FACT SHEET | HEALTHCARE | BPO

Maximize Recoveries and Improve Your Payment Accuracy

NTT DATA Medical Cost Manager

Benefits:

- Utilizes advanced AI/ deep learning, supported by rule-based analytics that auto-update as regulations change

- Provides business insights using diverse data sources from within and outside health plans

- Is highly configurable to suit payer-specific needs

- Uses clinical data through the FHIR repository for advanced rules

- Enables advanced interpretation of clinical data with add-ons like NLP

- Allows collaboration with non-Medical Cost Manager users

- Reduces costs through root-cause analysis and resolution

- Enables real-time interactive command center view with review and audit workflows and custom visualization

According to the Centers for Medicare & Medicaid Services (CMS), U.S. healthcare spending reached $3.81 trillion in 2019 and is expected to increase to $6.19 trillion by 2028.[1] This trend places increasing pressure on health plans to implement cost containment solutions to reduce claim spend and resolve incorrect payments, which can be even more challenging when using outdated technology and juggling multiple vendors.

Payment integrity point solutions can help, but they lack transparency and can provide a lopsided view across business lines. This can lead to increased administrative and medical costs. Using third-party vendors and applications often also puts the focus on a retrospective pay-and-chase approach, with no intention to fix the root cause of an issue.
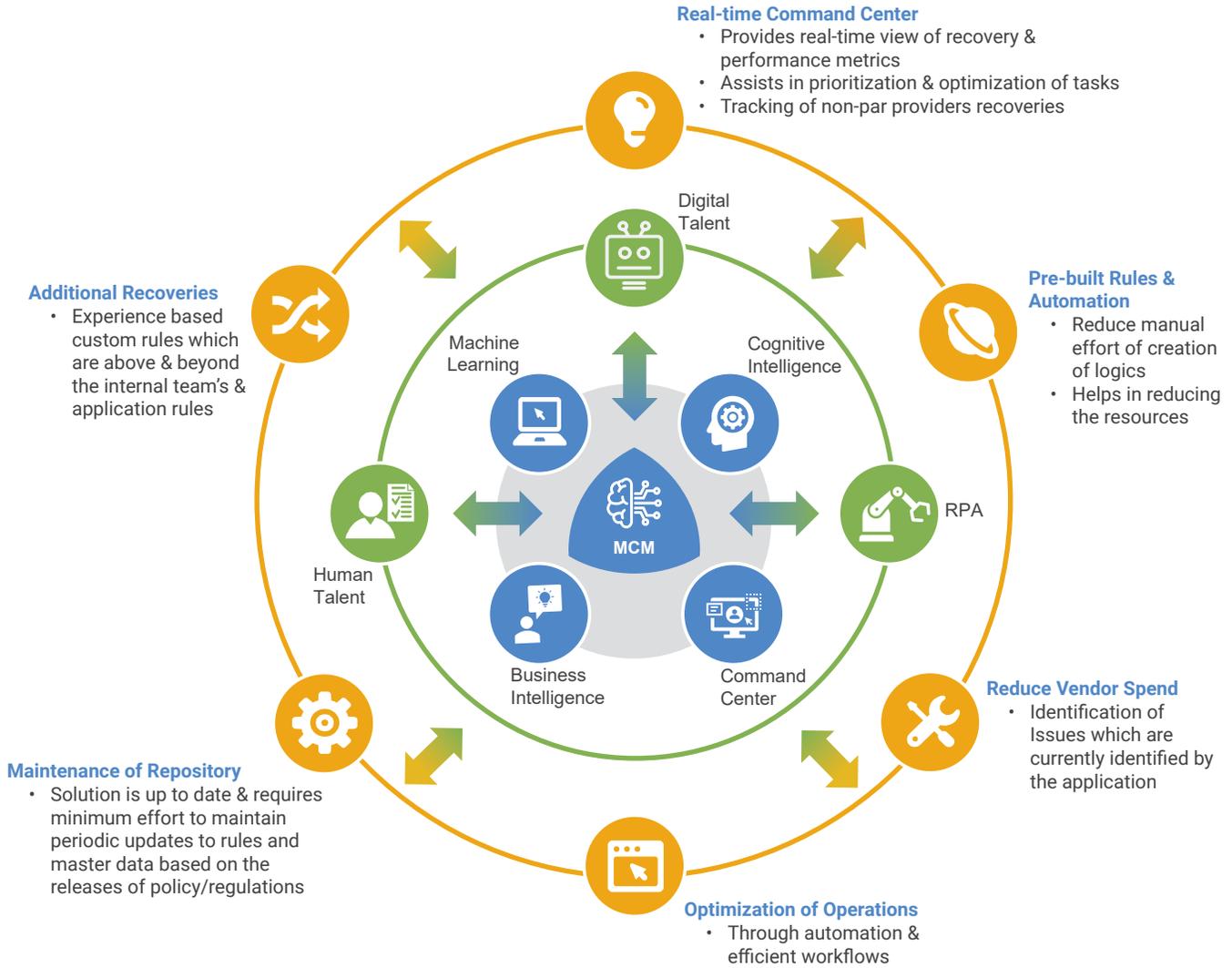
Put a stop to revenue leakages today with NTT DATA Medical Cost Manager. As a trusted global innovator with more than 50 years of healthcare experience, we can help you uncover fraud, waste and abuse errors in claims processing. Our proprietary artificial intelligence (AI) and advanced data analytics framework uses machine learning capabilities comprised of a unique set of more than one thousand custom rules and millions of industry-specific rules. It's also highly automated, scalable and agile, and, most importantly, seamlessly integrates with your existing systems and data sources.

