Hexaware's Accelerators for Facets- A Health Plan Administration Platform

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1 Introduction

Healthcare in United States is constantly facing challenges in terms of cost, quality, consistency and availability of coverage – altogether creating an environment of affordability crisis that is impacting everyone from providers, health insurance companies to employers and consumers who now pay more out of pocket and in turn receive less in benefits.

All market analysts and experts from the industry are digging deeper to look at the threat posing factors. What are they?

- Inefficient systems.
- Outdated Technology/Applications
- Inability to include services of Information Technology (IT) programs deeper into the business.

With the rapidly changing Healthcare market trends, the need of the hour is the ability of healthcare businesses to cope up with these changes for smooth functioning of their business architecture in the market place as well as keeping the escalating healthcare costs in control. The emphasis needs to be laid on maintaining the technology infrastructure and services that enables business to be ahead in competition in the market and respond quickly to the much required business changes and opportunities.

The flexible operation of business processes and the core administration system in such an environment requires a thorough understanding of the technical environment and information systems. The importance to set expectations regarding the type, quality, performance and availability of these systems to the end-user makes it even more vital and challenging to get most out of business investments.

2 Abstract

The medical and administrative cost of providing healthcare continues to rise in the U.S. according to The Department of Health and Human Services. The U.S. spends a larger share of gross domestic product on healthcare than other industrial nations – currently estimated at 16 percent GDP and growing to near 20 percent by 2020. As per CMS, between 2011 and 2013, average annual health spending growth is projected to grow faster due to expected improvements in the economy, reaching a rate of 5.5 percent by 2013. The new healthcare era will be driven by expected robust enrollment growth, coverage expansions, and Exchange plan premium and cost-sharing subsidies.

Administration of care, which includes business functions as enrolling employers and members, configuring benefits and managed care policies, managing providers, their networks and their reimbursement mechanisms, handling authorizations and referrals and finally adjudicating and paying claims, will always form the vital core of any business framework. Therefore, the need for reduction in administrative costs of health plans challenges healthcare organizations to improve the quality of care and deliver efficient wellness programs and highly useful trainings. Effective and cost-efficient core administration solutions will now increasingly be the area of focus as per the mandated Health law passed in March 2011. As per the Census Bureau, the number of people without health insurance rose sharply last year to approx 50.7 million (16.7 percent) — an all time high – which has made US government think-tank to effectively strategize the healthcare reform in the benefit of all Americans in the marketplace.

This white paper demonstrates how and what Information Technology (IT) would offer as the potential solution to address the cost and legislative challenges. It will discuss how healthcare organizations can become ready to meet current market needs and can respond effectively to the new challenges. It will showcase the importance of Health Information Technology (HIT) offered efficient products such as TriZetto's Facets and Hexaware's accelerators. However, predicting the course of action can be overwhelming for both health plans and health insurance companies and software vendors who will be expected to go hand-in-hand to overcome this crisis and emerge more strongly.

3 Key Challenges in Healthcare Market

Do any of these challenges sound familiar? Are you prepared to enter into a new landscape of Health Information technology (HIT)?

- Transformational changes in business model driven by a multitude of legislative changes and consumer requirements and focus more on overcoming affordability crisis.
- Escalating administrative and medical costs.
- Rise in population of Uninsured and Declining rate of employer-sponsored insurance.
- How to improve productivity, system efficiency and provider operations (financial, clinical and administrative) for sharing of information seamlessly, enabled by investment in information technology used to support them?
- Effective management of complex provider networks to solve the availability of expanded coverage issue.
- How to improve efficiency in terms of flexibility, transparency and visibility in enrollment process and quality of care as per the new Health Law proposition and in favor of consumer protection?
- HIPAA 5010 and ICD 10 transition deadlines with strict routine solutions.
- To stand high in market prepared to face new challenges ahead of their competition.
Hexaware's Accelerators for Facets - A Health Plan Administration Platform

Hexaware's vision is to help healthcare customers meet the challenges faced while aligning technology with their business architecture which also ensures availability of IT services while reducing the administrative costs through improved IT processes and increased automation. Hexaware healthcare pool — Healthcare Center of Excellence, is prepared in a well-managed and highly efficient training environment which helps us to counter customer's unique business needs and opportunities. Our determination to help our customers stay ahead in market competition has yielded fruitful results and we have partnerships with leading healthcare industries in our long journey.

