

GAINING CLAIMS AGILITY AND EFFICIENCIES

COST & TIME TO MARKET/COMPLIANCE DRASTICALLY REDUCED

BUSINESS GOALS

- Improve Claims First Pass Rate from 60% after moving to Facets System.
- Automate claims processing across four core claims systems.
- Manage and optimize manual claims processing for pending claims.

RESULTS

40% IMPROVEMENT

In claims processor productivity Month One

4,000+ PEGA RULES

Written to manage complexity in Physician & Member contracts

4 CLAIMS CENTERS

Consolidated into one operational unit

25% INCREASE

Claims first pass rate

1 WEEK FOR 45 HEALTH REFORM CHANGES

Met compliance deadlines after determining changes could not be made in Facets



“We are able to change much more quickly in Pega. Right now, to write a modification to a rule takes just 5 hours to code, document and user test that change in Pega.”

Joseph Tirone
Lead Developer
Health Now (BCBS WNY)