

ORACLE INSURANCE CLAIMS ADJUDICATION FOR HEALTH

ORACLE INSURANCE CLAIMS ADJUDICATION FOR HEALTH

KEY FEATURES

- Automatically evaluates claims in real-time based on business rules that you configure
- Highly configurable, business rules are written in user friendly format that reads like natural language
- Calculates and tracks deductibles and other member cost-sharing, benefit limits, authorizations and more
- Supports a wide range of claim types including dental, vision and behavioral health
- Supports any type of procedure, diagnosis or provider code, from country-specific to custom codes
- Sends exceptions to workflow systems to accelerate manual reviews
- Integration points can automatically send processed claims to financial systems for electronic payment
- Creates audit trails with every transaction

KEY BENEFITS

- Increased auto-adjudication rates
- Lower administrative costs
- Faster processing times
- Increased member and provider satisfaction
- Increased ability to outpace competitors by supporting innovative benefit and reimbursement models
- Improved ability to comply with industry regulations as they change
- Phased implementation approach that mitigates risk

The challenges facing today's health insurance industry include rising treatment costs, ever-changing government regulations, uncertainty around U.S. healthcare reform, and a highly competitive marketplace. All of this is putting pressure on healthcare payers to change their operations to keep pace with the market, as well as reduce administrative costs to stay competitive. Oracle Insurance Claims Adjudication for Health automates claims processing, reducing your overhead and administrative costs. Its adaptive, rules-driven architecture lets you reconfigure the application as your needs change, helping you to keep pace with ever-changing market demands.

Meet the Challenges of Today's Health Insurance Environment

Oracle Insurance Claims Adjudication for Health provides automated claims adjudication for healthcare payers. The application enables straight-through processing for the vast majority of claims, leading to lower administrative costs and overhead. It evaluates all claims using business rules that you can write into the system, based on a format that is very user friendly and reads like natural language. These rules can be easily changed whenever a policy or regulation changes, or when you want to support a new product or benefit to meet changing market demands. In this way, Oracle Insurance Claims Adjudication for Health lets you keep pace with the changing needs of the market, and even outpace your competitors when it comes to offering innovative products and services.

Automate Claims Processing with User Friendly Business Rules

Oracle Insurance Claims Adjudication for Health offers virtually unlimited flexibility in business rules. With a highly user-friendly approach to rules creation, you can configure the system to validate and adjudicate claims in nearly any circumstance. When a claim arrives, the system first validates the claim—for example, duplicate checking, or ensuring diagnosis and treatment codes correspond to criteria for the patient's age or gender.

Once validated, the system then adjudicates the claim according to benefit rules for the member's plan. This includes determination of covered services and applicable benefit limits as well as the calculation of deductibles, other forms of member cost-sharing, and more. Oracle Insurance Claims Adjudication for Health features benefit rule "accumulators" that track member and family utilization against deductibles, out-of-pocket maximums, or other coverage restrictions such as tiered benefits or visit limits. For example, if a patient is limited to 10 visits per year for chiropractor services, the system can automatically keep track of the number of visits, and decline further payments once that limit has been reached. This is just one example of the multitude of business rules that can be written into the system as needed.

The system also allows you to create rules governing any type or set of codes—from procedure, to diagnosis, provider or facility codes. You can even store your own custom codes and easily change them as needed.

**CUSTOMER SUCCESS:
HARVARD PILGRIM
HEALTH CARE**

"We want to respond to the needs of the marketplace by keeping health care as affordable as possible, reduce expenses, and continue to provide the best service possible to our members. Oracle Insurance Claims Adjudication for Health is helping us to achieve this."

— Eric Schultz, CEO

RELATED PRODUCTS

- Oracle Documaker Enterprise Edition
- Oracle Human Workflow
- Oracle E-Business Suite Financial Management
- Oracle Insurance Revenue Management and Billing for Healthcare Payers
- Oracle Insurance Insbridge Rating and Underwriting

Accelerate Exception Handling for Complex Claims

Oracle Insurance Claims Adjudication for Health lets you set criteria for automated processing, so that claims beyond a certain limit or involving complex procedures are reviewed manually. You can integrate the system with Oracle Human Workflow or other workflow software to send a message to a claims processor that a claim is ready for review. The user clicks a URL in the message, linking back to the Oracle claims application where the processor can work the claim. The user can perform real-time calculations in the system to see how it will affect the payout—so that the processor can always see the result before resubmitting the claim.

Integrate with Other Systems for End-to-End Claims Processing

Many healthcare payers have multiple back-end systems as a result of mergers, acquisitions, or business-line level decision-making. Oracle Insurance Claims Adjudication for Health offers an integration point, so that its benefits accumulators can track aggregate counts for items—such as annual deductibles or out-of-pocket maximums—across claims processed by multiple systems. Additional out-of-the-box integration points support the exchange of data with CRM, membership accounting, enrollment, provider management, and other critical payer systems.

Oracle Insurance Claims Adjudication for Health also integrates with third-party systems to accept claims electronically. The Oracle solution can accept XML data from healthcare providers, as well as offering a browser-based interface to support on-line claims submission. The web interface can be configured in any language for international operations, and fields can be configured to meet the payer's specific business needs.

In addition, the Oracle claims application integrates with financial systems, with direct integration to Oracle E-Business Suite Financial Management, enabling automatic payment to claimants via EFT (electronic funds transfer). This enables end-to-end, submission-to-payment claims processing for improved service at a reduced cost.

Contact Us

For more information about Oracle Insurance Claims Adjudication for Health, visit oracle.com/insurance or call +1.800.735.6620 to speak to an Oracle Insurance representative.



Copyright © 2011, Oracle and/or its affiliates. All rights reserved.

This document is provided for information purposes only and the contents hereof are subject to change without notice. This document is not warranted to be error-free, nor subject to any other warranties or conditions, whether expressed orally or implied in law, including implied warranties and conditions of merchantability or fitness for a particular purpose. We specifically disclaim any liability with respect to this document and no contractual obligations are formed either directly or indirectly by this document. This document may not be reproduced or transmitted in any form or by any means, electronic or mechanical, for any purpose, without our prior written permission.

Oracle and Java are registered trademarks of Oracle and/or its affiliates. Other names may be trademarks of their respective owners.

AMD, Opteron, the AMD logo, and the AMD Opteron logo are trademarks or registered trademarks of Advanced Micro Devices. Intel and Intel Xeon are trademarks or registered trademarks of Intel Corporation. All SPARC trademarks are used under license and are trademarks or registered trademarks of SPARC International, Inc. UNIX is a registered trademark licensed through X/Open Company, Ltd. 1011

Hardware and Software, Engineered to Work Together