

IMC Claim - Overview

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IMC Claim

IMC Claims are the medical Claims between the patient, Health fund, Medical provider, and Medicare.

There are some mandatory configurations required in CareRight for the successful processing of IMC Claims. Refer to [Configurations for IMC Claims](#) in the System Admin manual for more information.

There are mainly three steps included in the overall process of IMC Claiming.

1. [Generate/Send the IMC Claim](#)
2. [Generate the Processing Report](#)
3. [Generate the Payment Report](#)

CareRight is capable of sending IMC Claims individually or [send them in bulk](#) from a single tab.

IMCs can be generated in two different scenarios,

1. Standard MBS pricing will be applicable for all item numbers.
 2. Medical providers may have negotiated contracts with Health Funds for specific Item Numbers. Refer to [Rate contracts](#) in the system admin guide for more information.
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