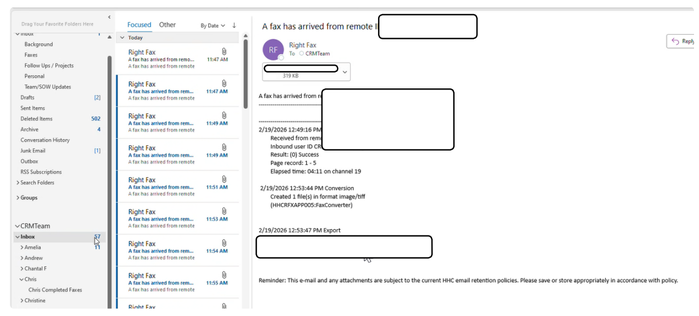
Process 1 - Outlook document import/transfer

Will need assignment/movement to a main "Bot" folder. If the bot can resolve it, no one sees it. If the bot cant resolve, it escalates/transfers it in a folder for human resolution. Need to avoid human/bot overlap



Outlook → Go to CRM folder → Move from CRM folder to user folder → open attachment → Is image "Oriented" ? (No → rotate) → Yes → Is image "Readable" (No → Transfer to "human" inbox) → Yes → Begin OCR extraction → document type

Are there any documents scanned in that are grainy/spotty? Can be read with eyes, but OCR/AI will be unable to determine correct characters

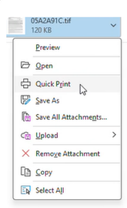
OCR notes:
Process improvement needed to determine what payers can obtain auth details/appeal details from electronic source. If possible, then send indication to turn off paper process and exclude from OCR.

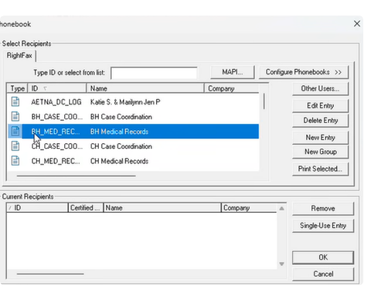
1. Regardless of the type of document (denial/etc) we need to be able to match it up to the encounter; need to be positive about the correct HAR. If not positive, escalation to human inbox.
   a. Hospital account lookup in epic, if they provide an invoice, we can search by invoice and it will bring us directly to correct HAR.
   b. Automation gained efficiency will be to leverage clarity/SQL. We will need real time query to return applicable HAR.
2. Across any document type we want the following:
   a. Member/Demographic details
   b. Claim/invoice details
      i. Case or proprietary tracking numbers
   c. Date range of service
   d. Reason for letter/correspondence
   e. Department/Location

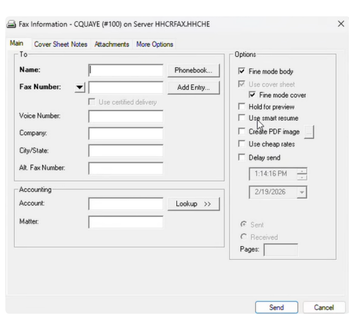
   Examples to the right:
   * Example 1 Denial - once assigned/imported. Billing indicator needed to route. Can leverage notes file for automation optimization
   * Example 2 Approval - we will update the record in epic with the approval/auth details after assignment to the chart (qty/auth status/etc)
   * Example 3 Approval and denial - approved some days, denied others. We update the approval details and then come back and import/do the same process as a denial.
   * Example 4 - route elsewhere. Says inpatient (which is normally routed to us) but its for a behavorial health. When we see beavhorial health we route ^^ We will need a crosswalk of what department to send where. ANYTHING OUTPATIENT RELATED/Behavioral --> Med records | Short term rehab, ambulance transfer --> case management | Upcoming visit/stays --> financial clearance

document type → OP - Behavioral → Med Records; Rehab - Ambulance → Case Mgmt; Upcoming Visits → Financial Clearance; Partial Approval; Denials - Rejections - upheld; Auth Approved

