TriZetto® Healthcare Products
Answering healthcare’s biggest challenges
Healthcare market forces will require your business to achieve new levels of performance and efficiency while harnessing the power of digital capabilities to collaborate and engage with all industry participants. Cognizant brings an unprecedented level of resources, expertise and commitment to help our clients improve interactions and outcomes for more than 180 million lives.
Our portfolio of TriZetto Healthcare Products focuses on the biggest challenges you face, including:

- The government’s growing role in healthcare, becoming the largest funder of insured lives in the U.S.
- The shift to consumerism, as healthcare increasingly becomes a retail business.
- The increased focus on value-based and collaborative-care models, and changing payer and provider business models.
- Ongoing compliance requirements that are fundamentally impacting underlying business models of all healthcare participants.
- Cost optimization and the challenge to improve quality and improve the patient experience, all while lowering costs.

Core administration

Cognizant’s portfolio of TriZetto Healthcare Products includes the industry’s leading core administration solutions, providing payers with choices as they establish the foundation of their healthcare information management systems. These solutions provide payers with the flexibility to administer diverse plans, integrate with third-party solutions and adapt to rapidly changing business requirements and an evolving regulatory environment.

TriZetto® QNXT™

The QNXT core administration system is a patented, award-winning open platform that helps payers compete to win in a demanding healthcare environment. The solution supports compliance with federal mandates, increases administrative efficiencies, and helps address medical loss ratio thresholds through new cost and quality of care initiatives, including value-based programs and new care delivery models. QNXT is a proven core administration platform that uses sophisticated claims management functionality to increase administrative efficiencies as well as integrated case and utilization management functionality to drive care management, supports value-based initiatives, and enables online member, provider and employer integration. Regardless of the markets your health plan serves, QNXT supports multiple lines of business on a single core platform, including commercial, individual, Medicare and Medicaid, duals, consumer-directed health and specialty.

QNXT Extended Capabilities

TriZetto® QNXT Extended Integration™

For organizations that use the TriZetto QNXT core administration system, there is a better way to integrate new technologies. It’s called QNXT Extended Integration, or QXI. QXI is a set of web services that enables QNXT application users to rapidly and flexibly integrate multiple information technology applications. QXI leverages web service technology and service-oriented architecture to provide a high degree of interoperability, enabling users to quickly and easily access, search and update information stored within the QNXT system and then deliver data to other business applications. QXI comprises nine services and more than 80 underlying operations.

TriZetto® QNXT™ Claims Workflow

The QNXT Claims Workflow module enables health plans to streamline claims adjudication management, automate manual processes and reduce costs while improving speed, accuracy and efficiency. QNXT Workflow for claims automatically manages and routes claims in real time to user work queues based on configured routing rules. Prioritized and routed claims are resolved and then reintroduced to the QNXT adjudication process.

TriZetto® QNXT™ Appeals and Grievance Workflow

The QNXT Appeals and Grievance Workflow business solution automates and manages the appeals, grievances and complaints process for health plans. This module provides the opportunity for reducing risk and associated costs through increased automation and streamlined routing to align the appropriate people with the right tasks.
TriZetto® QNXT™ Utilization Management Workflow
QNXT Utilization Management Workflow automates the identification, prioritization and routing of UM documents to end users. The new workflow capabilities for UM will help prioritize, triage and reduce lagging pended UM or referral requests, resulting in improved staff productivity.

TriZetto® QNXT™ DOFR
The QNXT DOFR module enables users to define and configure individual DOFR contractual relationships for the purpose of analysis and action during the claims adjudication process to reduce costs, enhance flexibility and improve efficiency.

TriZetto® Claim Test Pro™
Claim Test Pro enables users to easily create, manage, reconcile and document the entire claims testing process. The application’s uses include testing daily system configuration and pricing modifications, claim system migrations and consolidations, and claim system upgrades. Claim Test Pro is integrated with the QNXT platform.

TriZetto® QNXT™ Configuration Solution
QNXT Configuration Solution combines tools and services to help improve, and then easily maintain, QNXT configurations. With the assistance of TriZetto consultants, the new solution can help improve configuration consistency and reduce manual configuration changes. The new solution encompasses existing functionality to control, manage and successfully execute configuration promotions, as well as adds significant new functionality that allows existing data to be copied to create new entities. There is also an option to make changes to the new entities through Microsoft Excel.

