In today’s market, few organizations can afford the labor-intensive processes associated with manually routing claims, balancing employee workloads and ensuring timely processing for high-priority items—not to mention the costly errors and delays they create.

**Increasing Automation and Efficiency**
To achieve high levels of auto-adjudication without sacrificing payment accuracy, claim routing rules must be finely tuned and workflows streamlined. The ClaimWorkflow solution integrates with your QicLink™ claims processing system to help you improve business processes via functionality that includes:

- **Multi-Source Data Acceptance** - You can accept claims/encounter data from numerous sources, including clearinghouses and direct provider submission using the following formats:
  - HIPAA-compliant 5010 837 formats for institutional (223), professional (222) and dental (224) claims
- **Automated Routing** - claims and encounters are routed to appropriate areas/departments based on rules established by your operations management team
- **Adjudication Methodology Selection** - claims are adjudicated based on your pre-assigned routing conditions:
  - Individual review and approval of claims that do not meet assigned criteria
  - Automated batch adjudication following user-defined, plan-specific parameters that also allow tracking to monitor receipt and progress

ClaimWorkflow streamlines claims adjudication — eliminating bottlenecks, automating manual processes and reducing costs while improving speed, accuracy and efficiency.
The QicLink ClaimWorkflow solution is 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.

How It Works
When used in tandem with the QicLink Automatic Benefit Determination function, payment codes are assigned according to your preset definitions. ClaimWorkflow allows you to establish criteria to identify exception claims that are not eligible for automatic adjudication. For audit purposes, you can print exception lists of claims and associated line items that do not pass the automated editing process. Based on the edits assigned, ClaimWorkflow then routes these claims to your designated work queues.

Rules can be established to automatically route claims based on the skill set required for resolution, specific processors, the organization’s lines of business and other criteria. The work queues to which claims are sent can be set up based on group and product requirements, provider requirements and users’ roles within the organization.

Why ClaimWorkflow is so Effective

- **Productivity Improvements** - Because tasks and processes are automated, supervisor and staff intervention is significantly reduced. This allows your people to focus their attention on more complex functions.

- **Reduced Errors** - Because data, not paper, is passed along to processors, there is a significant reduction in lost claims and other mistakes associated with manual, paper-based processes.

Reach your objectives faster
In addition to the TriZetto QicLink ClaimWorkflow solution, 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.