Revenue Cycle Management Reimagined

Nomination: Best Achievement in Operational Excellence to deliver an outstanding Business Expansion and Revenue Growth.

Strategic Objective and Scope

30% of Cognizant's Digital Operations' revenue comes from Healthcare services today, and the offerings are spread across payer and provider health services. Revenue Cycle Management is one of the key service line offerings by Cognizant for physicians, hospitals, channel partners and medical equipment manufacturers. Cognizant offers a range of product, platform and service solutions to help our end customers recover their cost of medical services and products faster and with lesser cost.

Cognizant's overall RCM Capabilities Overview

20 Years in Business

2B+ Annual Transactions

360,000 Care Providers 7M Charges Coded

400+ Partnership with PM/EHR Vendors

150+ RCM clients

\$2B+ Payments Posted

5000+ RCM BPS FTE

\$3B+AR Handled

PM/EHR Vendors

\$3M+ Claims Handled

Business Process

- Services
- Provider Onboarding & Credentialing
 Eligibility, Referral & Pre-Authorization
- Coding & Charge Entry Services
 Claims Scrubbing & transmission
- Payment Posting, Recon & Refunds
- Payment Posting, Recon & Rei
 A/R and Denial Services
- Patient Contact Center for Self-pay



Clearinghouse Services

- Patient Access & Registration -270/271
- Patient Responsibility Estimation
 Claims Submission 837
- Claims Submission 837
 Claims Status Request 276/277
- ERA 835
- · Denial Management Analytics
- Contract Management Analytics



- Measure KPIs and evaluate benchmarks
- Price matching

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Benefits tracking
 Enterprise reporting



Optimization Consulting

- Current state RCM assessment
- Gaps identification and requirementsQuantification of business benefits and
- resource needs
 Technology solutioning and governance
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 Implementation plans and roadmap

Major shift in industry trends and How has Cognizant responded to changing trends in RCM

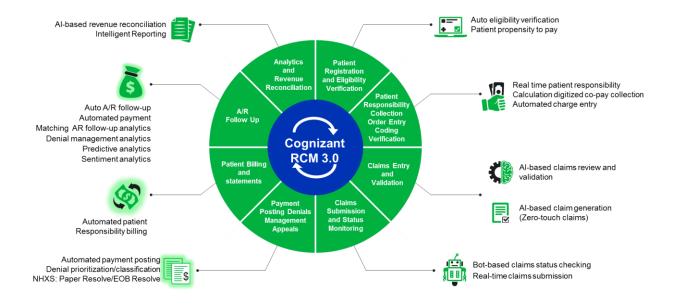
- Moving towards Business Process as a Service model (BPaaS) Acquisition of companies like Trizetto & Bolder to enhance our platform & product based offerings and shift from standalone services to affordable platform and solutions; Adding new capabilities like provider credentialing support and multiple specialties
- Readiness to adapt to ever changing payer needs and behavior Offering data science driven analytics solutions for denial management, underpayments, patient lifestyle behavior leading to medical incidents; sentiment analysis for better patient servicing; Leveraging credentialing data to understand payer contracting issues and integrate insights with the business processes
- ❖ Transition from traditional RCM to value based reimbursement model Leveraging analytics to guide the contract and service rates based on patient lifestyle and payer behavior; Integrated delivery business model with products and IT for better outcomes; shared service model for cost optimization
- Bringing on disruptive changes in the commoditized market of RCM through digital intervention —Leveraging our IT arm to drive enhancement to client platform, implementation of robotics automation services to develop 100+ automation solutions, process reimagine to reduce voice based activities by using more websites, physician portals etc,

Our unique value proposition - RCM REIMAGINED - RCM 3.0

Technology and payment trends are reshaping the revenue cycle for healthcare providers. Providers that want to improve yield must think about revenue cycle management in a whole new way, which we call RCM 3.0.