TriZetto® Configuration Migration Utility for QNXT
The Configuration Migration Utility for QNXT helps control, manage and successfully execute configuration promotions. It gives non-healthcare IT personnel the ability to migrate specific aspects of configuration changes from environment to environment in a manner that is controlled, workflow-integrated and audit-capable.

TriZetto® QNXT Test Data Generator
QNXT Test Data Generator helps address the issue of exposing protected health information when creating non-production datasets for use in testing with the TriZetto QNXT core administration system. This data copy tool permits specific data requests from a production database, then strips the data of personal identifying information and creates key word files with all new identity information. The result is size-controlled datasets of randomized non-production data.

Payer to provider
As a critical function within payer organizations, provider reimbursement management affects all areas of operations. Understanding the financial implications of provider contracts when utilizing complex reimbursement methodologies helps payers control medical cost trends while automating key provider reimbursement management functions helps drive administrative efficiencies.

TriZetto® NetworX Suite®
The NetworX Suite is comprised of the NetworX Pricer®, NetworX Modeler® and NetworX Payment Bundling Administration™ solutions. Together, these highly flexible and easy-to-use applications increase the administrative efficiency of provider networks, support health plans in their compliance efforts with Medicare and Medicaid reimbursement standards, and help manage the cost and quality of care through innovative reimbursement programs.

TriZetto® NetworX Pricer®
NetworX Pricer automates claims pricing to increase the speed, accuracy and efficiency of provider contract administration, regardless of the number or complexity of contracts. NetworX Pricer can integrate with multiple core claims administration systems to accurately price all claims across all lines of business.

TriZetto® NetworX Modeler®
NetworX Modeler enables payers to use historical claim data to precisely model and project the financial implications of proposed contracts and uncover hidden savings opportunities during negotiations. Customized, actionable reports clearly illustrate areas of potential financial savings and risk, supporting efficient contract negotiations and helping control medical cost trends.
TriZetto® NetworX Payment Bundling Administration

NetworX Payment Bundling Administration is a comprehensive, highly automated solution that administers episode-of-care payments. The solution integrates with a core claims administration system and prospectively aggregates claims into bundles while adjudication occurs. The solution includes preconfigured industry-standard bundles and also allows for the creation and/or customization of new bundles.

TriZetto® Trading Partner Solution

The TriZetto Trading Partner Solution is an EDI management and provider trading partner management solution for healthcare payers. This cloud-based service enables collaboration with healthcare providers, streamlines administration for both health plans and providers, supports new models of care delivery and addresses regulatory requirements for electronic transactions.

Government programs and quality

Our Elements Suite of solutions provides comprehensive business support for Medicare Advantage, Managed Medicaid and Dual Eligibles. In addition, we have solutions for payers and providers to navigate the value-based shift and drive overall quality improvement to address closing gaps in care and increase operational efficiencies.

TriZetto® StarSERV®

StarSERV is an assessment and improvement solution built around the key constructs of analytics. It is designed to drive collaboration and automation, enabling plans to prioritize measures and cohorts, set up achievable quality initiatives, roll out campaigns and provider scorecards, and monitor their progress toward improving Medicare Advantage Star ratings.

TriZetto® Encounter Data Manager™

This application interfaces with TriZetto applications and other key data sources to generate and edit the required encounter data submissions for Medicare and state agencies. Encounter Data Manager also helps scrub, mask, submit and track complete files according to the various U.S. Health and Human Services submission and format requirements for delivery to the Edge Server for Exchange business.

TriZetto® Enrollment Administration Manager

This application supports accurate enrollment, including data collection, maintenance and submission to the Centers for Medicare & Medicaid Services (CMS). Our technology and streamlined solution enhances the enrollment process to support operational goals and the members’ needs.

TriZetto® Enrollment Administration Manager Workflow

Create work queues, automatically prioritize and route items based on specific data elements, users’ role assignment and other variables, and monitor workloads with Enrollment Administration Manager Workflow, which automatically balances/redistributes work when volume exceeds predefined thresholds.

TriZetto® Financial Reconciliation Manager

Helping Medicare plans identify, track and resolve factors that might cause payment discrepancies in Part C or Part D reimbursement is the primary function of the Financial Reconciliation Manager. With it reconciliation analysts can accelerate workflow, increase efficiency and reduce costs in resolution and financial management.

