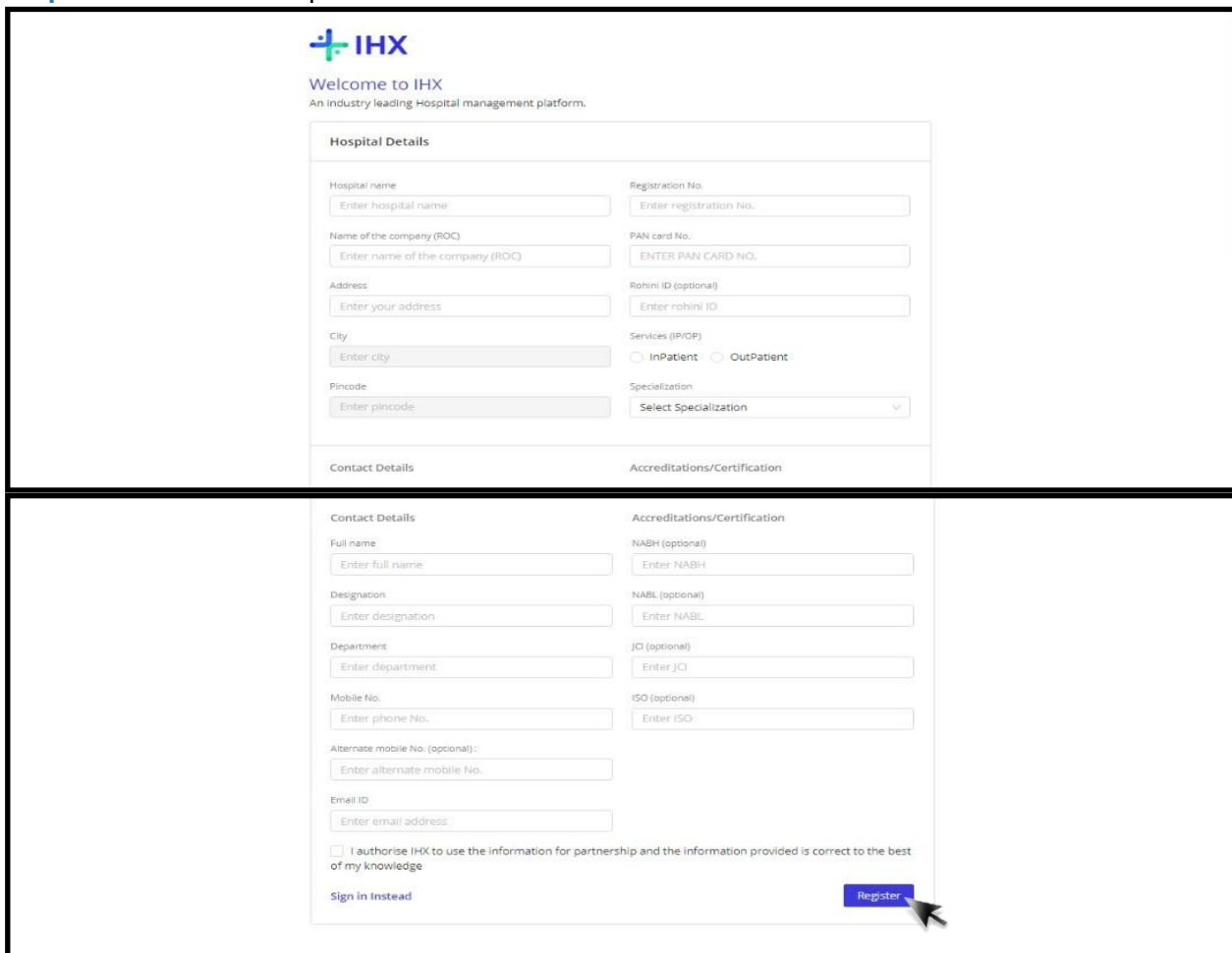
Industry leading Digital Claims Management Platform.

SIGN IN

[Forgot Password?](#)

For any queries, Please write to us at care@ihx.in

Step 2: Fill in all the hospital details and submit.



