



Cognizant®

Data Sheet

TriZetto® Managed Medicaid Capabilities Driving Change in an Evolving Market

Changes in Medicaid are presenting numerous challenges and opportunities to the payers serving this critical market. Today, over 70 million people receive Medicaid benefits or 20% of the United States population.

Medicaid is the United States' top health insurance program for individuals with low income. It is also the primary payer for those individuals in institutional and home and community based care programs. Medicaid programs can vary due to the wide variety of beneficiaries. The programs differ from state to state and they offer a variety of services with limited out-of-pocket expenses to the participants. Medicaid is funded by both state and the federal governments creating an environment with some flexibility at the state level but the programs are still subject to federal standards. States can apply for waivers to the federal government which may allow them to try new ways to advance their objectives.

Our comprehensive solutions allow your plan to get in front of Medicaid changes, with efficient claims, enrollment, medical and population management workflow. Processing more than 60 percent of the nation's managed Medicaid lives on the TriZetto core administration systems, we

Our Medicaid solutions can help you:

- Be flexible to address state requirements
- Lower administrative costs
- Increase speed-to-market
- Decrease total cost of ownership

have the experience and capabilities to help you adapt and respond quickly to changes in Medicaid requirements and reporting rules

Effective, reliable, solutions for Managed Medicaid

The TriZetto® Facets® and QNXT™ Core Administrative Systems are two flexible, scalable core administrative systems that address the wide scope of your business needs. Both Facets and QNXT platforms offer deeply integrated functionality that continues to adapt as Medicaid reporting and other administrative demands evolve.

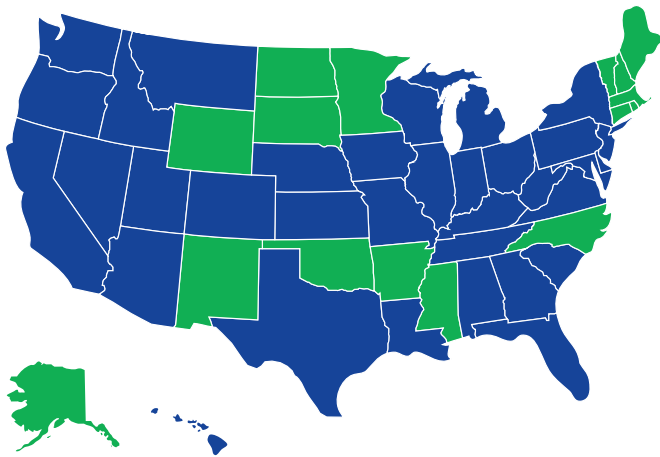
TriZetto CareAdvance Enterprise® provides a secure web-based solution that streamlines utilization, case and disease management, helping payers meet federal and state quality improvement initiatives.

TriZetto® NetworX Suite® for Medicaid automates the pricing of claims with respect to complex provider contracts and allows the modeling of impacts of changes in state fee schedules.

ClaimSphere™ QaaS enables health plans to prioritize measures and cohorts, set-up achievable quality initiatives, roll-out campaigns and provider score cards and monitor their progress toward improving their HEDIS scores.

TriZetto® Encounter Data Manager (EDM) supports submission requirements and provides functionality to help meet applicable compliance expectations, improve revenue and reduce overhead. EDM provides a configurable and scalable encounter management solution that produces agency compliant encounter transactions, while enforcing submission rules to help prevent non-compliant transactions from being submitted to CMS, Commercial Exchange or state agencies.

Unparalleled Experience in Managed Medicaid



90+
Managed Medicaid
Clients

Processing
60%
of all Managed Medicaid
Consumers

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 Cognizant

Cognizant's Healthcare Business Unit works with healthcare organizations to provide collaborative, innovative solutions that address the industry's most pressing IT and business challenges—from rethinking new business models, to optimizing operations and enabling technology innovation. A global leader in healthcare, our industry-specific services and solutions support leading payers, providers and pharmacy benefit managers worldwide. For more information, visit www.cognizant.com/healthcare.

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