TriZetto® Risk Adjustment Manager

This solution helps Medicare payers optimize revenue through improved data collection, which helps increase the accuracy of risk scores and payments. To help Medicare plans optimize revenue, the solution automates key processes, from assessing member data to creating reports that support RADV audits.

TriZetto® PDE Data Manager

This application captures and loads DDPS PDE reply reports, produces PDE data for submission, and tracks stats and error codes to efficiently resolve discrepancies, resubmit rejected data and track submissions.

TriZetto® Risk Score Manager

Risk Score Manager provides trending analysis and reconciliation capabilities for calculating risk scores, by member, from RAPS response files. The solution reconciles risk scores at the HCC level against CMS risk scores from the MMR and MOR files. This tool also assists in forecasting revenue based on risk scores.
TriZetto® Rx Reconciliation Manager
This solution combines accepted drug event data from the PDE data manager system with member demographic and payment information to calculate and track low-income subsidy, reinsurance and risk-share retroactive reconciliation amounts.

TriZetto® ClaimSphere® QaaS
ClaimSphere QaaS is a NCQA-certified solution for the healthcare payer market. This easy-to-use product helps health plans meet annual state and national regulatory requirements, with the flexibility to meet plan-specific quality improvement objectives.

TriZetto® ClaimSphere® Clinical+
ClaimSphere Clinical+ is a point-of-care platform that facilitates clinical data acquisition, exchanges detailed patient-level analytics and engages providers, leading to faster care gap closure, operational efficiencies, better patient outcomes, cost savings and improved quality of care.

Care management
To realize the cost savings and quality improvement potential of care management programs, payers need efficient, thoughtfully integrated applications that connect care managers to members and providers. Successful education, empowered decision-making and the ability to navigate to the most appropriate level of care all depend on effective workflows during the interactions care manager have with members.

TriZetto® CareAdvance Enterprise®
This CareAdvance Enterprise provides a single platform transforms care management into a data-driven enterprise activity. Streamlining disease, case and utilization management allows health plans to deliver targeted health information and wellness campaigns more effectively, while getting the most out of member and provider interactions. The CareAdvance Enterprise includes the Clinical CareAdvance®, Personal CareAdvance® and CareAdvance Provider® applications.

TriZetto® Clinical CareAdvance®
Clinical CareAdvance helps health plans cost-effectively extend the reach and improve the efficiency of current care management initiatives through improved care planning and communication, increased automation and effective monitoring of members.

TriZetto® Personal CareAdvance®
By providing personal and customized health information and tools for effective self-management, CareAdvance supports population health management initiatives and empowers members to make informed healthcare decisions.

TriZetto® Touchless Authorization Processing
Touchless Authorization Processing (TTAP) is a proven, effective tool that enables payers and providers to streamline authorization workflows. The application provides a real-time, cloud-based preauthorization portal that automates the request and approval process while ensuring all approvals follow established guidelines.

TriZetto® Value-Based Benefits Solution
The Value-Based Benefits Solution enables health plans to configure, manage and automate health incentive programs. TriZetto's solution makes it easy to customize programs to the unique needs of individual groups. This application supports multiple types of rewards for members who fulfill program requirements, including cash, reductions in premium contributions, HRA or HSA contributions, points, gift cards, custom rewards, and reductions in member co-pays and co-insurance.

Portfolio Solutions
Our set of foundational solutions are embedded in the TriZetto portfolio of products to enable key functional competencies for our health plan clients.

TriZetto® Communication System
The TriZetto Communication System (TCS) generates, manages and customizes effective constituent communications. TCS configures rules for requesting and creating communications, provides an administration tool to view and maintain communication templates, and includes direct merge capabilities.

TriZetto® Healthcare Platform
The cloud-based TriZetto Healthcare Platform provides integration capabilities across disparate data sources and offers a comprehensive view of data to users across the healthcare spectrum. The platform is scalable, system-agnostic, and integrated with health plan core systems, EMRs,
labs, and pharmacy and member data sources. This integration creates a unified ecosystem around the provider, payer and consumer, providing real-time relevant information for informed decision-making.

**TriZetto® Connected Interoperability Solution**
This software-as-a-service solution enables members to securely access health data from Payer Core Systems and other data sources (clinical systems, administrative systems, data warehouses, etc.) on demand. The Connected Interoperability Solution includes the technical elements and the advisory, utilization and enablement services that payers need to comply with the 21st Century Cures Act and provide secure, on-demand access to member data by individuals, healthcare organizations and third parties.

