

Quantxt Theia


Step by step guidelines

Dashboard view - Models and Jobs


Data capture models

Menu


EOB



Model 786644



Model 1500



Edit model

Click on Play icon - Upload files to process

<p>Model 786644 bjym</p> <p>Units: 2</p> <p>Run Time: 8 sec</p> <p>Jan 7, 2022, 5:11 PM</p>	<p>EOB/ERA vvoe</p> <p>Units: 50</p> <p>Run Time: 27 sec</p> <p>Dec 23, 2021, 12:03 AM</p>
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Completed jobs - Documents processed with models

Create a Flash data capture model

Sample document: *claim_1.jpg*



6704 Curtis Court
Glen Burnie, MD 20160

Patient Name
Patient Address1
Patient Address2
Patient City, State Zip

Your Explanation of Benefits

Customer Service Information:

Phone: (410) 424-4500

Fax: (410) 424-4895

Website: www.ppmco.org

For more information on your coverage, log into your HealthLink@Hopkins account www.ppmco.org

THIS IS NOT A BILL. YOU CANNOT BE BILLED FOR THE BALANCE OF ANY COVERED SERVICE

Date of EOB Notice: 03/01/2018

Member Name: Patient Name

Member ID: 123123123

Member DOB: 12/14/1969

Provider Name: Submitting Provider Name

Provider ID Number: 123456

Claim #: 123456789

Date of Service Line Nbr / Description	Billed Amount	Allowed Amount	Above Maximum	Not Covered	Deductible	Copay/ Coinsurance	Other Ins Paid	Member Liability	Discount	Paid Amount	Remarks
1/6/2017-1/6/2017	500.00	444.00	56.00	444.00	0.00	0.00	0.00	444.00	0.00	0.00	8000
Line 1 - MEDICAL SERVICES											
1/6/2017-1/6/2017	100.00	80.00	20.00	80.00	0.00	0.00	0.00	80.00	0.00	0.00	8059
Line 2 - RADIOLOGY/IMAGING											
TOTALS			76.00	524.00	0.00	0.00	0.00	524.00	0.00		

Amount Owed to Provider: 524.00

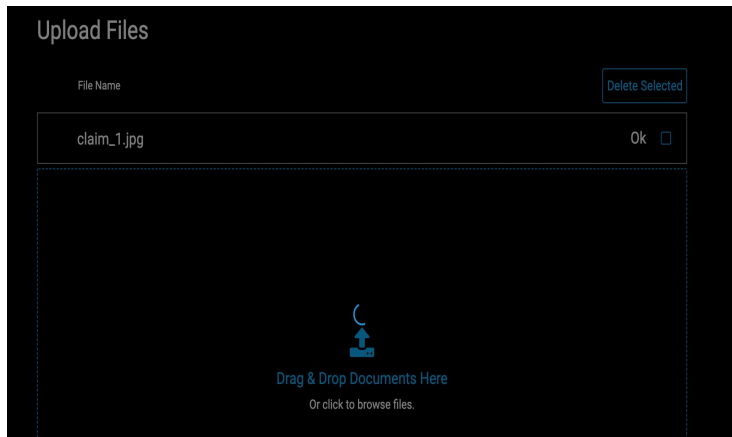
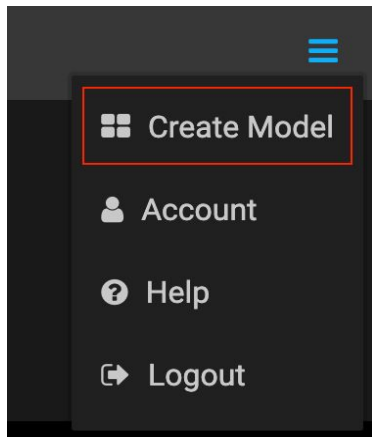
1
Create Model



2
Upload one sample document



3
Verify the content and add properties



Run the model and verify the captured results

Flash Model 786644

⚙️ > Run

...	+ Source	Member ID	Member DOB	Billed Amount	Allowed Amount
1					

Flash Model 786644


2 results

...	Member ID	Member DOB	Billed Amount	Allowed Amount
1	123123123	12/14/1969	500.00	444.00
2			100.00	80.00

Extend models on varying format
documents

Sample document: *claim_2.png*

The new claim document has properties with different names and location

 DELTA DENTAL

Delta Dental
123 Smile Street
Chicago, IL 54321

Joe Wright
456 Happy Lane
Chicago, IL 54321

Claim Number: AB-445-24445
Group Name: Delta Dental Plans Assoc
Subscriber: John Wright
Subscriber ID: XXXX5555
Patient: John Wright
Patient DOB: 1/1/1950
Dentist: AJ M. Dentist

Explanation of Benefits *This is not a bill*

TH	SURF	Service Date	Procedure Code	Submitted Amount	Approved Amount	Contract Allowed	Deductible or Over Maximum	CoPay %	Patient Payment	Delta Dental Payment	Ref. Code
		3/3/2018	9210	\$106	\$106.00	\$106.00	\$25.00	80	\$41.20	\$64.80	
4	M	3/3/2018	2330	\$116.00	\$116.00	\$116.00	\$0.00	100	\$0.00	\$116.00	
		3/9/2018	4910	\$170.00	\$170.00	\$170.00	\$0.00	100	\$170.00	\$0.00	052

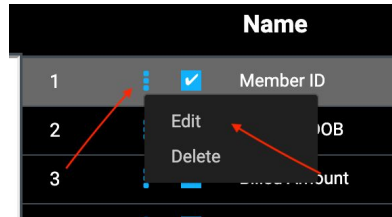
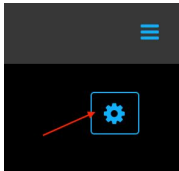
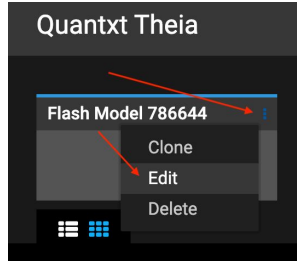
For benefit year starting 1/1/2018
\$25.00 of \$25.00 Annual Deductible Met to Date
\$180.80 of \$2,500.00 Annual Maximum Used to Date

Reference Code:
052 Coverage for this procedure is subject to a contractual frequency/interval limitation

Theia is layout agnostic. The properties are detected regardless of their location in the document and **as long as the properties name is included in the *property synonym list***.

You can edit a property to change the property name and add synonyms.

Modifying Member ID property



Property editor ⓘ

Property name
member_id This is the header in the output. Optionally, you can modify it to a normalized title.

Synonym	Category name (Optional)	
Member ID	Member ID	🗑️
Member	__PARTIAL__	🗑️
MemberID	__PARTIAL__	🗑️
ID	__PARTIAL__	🗑️
Subscriber ID		🗑️

Add new synonyms

Add more entries


Cancel Update

After the edit, upload both files and Run.

Upload Files

File Name Delete Selected

claim_1.jpg	Ok <input type="checkbox"/>
claim_2.png	Ok <input type="checkbox"/>



Drag & Drop Documents Here
Or click to browse files.

Cancel Run

Results

...	Source	member_id	Member DOB	Billed Amount	Allowed Amount
1	claim_2.png	XXXX5555	1/1/1950	\$106	\$106.00
2	claim_2.png			\$116.00	\$116.00
3	claim_2.png			\$170.00	\$170.00
4	claim_1.jpg	123123123	12/14/1969	500.00	444.00
5	claim_1.jpg			100.00	80.00
6					