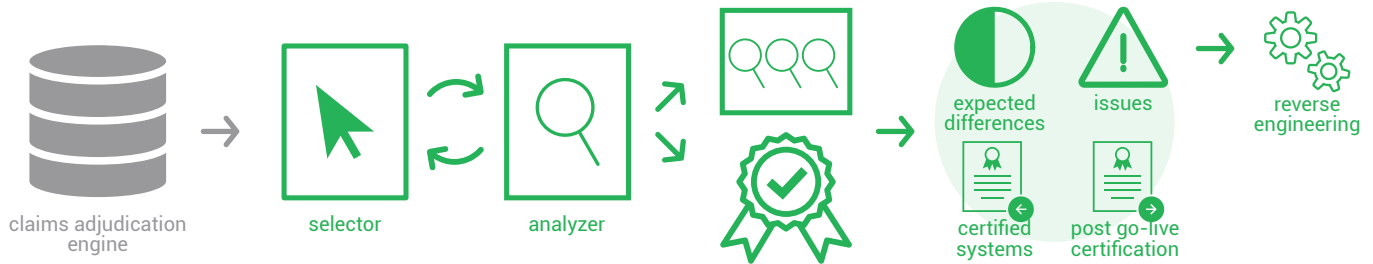




gx|claims[®]

Benefit Load Certification, Claims
Generation and Claims Testing



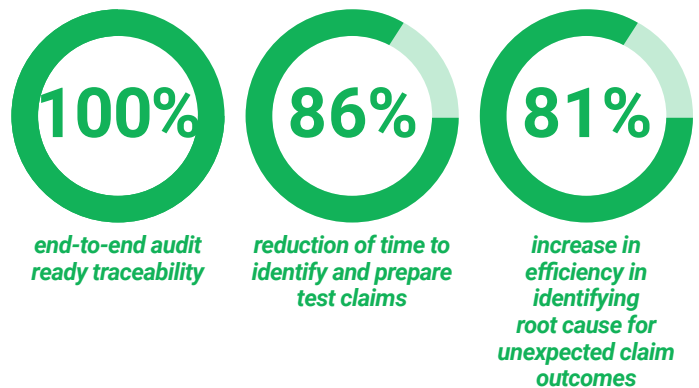
GxClaims® is a demographic and clinical selection, benefit plan certification, claim adjudication analysis and integrated defect tracking process designed to validate claims processing behavior and increase efficiency in identifying root cause for unexpected claims adjudication outcomes.

Medical & Pharmacy Benefits Management Application

GxClaims® brings to the industry new innovation, methodologies and automated tools that select, analyze and validate claim behavior and data to provide traceable end-to-end audits; dramatically increase efficiencies in identifying root causes for unexpected claim outcomes; and reduce time spent identifying and preparing test claims.

Key features of GxClaims® include:

- Define, test and validate claim behavior within an adjudication system for demographic and/or clinical scenarios
- Augment targeted scenarios with randomly selected claims data providing for breadth and depth of testing
- Compare and analyze claim outcomes across source and target benefit plans or adjudication systems
- Integrate claim analysis with benefit plan configuration
- Profile claim outcomes with bulk tagging and tracking capability
- Comprehensive QA to support high volume
- Medical and pharmacy claims testing - synthetic claims generation testing and targeted functional claims based testing



Points of value:

- Increased predictability of pricing performance
- Increased predictability of payout performance
- Reduce your business exposure and SME hours
- Increase issue resolution and client satisfaction

To unleash the full power of GxClaims®, use with GxCapture™ (intent capture) and GxCare® (benefits coding).

gx|capture™ gx|care® gx|claims®

GxClaims® - Simplified defect and test processing.