**TriZetto® Interoperability Adapter**
Interoperability Adapter integrates data from the TriZetto Facets and QXNT platforms and converts it to the HL7® FHIR® standard in real time so it can be used in interoperability requests or ingested into sources like data lakes and data warehouses.

**TriZetto® Interoperability Data Hub**
Interoperability Data Hub creates an Enterprise Master Patient Index (EMPI) and makes data from administrative and clinical systems available at scale. It ingests and stores raw, mastered and curated data that can be orchestrated upon patient request and retrieval.

**TriZetto® Interoperability Privacy & Consent Engine**
Interoperability Privacy & Consent Engine is a configurable data processing tool that delivers the functionality to support and manage consent and to enforce state and federal regulators’ privacy requirements as well as organization-specific rules. It also supports audits of privacy and consent records.

**TriZetto® Interoperability API Gateway**
The API Gateway provides secure API management capabilities, supports developer and application registration, delivers data access APIs and enables SMART on FHIR® with OAuth2.0 and OpenID Connect authentication.

**TriZetto® Systems of Engagement**
TriZetto Systems of Engagement deliver data and meaning directly to stakeholders, enabling healthcare organizations to drive deeper engagement, improve outcomes, achieve new operating efficiencies and reduce costs.

**TriZetto® EngageConsumer**
EngageConsumer is a cloud-based system of engagement that enables individuals to more easily complete the process of shopping for, enrolling in and purchasing insurance products (medical, dental and vision) based on their healthcare data through a modern, digital experience.

**TriZetto® EngageMember**
EngageMember is a cloud-based system of engagement that gives members real-time access to plan information to help them better understand their coverage and make informed healthcare decisions.

**TriZetto® EngageProvider**
EngageProvider is a cloud-based system of engagement that enables stakeholders at payer and provider organizations to access self-service functionality in real time through both an administrative portal and a launchpad. These access points surface the critical information and tools needed to increase administrative efficiency, close gaps in care and help the business run better in real time.

**TriZetto® Treatment Cost Navigator®**
Treatment Cost Navigator educates members about the true cost of care by delivering accurate, real-time calculations of treatment costs and out-of-pocket liability as well as benefit summaries.

**TriZetto® Provider POS Direct®**
Provider POS Direct delivers real-time claims adjudication and accurate patient financial liability calculations at the point of service. Providers gain access through the health plan’s web portal.

**TriZetto® Bionic Operations**
This support tool designed and developed by TriZetto Product Support maximizes support and simplifies troubleshooting for TriZetto Healthcare Products. Licensed clients may use Bionic Operations as a first course of action to troubleshoot and resolve issues in TriZetto Healthcare Products. It is available at no charge to licensed clients upon request.
Robotic process automation
HPA Robots-as-a-Service for Health Plans
HPA automates the repetitive, rules-based processes humans perform, so staff can be reallocated to focus on processes that require personalized, human-to-human interactions. HPA manages the entire implementation life cycle from process selection, documentation, development and production to maintenance. In our unique, outcome-based approach, transaction fees are only charged when successful outcomes, as defined by the client, are achieved.

Comprehensive Solutions and Services
In addition to our portfolio of TriZetto Healthcare Products, we offer an extensive line of solutions and services that harnesses the power of digital to optimize your business. Achieve new levels of performance and efficiency with Digital Business, Digital Operations, and Digital Systems and Technology capabilities from Cognizant.

For more information about how the Cognizant line of TriZetto Healthcare Products can help you enhance revenue growth, drive administrative efficiency, and improve cost and quality of care, call 1-800-569-1222 or visit www.cognizant.com/trizetto.

About TriZetto Healthcare Products
We help healthcare organizations enhance revenue growth, drive administrative efficiency, improve cost and quality of care, and improve the member and patient experience. Our extensive line of solutions and services harnesses the power of digital to optimize your business. Visit us at www.cognizant.com/trizetto for more information.

About Cognizant
Cognizant (Nasdaq-100: CTSH) is one of the world’s leading professional services companies, transforming clients’ business, operating and technology models for the digital era. Our unique industry-based, consultative approach helps clients envision, build and run more innovative and efficient businesses. Headquartered in the U.S., Cognizant is ranked 194 on the Fortune 500 and is consistently listed among the most admired companies in the world. Learn how Cognizant helps clients lead with digital at www.cognizant.com or follow us @Cognizant.