



Solutions for Dual Eligibles Administration and Care Collaboration

For many health plans, managing dual eligibles has been a labor-intensive, manual-based process.

These organizations have had to circumvent their core administration systems to manage two separate IDs, multiple records per member and several touches per claim—leaving ample room for human error.

To add to the complexity, health plans have to incorporate varying funding streams into their workflow, address medical needs along with psychosocial care, and incorporate multiple support services not required by other lines of business. A highly-integrated, member-centric approach is required to ease this administrative burden and simplify the process of managing dual eligibles.

Solutions for Dual Eligibles are part of the Cognizant line of TriZetto Healthcare Products—a portfolio of software products that help healthcare organizations enhance revenue growth, drive administrative efficiency, improve cost and quality of care and improve the member and patient experience.

Increase Administrative Efficiency

The more automation you can weave into the claims adjudication process, the more efficient your

Effective Solutions for Dual Eligibles

- System flexibility adapts to rapidly changing regulations
- Comprehensive solutions meet your unique business needs
- Integrated, member-centric functionality reduces manual processes
- System design support duals enrollment and claims adjudication capabilities
- Solution scalability meets the growing demands of your business

operation will become. We employ a single-solution approach to help health plans manage costs and rapidly respond to changing CMS guidelines. Our core administration systems have member-centric functionality to:

- Coordinate claims payment to automatically process both Medicare and Medicaid benefits for a single eligibility segment with a single claim submission, claim payment and remittance advice.

- Add secondary plan logic such as reconciliation and member true-up for CMS.
- Decrease pending claims to increase the automation rate.
- Combine results while maintaining the specific claim adjudication results for each benefit (Medicare versus Medicaid) restriction, limitation and accumulators separately.
- Audit actions across all lines of business and processes.
- Allow for the 837 extraction of claims encounters (Medicare versus Medicaid).

Lower Costs and Improve Quality

Care coordination is a critical function in the management of dual eligible members. Without effective care management, your bottom line and overall quality of care likely will suffer. The ability to manage the coordination and cost of dual eligibles through comprehensive care management programs is fundamental to success. Our integrated care management solutions enable health plans to:

- Identify and stratify appropriate members for inclusion in care management programs
- Check member eligibility across multiple lines of business
- Utilize analytics for evaluation of evidence-based protocols and guideline compliance
- Deliver reporting for provider and member-level information in support of Patient-Centered Medical Home and value-based care delivery

Connect and Collaborate with Providers and Members

The exchange of information, provided in a secure manner, allows much needed transparency across multiple stakeholders. Our Solutions for Dual Eligibles help payers and providers share

Over 40 clients employ TriZetto Solutions for Dual Eligibles to:

- Converge benefits and pricing into a single claim—including utilization management and CMS and Medicaid rules
- Coordinate and improve care for high risk members
- Administer distinct, provider network three-way agreements

information through web portal technology that is pre-integrated with our core administration systems. This integration allows you to:

- Streamline administration
- Leverage real-time collaboration
- Address and support client regulatory requirements for electronic transactions—including HIPAA transactions related to claims, referrals, authorizations and remittance advices

Reach your objectives faster

In addition to TriZetto Solutions for Dual Eligibles, we offer an extensive line of solutions and services that harness 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.

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. Cognizant's line of TriZetto Healthcare Products is a portfolio of software solutions that help healthcare organizations enhance revenue growth, drive administrative efficiency, improve cost and quality of care and improve the member and patient experience. Headquartered in the U.S., Cognizant is ranked 230 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.



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