Based on our work with more than 50 health plans nationwide, we built a robust platform to simplify payment integrity environments with increased automation, smart workflows and minimum maintenance through automatic updates from policies and compliance procedures. Our transformational solution supports a shift-left approach to solve issues early in the process. Payment integrity activities move from the pre-adjudication or pre-payment phases to real-time adjudication — all supported by rule-based analytics that provide root-cause analysis.

It also enables collaboration beyond the Medical Cost Manager solution to discover the root causes of issues within different functions and systems. Medical Cost Manager includes built-in add-ons that use natural language processing (NLP) and Fast Healthcare Interoperability Resources (FHIR) technologies to provide advanced interpretation of clinical data.

NTT DATA Medical Cost Manager

Our approach provides a transparent 360-degree view with insights that help detect and prevent overpayments. By combining deep learning with advanced data management from diverse sources and sophisticated analytics, you get a holistic view of claims and membership information. This command center also presents consolidated key metrics (inventory, production and recovery) for tracking the performance of your operations team — allowing your business leaders to track the end-to-end claims lifecycle and drill down in real time on each case in the system.

Payment Integrity Ecosystem

Real-time Command Center
- Provides real-time view of recovery & performance metrics
- Assists in prioritization & optimization of tasks
- Tracking of non-par providers recoveries

Additional Recoveries
- Experience based custom rules which are above & beyond the internal team's & application rules

Pre-built Rules & Automation
- Reduce manual effort of creation of logics
- Helps in reducing the resources

Maintenance of Repository
- Solution is up to date & requires minimum effort to maintain periodic updates to rules and master data based on the releases of policy/regulations

Reduce Vendor Spend
- Identification of Issues which are currently identified by the application

Optimization of Operations
- Through automation & efficient workflows

Digital Talent
Machine Learning
Cognitive Intelligence
MCM
Human Talent
RPA
Business Intelligence
Command Center

- Pre-pay Services
- Post-pay Services

Our enterprise-level platform includes the following payment integrity capabilities:

Features	Highlights
Claims editing	Evaluate claims for coding accuracy and integrate with claims workflow processing in real time, without human intervention: • Uses an AI-supported unique set of custom rules that surpass traditional transactional methods • Leverages our proven experience in health plan claims adjudication and provider revenue cycle management • Provides transparency into issue root cause, supporting upstream remediation and future issue avoidance
Overpayment identification (data mining)	Review paid claims files and apply data mining/algorithms to identify potential overpayments and provide insights into disbursement leakages and institutionalize recovery efforts: • Utilizes clinical data through FHIR repository for advanced rules • Includes add-ons like NLP for advanced interpretation of clinical data
Coordination of benefits (COB)	Streamline COB processes for commercial and government plans using a 360-degree member view and a combination of unique AI-enabled algorithms and information from unconventional data sources to identify other carrier liabilities for increased recovery and avoidance savings by fixing the root causes of issues
Coding/clinical validation	Validate claims data using system and clinical analysts to identify claims that are either coded incorrectly or inconsistent with industry standards, regulations and/or guidance
Subrogation	Orchestrate accurate recovery and payments from a variety of information sources through improved data mining and billing
Consulting and integration	Provide subject-matter expert support to streamline operations, adopt new technologies and grow your business

Source:

[1] Advisory Board. "CMS: US health care spending will reach $4T in 2020." Daily Briefing. April 3, 2020. https://www.advisory.com/daily-briefing/2020/04/03/health-spending

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