A major health plan transforms its technology platform, automates claims processing and upgrades the customer experience for members.

A large not-for-profit health plan found that many of its IT systems and processes were underperforming. As a result, the organization experienced regulatory compliance issues, customer service metrics were trending down, and membership was in decline.

The organization knew its aging IT systems and processes were largely to blame for these issues. Management understood that it needed to reinvest. And they recognized the situation called for fast, bold action – a rapid transformation.

They engaged us for our deep experience in healthcare, and for our ability to manage a large-scale IT and business process transformation. To speed the engagement, we took full responsibility for the company's legacy processes and systems, including all application and infrastructure support. In this way, we were able to stabilize and run the legacy systems while also developing a new, world-class platform.

At a glance
A major health plan needed to upgrade its faltering IT systems and processes, improve customer satisfaction, and build market share. We helped stabilize the legacy systems while designing and implementing a new platform. The back office is now transformed and customer metrics are trending up.

Outcomes
- Expected $900 million in savings over seven years by reducing expenses – selling, general and administrative
- Achieved 15x reduction in claims inventory, and 4x reduction in average days in house for pending claims
- Reduced time to roll out new products to less than 12 months
In taking ownership of the back-office systems and processes, we were able to significantly improve the claims processing system and eliminate a large claims backlog. This allowed the client to focus on product development and market strategy, helping it better compete and gain market share.

Today, operating efficiency and customer service metrics are considerably improved. Customer satisfaction scores are up. Membership numbers are growing.

The Power of Automation

Because claims were backlogged and interest charges were driving up costs, claims processing was a major focus of our transformation effort. We tackled it in three phases. First, we performed a complete analysis of current and historical claims, looking for patterns that were leading to rework.

We then corrected flawed policies and procedures and developed a process for “recycling” claims according to the revised policies.

Finally, we used robotic process automation (RPA) to automate parts of the claims process, implementing advanced algorithms to mimic human judgment and decision-making.

The initiative was extremely successful. We brought the inventory down to near-zero levels. This helped the client pay claims promptly and reduced need for employee overtime.

We also developed a reusable set of assets for use in other areas of the organization, and we are helping develop a Center of Excellence to drive other digital solutions for the organization.

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