Welcome to IHX
An industry leading Hospital management platform.

Hospital Details

Hospital name

Registration No.

Name of the company (ROC)

PAN card No.

Address

Rohini ID (optional)

City

Services (IP/IP)
☐ InPatient ☐ OutPatient

Pincode

Specialization

Contact Details

Full name

Designation

Department

Mobile No.

Alternate mobile No. (optional):

Email ID

☐ I authorise IHX to use the information for partnership and the information provided is correct to the best of my knowledge

Accreditations/Certification

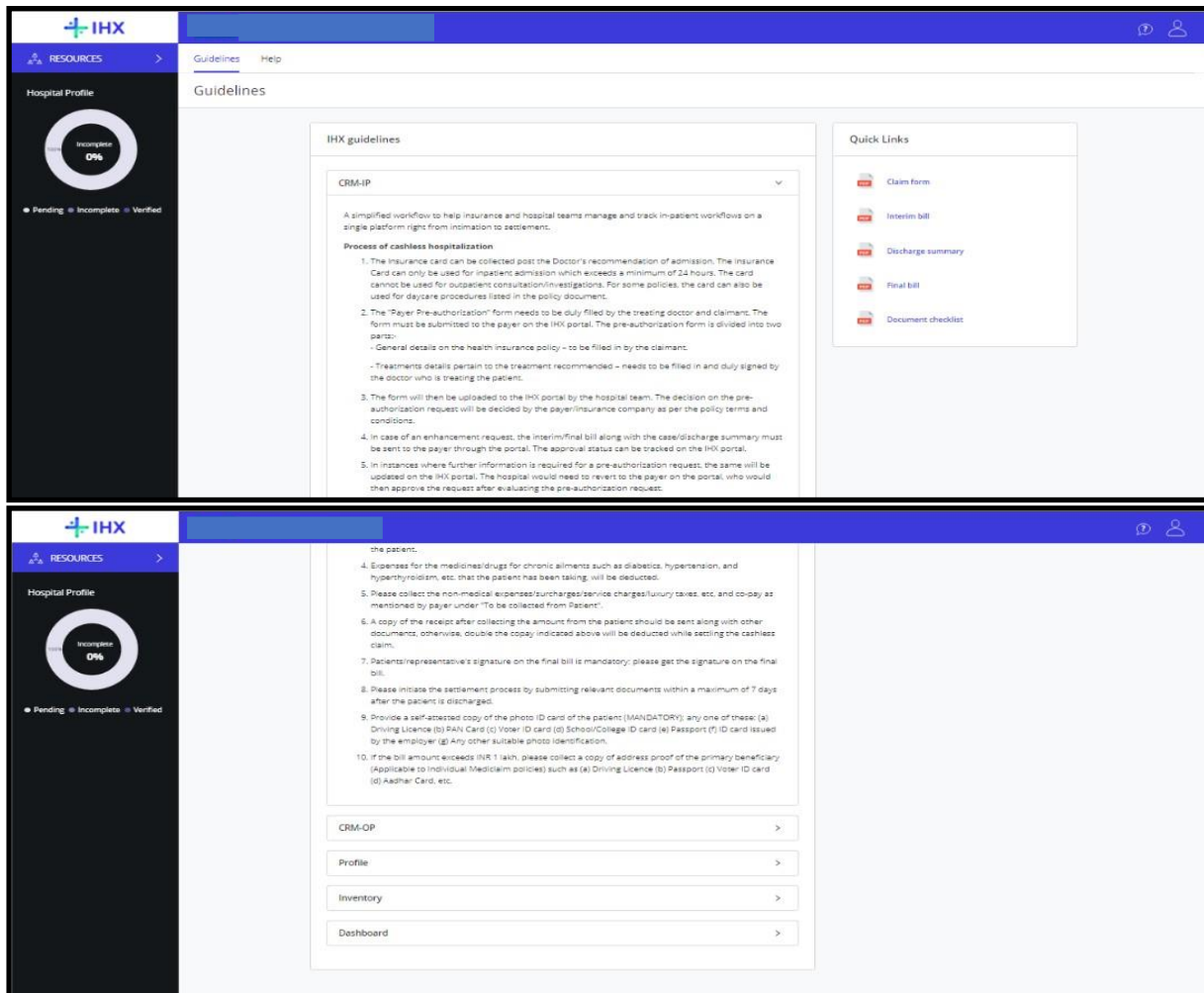
NABH (optional)