4 Product Capabilities

4.1 TriZetto Facets is Booming

Core systems that support payers’ day to day functions and administrative efficiency have been dependent on legacy systems for payers, and they have honed their capabilities to a fine edge. As financial administrators, payers have focused on improving their efficiency in claims processing and operations and driving down administrative costs, which represent 10 percent to 12 percent of the health benefit dollar. As they made gains in this area, payers also began to focus on the greater potential for savings in care management.

To move ahead from here, payers need to leverage the investments they have already made and add new strategic capabilities that will enable them to use the rich data at their command in a more systematic, integrated, cost-effective and automated way than they have up to now. Then they can connect and integrate those functional and informational silos, unlock the valuable data and experience they already possess, and engage with all participants in the healthcare system.

Today, majority of health insurance companies, including 18 Blue Cross Blue Shield plans, uses TriZetto's Facets system, and nearly half of all Americans receive health insurance from payers using this product. Facets is a comprehensive, flexible, scalable, production-proven, enterprise-wide core administration solution for healthcare payers. Facets provides a functionally rich set of modules that allow healthcare payers to meet their comprehensive business requirements— across claims processing, claims re-pricing, capitation/risk fund accounting, premium billing, provider network management, group/membership administration, referral management, hospital and medical pre-authorization, case management, customer service, electronic data interchange and the highly vital membership management.

4.1.1 Benefits of Facets Solution.

- Reduce administrative and medical costs through automated processes across the entire enterprise and drives greater cost-efficiencies.
- Facets also support organization to remain in sync with the consumer-directed products demanded by today's health care delivery and help deliver advanced care management capabilities.
- Enhanced revenue growth with highly configurable and flexible benefit design with ample visibility for new products.
- Improves network management by effectively administering even your complex provider and facility contracts.
- Highly efficient claim management eases the claim processing by reducing claim pends and increases the first pass rate.
- Facets reports give business the much required analytical reports to help business accurately forecast financial impact.
- Facets ability to integrate with other applications provides a comprehensive combination of core functionality and complementary solutions.

Facets Core Solution Management

But what about the changes in the market place? To help its customers stay ahead in the evolving healthcare era, TriZetto updates its Facets product with new releases annually. The newest release of the Facets software includes more than 80 enhancements that further ease and speed the administration of health benefits and provide customers with improved functionality that helps streamline their operations and meet new market challenges particularly streamlined with HIPAA 5010 and ICD-10 transition.
4.2 Hexaware Competency – Facets/MetaVance Testing Accelerator

Hexaware team brings successful experience in implementing and managing Enterprise Health Plan and Facets testing programs, and in using the structured methodology, toolset and approach. Leveraging our expertise in Facets, we have developed an object-oriented approach to the functional script design process in order to minimize script creation and maintenance efforts.

- HCSC: Enterprise HIPAA / NPI Program Leadership and Enterprise Testing Management & Delivery, using SDM.
- BCN: Management and Delivery of Hosting, Environment Planning and Management, Promote to Production, Enterprise Testing (SIT, UAT, E2E, Parallel) and Operational Readiness and Deployment.

4.2.1 Features of Facets Testing Accelerator

- Fully compatible with HP Business Technology Optimization (BTO) solutions.
- Consists of predefined BPT components and function libraries designed to work with Facets applications.
- Customization - Can integrate and test other SAP® solutions, Siebel® applications, Oracle® applications, PeopleSoft® applications, and Web-based applications.