Med Records, Case Mgmt, Financial Clearance → Quick print

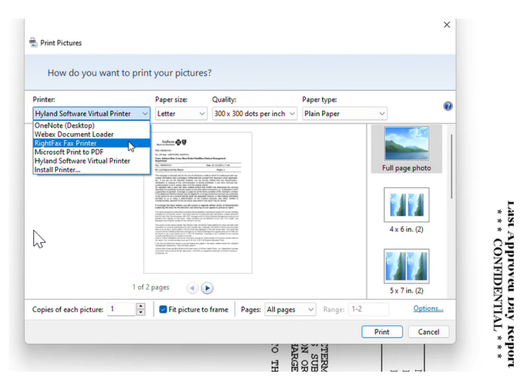






Quick print → Right fax printer → choose right location by phonebook → Hit Send → Next email in CRM folder? (Yes → Go back to inbox and repeat process; No → Send email of automation output to ops → Process 1 completed)

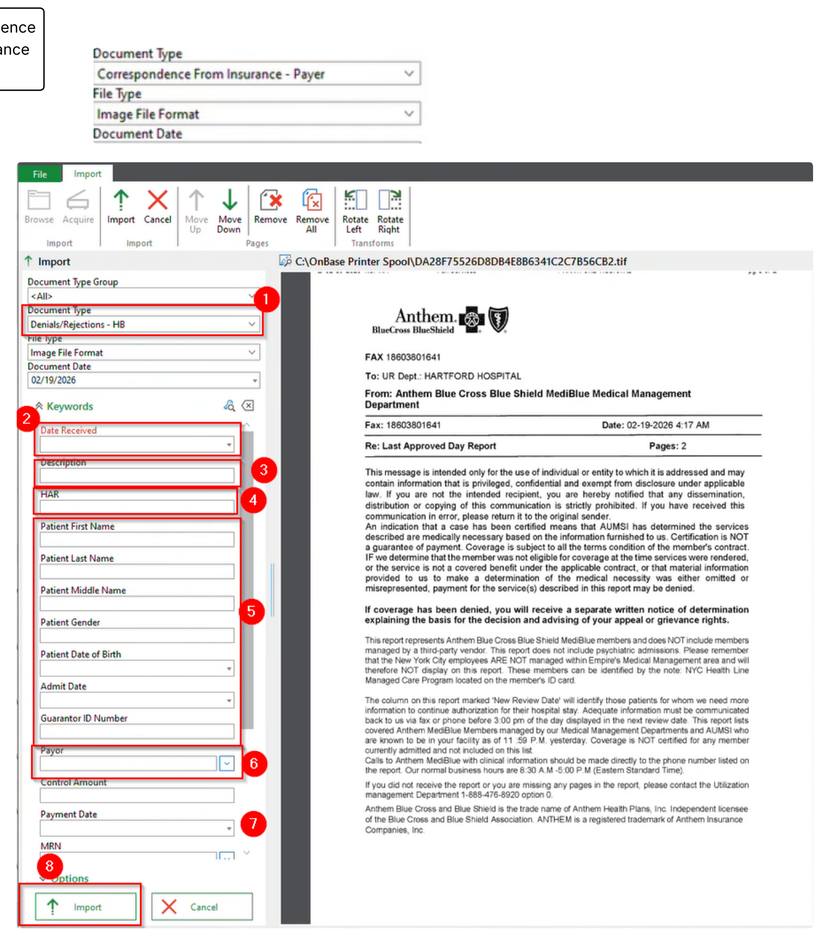
Quick print → Hyland software → Click Print → Doc type? (Denial/Rejections - HB; Correspondence from insurance payor) → Add document type (1) → Date received (2) → Description (3) → HAR (4) → Payor (6) → HHC Location (7) → Click Import (8) → Next email in CRM folder? (Yes → Go back to inbox and repeat process; No → Send email of automation output to ops → Process 1 completed)



* * * CONFIDENTIAL * * *
LEGALLY PROTECTED REPORT

Need the har from external source - auto populates demographic details (5). Is it possible that HAR does not result in auto population?

Location not needed for denial

might be human only - how would we validate that its there? What if it doesnt get there how do we escalate with the bot/notify?

validate account went to the chart?