NABL (optional)

JCI (optional)

ISO (optional)

9. Guidelines



a) CRM-IP

A simplified workflow to help insurance and hospital teams manage and track in-patient workflows on a single platform right from intimation to settlement.

Process of cashless hospitalization

1. The Insurance card can be collected post the Doctor's recommendation of admission. The Insurance Card can only be used for inpatient admission which exceeds a minimum of 24 hours. The card cannot be used for outpatient consultation/investigations. For some policies, the card can also be used for daycare procedures listed in the policy document.

2. The "Payer Pre-authorization" form needs to be duly filled by the treating doctor and claimant. The form must be submitted to the payer on the IHX portal. The pre-authorization form is divided into two parts:-
3. - General details on the health insurance policy – to be filled in by the claimant.
4. - Treatments details pertain to the treatment recommended – needs to be filled in and duly signed by the doctor who is treating the patient.
5. The form will then be uploaded to the IHX portal by the hospital team. The decision on the pre-authorization request will be decided by the payer/insurance company as per the policy terms and conditions.
6. In case of an enhancement request, the interim/final bill along with the case/discharge summary must be sent to the payer through the portal. The approval status can be tracked on the IHX portal.
7. In instances where further information is required for a pre-authorization request, the same will be updated on the IHX portal. The hospital would need to revert to the payer on the portal, who would then approve the request after evaluating the pre-authorization request.

Note:

1. Payer/Insurer will not be liable for payment in case it is found that the material facts were suppressed/misrepresented/not disclosed.
2. Authorization is valid for the proposed line of treatment. Any change in the line of treatment must be informed immediately, failing which the authorization will stand cancelled.
3. Expenses for irrelevant investigations/diagnostic tests will be deducted. Please collect the same from the patient.
4. Expenses for the medicines/drugs for chronic ailments such as diabetics, hypertension, and hyperthyroidism, etc. that the patient has been taking, will be deducted.
5. Please collect the non-medical expenses/surcharges/service charges/luxury taxes, etc, and co-pay as mentioned by payer under "To be collected from Patient".
6. A copy of the receipt after collecting the amount from the patient should be sent along with other documents, otherwise, double the copay indicated above will be deducted while settling the cashless claim.
7. A Patient's/representative's signature on the final bill is mandatory; please get the signature on the final bill.
8. Please initiate the settlement process by submitting relevant documents within a maximum of 7 days after the patient is discharged.
9. Provide a self-attested copy of the photo ID card of the patient (MANDATORY); any one of these: (a) Driving Licence (b) PAN Card (c) Voter ID card (d) School/College ID card (e) Passport (f) ID card issued by the employer (g) Any other suitable photo identification.
10. If the bill amount exceeds INR 1 lakh, please collect a copy of address proof of the primary beneficiary (Applicable to Individual Medclaim policies) such as (a) Driving Licence (b) Passport (c) Voter ID card (d) Aadhar Card, etc.

a) CRM-OP

A seamless appointment management feature that allows front desk personnel to approve/reschedule appointment requests, upload and manage invoices for settlements with payers.

Appointment management process:

All the appointments booked at your center will be visible on the IHX platform to be actioned. The front desk team will have an option to schedule appointments or reschedule/cancel if service is not available for the preferred time.

The front-desk team can also view scheduled appointments and filter by today's appointments to plan the resource and time. Once the member has availed of the service, the front desk team will pass the message to the IHX team that the member has availed of the service. If the member does not show for the appointment, inform the IHX team on the portal so that the appointment can be rescheduled to a time convenient for the member. Once the service is completed and invoice and reports are generated, please initiate settlement by uploading the invoice and medical reports on the IHX portal.