SERVICES

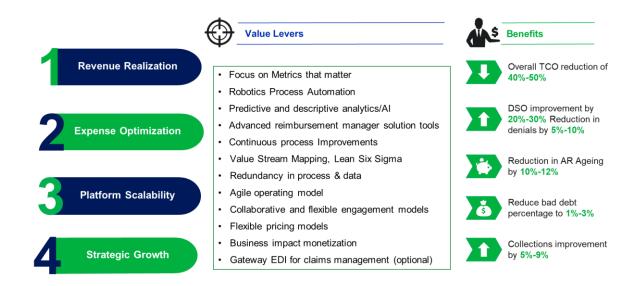
In contrast to traditional RCM, Cognizant's RCM 3.0 envisages ownership of improved performance across all aspects of process and organization, places the patient experience at the center of all collections activities, and leverages analytics and technology predictively. Our RCM 3.0 addresses the industry's need for value based services



PROCESS IMPROVEMENTS IMPLEMENTED IN RCM SERVICE LINE WITH PROVEN RESULTS

The RCM 3.0 framework gives us a robust foundation for business scalability and growth for Cognizant and create significant value for our clients by realizing faster cash along with cost optimization.

Below is the summary of our value levers implemented and benefits delivered for our clients.



While the focus is on exploring new avenues and methods of value creation, our consistent endeavor is to identify best practices across the service line for replicability and reusability of assets across accounts.

Our DBO approach integrates our learnings across clients on all components of value chain.

The DBO Approach is designed to prioritize initiatives that improve business outcomes for our clients



REAL TIME IMPLEMENTATION OF RCM 3.0 TO IMPROVE CLIENTS BUSINESS OUTCOME



- · Sluggish cash flow
- High claim reject rates
- Administrative expenses

Solution:

RCM service providers leverage scale and learning from all its collective set of clients to implement best practices to maximize collections.



Monitoring the entire claims process

Impact:

- Lagging accounts receivables
- High administrative expenses

Solution:

Pay-for-performance. Real-time visibility into key confidence metrics

Under payment/ Denial management

Impact:

- · Lost revenue
- High cost of appeals
- Payer contract compliance

Solution:

Analytics to identify where and why denials occur. Identify underpayments and automate appeals

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Patient Collections

Impact:

- Reduced revenue realization due to higher deductibles (HDHP plans)
- High cost of collections

Solution:

Real-time analytics provide patient price transparency and the ability to accurately collect in the front end of the process

Recognizing trends

Impact:

- · Slow payment
- Increased administrative time and expenses

Solution:

Flag routine denials of claims for a certain procedure or code can greatly improve a provider's short-term and long-term revenue cycle – cash acceleration

BENEFITS

- ❖ Accelerated collections for clients up to \$150+Million
- ❖ Bad Debt reduction up to 3%
- Collections% improvements in the range of 5% to 9%
- Total cost of operations reduced by 40% to 50%
- RCM service line has grown by 67% in last 2 years



Recognitions and Testimonial

LEADER



Everest Healthcare Provider RCM BPO PEAK Matrix - 2018 LEADER & STAR PERFORMER

Everest Healthcare Payer BPO PEAK Matrix - 2018 WINNER'S CIRCLE

Healthcare Operations Services HfS Blueprint RFI - 2017



Client Testimonial

An unbelievable finish team....I am blown away by our final number and will be sending the flash later this morning. There isn't a thank you big enough to express the gratitude that I feel to each of you and your teams for all of the focus, effort, and downright hard work that you each put in to not just make our goal, but beat our goal! Rest up and enjoy your day as we say hello to 2018 – Market Director, leading RCM client

Over the course of the year this team has worked tirelessly to focus on ways to meet the implementation demands associated with our strong sales growth as well as focus on improving operational and delivery efficiencies to decrease internal cost and increase overall margin profitability - Allan Latham, Vice President, Trizetto Provider Solutions

WAY FORWARD - RCM 3.0

With a projected YoY growth of 20-25%, there will be a quantum shift in how our clients are moving from traditional RCM based on labor arbitrage to an approach based on new-age digital technologies such as sentiment analytics, machine learning driven denial prediction, artificial intelligence for decision making, and Block chain transmitted in an encrypted, Electronic Data Interchange set up. This change will have significant impacts such as 1) Reduction in administrative costs due to a digitized downstream process 2) Fewer doctor visits due to introduction of IoT resulting in value-based healthcare 3) Higher patient satisfaction 4) Shorter time to collect through higher auto adjudications.

Cognizant is at the forefront of this shift with its wide-ranging suite of technological assets and domain expertise.