5 Proposed Solution

Hexaware can leverage its prior experience and knowledge to partner with the organization and assist them in taking full advantage of TriZetto's enterprise-wide core administration software Facets application system integrated with other administrative products. Eventually, our focus is to help healthcare payers in improving productivity, enhanced service and act as a growth enabler for enterprise business. We have an excellent past-proven record of helping healthcare organizations deliver quality care to its members and providing a highly efficient end-to-end management from hardware infrastructure to business service level.

Hexaware excel in providing complete Facets solutions and Facets Accelerators which aid you in designing business framework to a highly efficient administrative cost-effective engine.

5.1 Hexaware Service Offerings – Experience Meets Expertise

Hexaware has a long history of successful Enterprise Health Plan & Facets implementations and stand high on providing benefit design solutions as well as testing solutions. Our people are seasoned professionals with hands on implementation experience from multiple Enterprise and Facets implementations. Hexaware created a corporate task force to help our clients migrate to Facets platform. This multi-disciplinary team includes experts in the healthcare domain, HIPAA, benefits and claims business processes, pricing evaluation, medical coders, development, reporting and testing. Our solution offering includes process business frameworks and innovative technological solutions to make the transition in a smooth, efficient, and cost-effective manner.

5.1.1 Features of Facets Testing Accelerator

- Facets Extended Enterprise (Facets e²) implementation
- Migration to Facets from legacy systems
- Upgrade of Facets version

5.1.2 Solutions on configuration and implementation services

- Project management
- Business process assessment & workflow
- Model office planning & setup
- Configuration maintenance
- Custom code maintenance
- Data conversion & auditing
- Reporting
- Change management
- Release management
- Quality assurance
- Security management
- End-to-end Testing
- Training & Documentation
- Post implementation review
5.1.3 Hexaware offerings on TriZetto Facets, NetworX Pricer and industry expertise covers key administrative and management systems including:

- Agent & broker management
- Customer service
- Finance and Accounting
- Utilization & medical management
- Benefits management
- Claims & encounters
- Claim pricing
- Capitation
- Medicare/Medicaid
- Membership
- Premium billing/AR
- Provider setup
- Provider contracts
- Specialty lines of business
- Underwriting & actuarial processes

5.1.4 Solutions on Database management services

- Script development
- Creation of reporting views
- Development of stored procedures for processing & reporting
- DBA Services

5.1.5 Business Benefits of Hexaware’s Testing Accelerators

- Simplifies and speed up the information flow and test design process with a groundbreaking innovation where business process building blocks are broken up into true “components”.
- Automatically generates business components using application such as Facets specific metadata—this can save months in test development time as well improves on Rate of Investment (ROI).
- Utilizes pre-built components that are uploaded to the HP Quality Center environment in just minutes.
- Ensures that QA/testing teams start the test design process much sooner, during system design, accelerating time-to-deployment for Facets Systems.
- Provides automatic multi-language support to testing environments.
- Generates automated tests and test case documentation in a single step, saving a significant amount of test automation work.
- Accelerates the adoption rate for test automation because it’s easy to deploy and use.
6 Long Term Focus

With the healthcare market witnessing healthy changes, the future looks promising from the perspective of both health insurance companies and consumers. The foundation should be laid on the thought of building robust business processes in sync with information technology. This will eventually help in enhanced revenue growth, better administration and adaptability of new changes in the healthcare marketplace and consumer-satisfaction. There is no right time, the early one starts, and the early benefits start reap in.

7 Conclusion

Adapting to consumer-driven marketplace and strategy to utilize efficient Healthcare Information Technology (HIT) products will surely act as the magic-wand for healthcare businesses to overcome the hurdles posed by affordability crisis, increasing administrative and medical costs and complex provider and time-consuming membership enrollment processes. The solutions recommended above in this paper comes out of realization to put the business among the leaders league and Hexaware is committed to stay focused to achieve this goal with our helping hand always put forward for business necessities. Hexaware's service offerings are not limited to those mentioned above only but expands exceptionally vast in all healthcare insurance segments including provider, payer and pharmacy processing solutions.