You will be able to see the settlement status directly on the portal. Once the settlement process is completed, you will be able to download a settlement copy or search for transactions using UTR details.

Profile:

A provision for the marketing team at a hospital to showcase their inventory to the end customer.

Basic Profile:

This section displays information about your medical facilities. Members see this information when they want to know more about your hospital. Complete the profile information of your hospital by updating the display name and highlighting the USP of your hospital along with geo-coordinates of your center, This will help members to reach your center without any difficulty.

Upload empanelment documents and check the status of document verification directly on the IHX portal. Use calendars to manage your health camp days or to manage holidays. The calendar is a planning module that helps teams to manage their activities and keep track of the to-do lists.

Contract:

Add a Hospital team who will get access to the IHX portal. IHX portal access is role-based, So you will be able to choose which modules the team will get access to.

If any team member leaves the organization, it is Admin's responsibility to remove access to the IHX portal.

Account details:

Add/update the center's registration details which will be used to empanel your center to IHX and other payers. Add/update account details for the payment process to complete.

Infrastructure details:

Add/update infrastructure details of your center like images, facilities, and room details. This information is helpful for empanelment to IHX and other payers, for IHX members, and your CRM team during the claim's transaction.

Note: Please upload images of 650px height and 350px height for best images clarity.

Inventory:

A feature that helps the hospitals to configure inventory of services like Doctors, Health check, IP packages, and daycare services that will assist in increasing footfall.

Doctors:

Configuring Doctors on the IHX platform helps the listing to be available to all IHX partner members to schedule appointments, and also in CRM for raising a hospitalization request. Configured Doctor name and registration no are available as a drop-down, which helps in faster processing of a claim request.

Configuring a Doctor:

1. Add personal details like name, age, gender, and the doctor's picture.
2. Add professional details like Doctor registration no, qualification, and experience
3. Add Consultation details like type, Consultation fees, and any fee waiver days (if applicable)
4. Add Doctors schedule for the entire week, (Note: please update schedule if there is any change)
5. Submit - The submitted information will automatically be available in the CRM module and sent to the IHX team for verification.
6. You can see the verification status directly on the IHX portal.

Health-check packages:

Configure all your hospital Health Check packages on the IHX portal, this service offering will be made available to all IHX partners/payers to schedule an appointment at your centre.

If you do not have any Health check packages available at your hospital, you can build a new health check package on the portal or write to care@ihx.in to help you build packages based on highly booked health check packages in your area.

Configuring a health check packages:

- Add a Package name
- Enter details applicable to members like gender, age bracket.
- Add a brief description of the health check package
- Add tests by departments and consultations by departments.
- Review the pre-loaded instructions on the right and add/modify the instructions list if required.
- Submit - The submitted information will automatically be sent to the IHX team for verification.
- You can see the verification status directly on the IHX portal.

IP packages:

Configure hospitalization packages by various room types to ease the operations. If you do not have any IP packages available at your hospital, you can build a new IP package on the portal or write to care@ihx.in to help you build the right IP packages based on facilities available in your centre.

Configuring IP packages:

- Select a department and the procedure to be packaged.
- Add a brief description of the procedure
- Select inclusions that are covered as part of the package.
- Select Length of Stay
- Add package price and discount by room types.
- Submit - The submitted information will automatically be sent to the IHX team for verification.
- You can see the verification status directly on the IHX portal.

Day-care Services:

