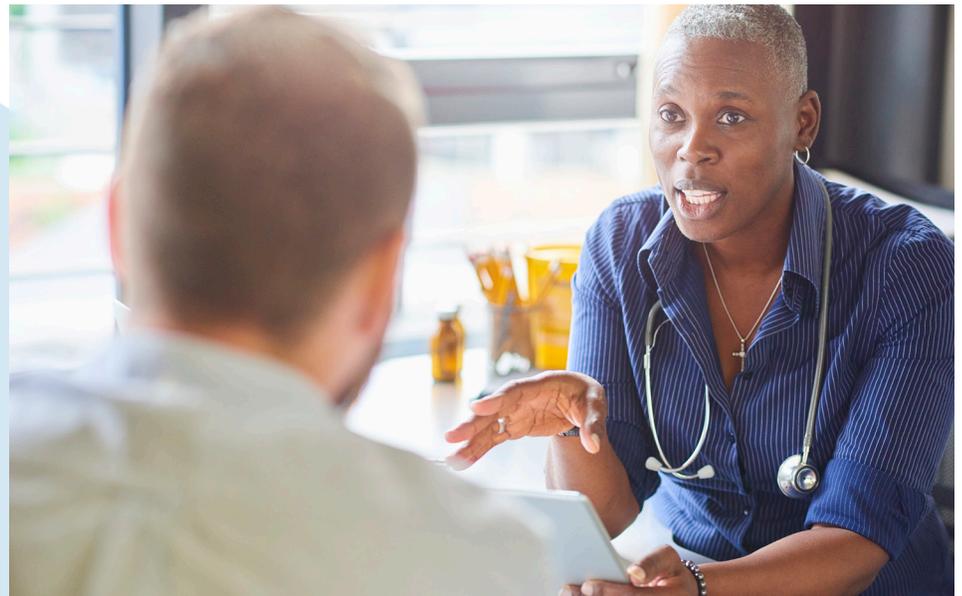


Claims automation and processing engine

Auditable, scalable, secure and cost-effective approach to claims processing.



Benefits

- Accelerate claims processing
- Reduce human error
- Determine predictable cost, scaled to volume
- Increase capacity and reduce claims backlog
- Enhance security
- Improve claimant experience
- Increase productivity and improve morale of staff

As the volume of claims builds, agencies often face a dual threat of increasing their throughput of claim adjudication while losing significant portions of both the staff on which it depends and the budgets it uses to replenish and train them.

Additionally, claimants are faced with the time consuming and expensive burden of gathering an exorbitant amount of information to prove coverage eligibility.

Agencies need a way to automate and optimize highly repetitive and manually intensive tasks without disrupting underlying business processes and systems.

Claims Processing as a Service (CPaaS)

Perspecta's claims automation and processing engine provides agencies with business process automation enabled through software robots—also known as

robotic process automation or RPA—to radically increase productivity within current workflows and governance structures. This solution can be tailored to integrate with legacy systems and has minimal immediate impact on legacy technology environments.

Our engine serves as a CPaaS solution that can reduce backlog and cycle time for claim processing; frees staff from mundane and repetitive tasks freeing up more time to spend on critical tasks; standardizes the adjudication process; eliminates manual errors and re-work; accelerates processing; and lowers the risk of exposing business processes to security and data breaches.

Additionally, a primary focus of the managed service is to optimize the customer/claimant experience. Much of the burden of proving eligibility of the claimant will transfer to Perspecta experts. Evidence will be obtained through bot-induced application

programming interface interactions which saves the claimant both the time and expense of obtaining copies of various artifacts such as licenses and certificates.

How it works

Perspecta has coupled more than 25 years of claims processing experience with leading-edge automation technology to make this managed service available to our customers. This advanced, RPA-supported service can decrease claims processing time to hours instead of months and at a fraction of the cost to hire staff.

Our technical approach to deploy our CPaaS capability follows six rigorous and repeatable steps:

- Select the business use case
- Map the business process
- Identify opportunities for acceleration
- Develop a proof of value (POV)
- Evaluate POV success through comparison of results with known metrics for the legacy, pre-automated process
- Scale to address additional processes through automation reuse and the build-out of a process automation platform to drive

The successful execution of these steps will achieve accelerated claims cycle time, increased productivity of staff, improved quality of results and ensured compliance.

Additionally, our solution can be tailored to integrate with legacy systems having minimal immediate impact on legacy technology environments.

The pricing model is designed to complement the sustainability and scalability of our solution. Moreover, our solution provides the flexibility to scale up/down depending on the demands of the claim volume and/or evolving legislation or expectations to better serve the claimants.

Why Perspecta

Perspecta was formed to take on our nation's most important work. We are founded on a diverse set of proven and trusted capabilities and skills, bound together by a single promise: to never stop solving our nation's most complex challenges.

We partner with health organizations from every part of the industry—providers, payers and promoters—including those serving civilian and military end users globally.

We currently maintain Medicare shared-system applications and process 1.2 billion claims annually, manage 230 medical treatment facility (MTF) medical logistics systems deployed worldwide, provide real-time visibility into Veteran Affairs (VA) medical assets, support VistA's more than 80 applications, and monitor services for more than 220 applications at 148 MTFs deployed worldwide.