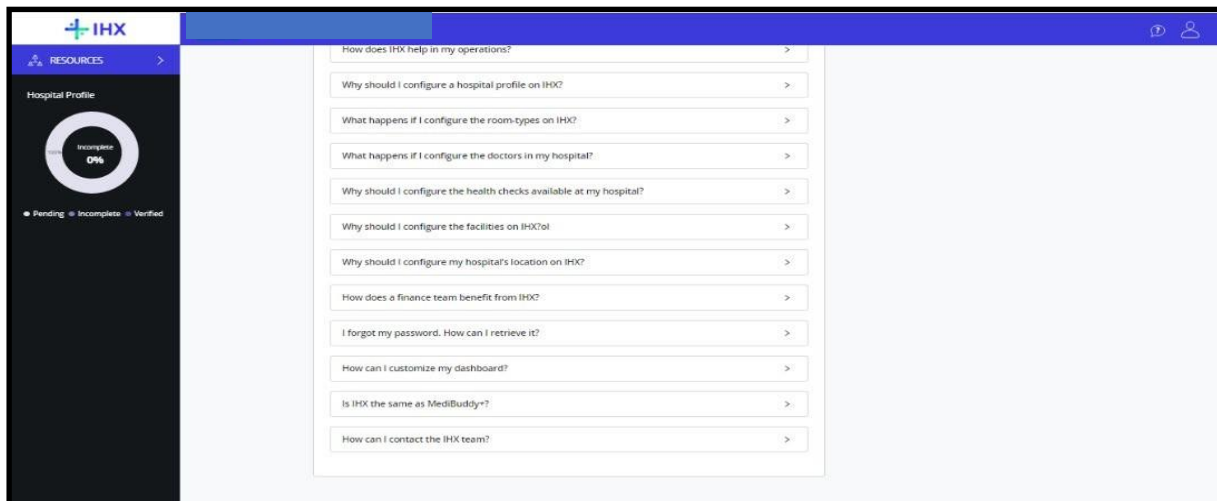
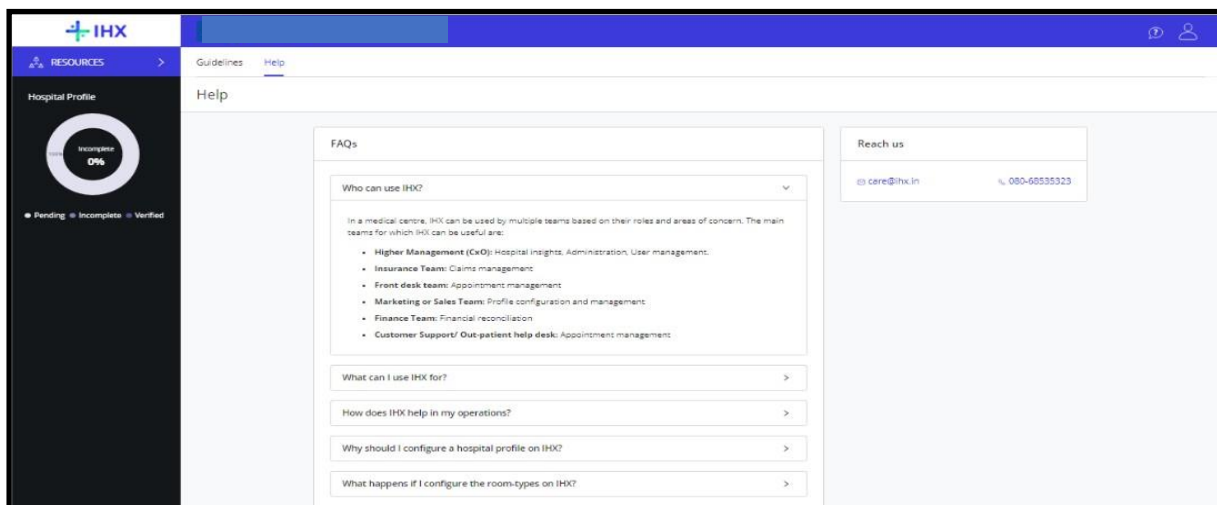
- Select a department and the procedure to be packaged.
- Add a brief description of the procedure
- Select inclusions that are covered as part of the package.
- Add package price and discount.
- Add multiple sessions (If applicable)
- Submit - The submitted information will automatically be sent to the IHX team for verification.
- You can see the verification status directly on the IHX portal.

Dashboard

A solution that enables finance teams to view and download settlement and outstanding balances of Out-patient and In-patient services.

- Hospital Business snapshot: Access a complete business snapshot both In-Patient and Out-Patient business across all Payers / partners.
- Compare your center business with others in the city, by department, by procedures.
- IHX adoption rate across various functionalities
- Room occupancy rate
- Cost per claim by departments, by procedures.

10. Help



Who can use IHX?

In a medical centre, IHX can be used by multiple teams based on their roles and areas of concern. The main teams for which IHX can be useful are:

- **Higher Management (CxO):** Hospital insights, Administration, User management.
- **Insurance Team:** Claims management
- **Front desk team:** Appointment management
- **Marketing or Sales Team:** Profile configuration and management
- **Finance Team:** Financial reconciliation
- **Customer Support/ Out-patient help desk:** Appointment management

What can I use IHX for?

- a. Claims management
- b. Profile configuration and management
- c. Financial reconciliation
- d. Appointment management

How does IHX help in my operations?

- a. Insurance team can login to IHX to submit and manage all insurance claims in a single platform and get a real time update on all the claims status.
- b. Front desk team will get all appointment details in a single window, help them plan the resources for upcoming days and also see daily appointments for fulfillments.
- c. The healthcare market in India has potential customers who look for their preferred healthcare service. Profile configuration is a feature on IHX that helps you to make sure that your medical centre appears in their search results.
- d. You can upload your doctors, room types, health checks and hospital facilities and images on IHX. A detailed profile page can help you showcase everything that a potential customer would want to know before they make their final choice.
- e. The customer will be able to view the facilities, doctors, health checks and room types available at your hospital and they will be able to book doctor appointments and health checks online and also select the preferred room types at your medical centre.
- f. Profile configuration will increase the medical centre visibility and thus increase the foot falls.

What happens if I configure the room-types on IHX?

- a. You can upload pictures of the types of rooms available along with images and tariffs on IHX.
- b. This will help the customers to select their preferred room type for any planned admission.
- c. The room-types will also come as a drop-down menu while filling the New Admission form and save your time.

What happens if I configure the doctors in my hospital?

- a. You can provide the details about your specialists and schedule appointments based on their timings and availability.
- b. Showcasing your team of doctors will help patients schedule appointments with ease.
- c. This will in-turn result in the increase of the foot-falls at your medical centre.
- d. The doctor's names list will also come as a drop-down menu in the New Admission form, which will help you save time.

Why should I configure the health checks available at my hospital?

- a. You can create a catalogue of health check packages including tests; tariffs etc. on IHX and schedule the same as per slot availability.
- b. You can also confirm appointments made by your customers on IHX.

Why should I configure the facilities on IHX?

- a. You should configure the facilities on IHX to showcase your hospital's best-in-class medical and general facilities to the customers.
- b. If the customer's preferred amenity will be present at your medical centre, then they will definitely select you over the other choices.

Why should I configure my hospital's location on IHX?

Update your location on the map so that:

- a. You can make your healthcare centre visible during map searches.
- b. Customers can find you easily through a quick network hospital search.
- c. Customers can find you with just a click on their smartphone.

How does a finance team benefit from IHX?

- a. Team can view consolidated outstanding and settled status on the platform for a given period.
- b. Finance team can download real time outstanding and settled data from IHX for reconciliation activities.

I forgot my password. How can I retrieve it?

You can retrieve your password by following the steps below:

- a. Open IHX
- b. Click on Forgot password
- c. In the pop-up box, enter your username/ registered email ID
- d. Then click on Reset Password
- e. You will receive a mail with the link to reset the password on your registered email ID
- f. Please click on the link in that mail and enter the password you want to keep

How can I customize my dashboard?

- a. You can customize your dashboard to view real-time claims summary, the way you see fit.
- b. Go to Dashboard → Click on the settings icon at the top right corner → Tick the headers that you want to keep → Click on save

Is IHX the same as MediBuddy+?

- a. MediBuddy+ was a platform developed for hospitals to manage claims of Medi Assist alone, whereas IHX is a one stop solution to assist hospitals to connect to other players in the ecosystem.

How can I contact the IHX team?

- a. Please write to care@ihx.in, the team will get back to you at the earliest.