



Newgen's Appeals Solution

Optimized for Medicare, Medicaid & Commercial Markets



Appeals
Solution

Grievances &
Complaints
Management
Solutions

Complaints
to Medicare

External
Review

Member &
Provider
Service
Inquires

Provider
Disputes

Complaints,
Appeals &
Grievances
Product
Suite



Building Healthcare with Artificial Intelligence

Use the integrated **AI-enabled Appeals Solution, built on NewgenONE**, to adhere to the strict regulations when filing appeals, particularly under the oversight of the Centers for Medicare and Medicaid Services (CMS); however, we have solutions for virtually all types of insurance and managed care. Leverage new-age technologies, such as predictive decision-making, artificial intelligence (AI), generative AI (GenAI), robotic process automation (RPA), and machine learning (ML), to transform the appeals process by adapting to changing regulations, ensuring ongoing compliance and optimization.

Integrate intelligent document classification and processing to extract information and classify documents based on their content and context, significantly improving the accuracy and speed of handling these appeals surrounding claims and clinical reviews. Enhance operational efficiency and compliance adherence, ensuring better outcomes for healthcare payers, members, and providers. Streamline the approach to not only meet regulatory requirements, but also enhance the overall experience for all the involved stakeholders.



Core Capabilities of Newgen's Appeals Solution



Unified System

Capture and create new cases from all intake channels, including custom web portals, mailrooms, and faxes. Ensure comprehensive case management by integrating all sources of case submission into a single system



Intelligent Mailroom

Deeply integrate with **Contextual Content Services** (Newgen's ECM platform) and advanced document processing, thereby enabling seamless management of incoming documents and correspondences. AI will identify the presence or absence of required forms and even search to expedite appeals based on review of the appeal content, ensuring these short turnaround cases are surfaced immediately upon receipt versus losing critical processing time



Automated Case Enrichment

Pull eligibility details of members and providers, along with claim and authorization information, from the core system. Enhance case management by ensuring all the relevant data is current and accurately reflects eligibility status. Enable business rules to run sooner, ensuring cases are in compliance. Automatically predict the type of case through the case categorization assistant, as sufficient details are extracted, enriched, or added by the intake team. Seamlessly open and route dual cases that include a grievance, ensuring proper handling. Triage provider claim disputes to the appropriate solution, distinguishing them from appeal cases





Duplicate Check

Detect and flag duplicate entries to prevent fraudulent activities. Furthermore, implement mechanisms to identify closed cases with similarities to active ones and offer insights for quick resolution, thereby minimizing duplication and redundancy. Ensure duplicate submissions are avoided, separate issues are opened in another case or add incoming additional information to an already open case with ease



Intelligent Case Assignment

Distribute cases intelligently based on the expertise and skill sets of coordinators. Manage escalations and prioritize cases to optimize resource allocation and resolution of high-priority issues. Alternatively, utilize the “Get Next” functionality to assign the oldest case first while leveraging AI to triage expedited cases as soon as they arrive



Advanced Processing Rules

Identify untimely filing and support the management of multiple claim lines, among thousands of other preconfigured business rules



Case Collaborations and Redirects

Enable clinical nurses, medical doctors and other operational areas such as claims to review cases using one consolidated, unified platform. Foster collaboration across departments and redirect cases as needed, ensuring seamless communication and resolution of complex issues. Case research is automatically captured to ensure your audit readiness



Detailed Reporting & Analytics

Generate productivity reports to identify bottlenecks and training needs. Fetch operational reports to streamline workflows and effectively manage the workforce. Adhere to regulatory mandates while utilizing compliance reports. Tailor business reports to meet specific requirements or integrate custom modules. Leverage Newgen’s business intelligence for your operational and regulatory reports, such as CMS Audit Universes



360-degree Case Visibility and Oversight

Use the comprehensive dashboard to conveniently manage all cases of a member or provider. Get periodic status reports and case updates while keeping business managers duly informed



Automated Correspondence

Intelligently generate CMS-compliant letters without any manual intervention. Leverage the power of built-in omnichannel **customer communication management** to communicate with the members and providers through letters, faxes, and emails. Queue up tasks for calls to ensure timely communication with members and providers. Manage written and oral notification timeliness seamlessly through the tool. Escalate notifications when needed to maintain compliance and service standards



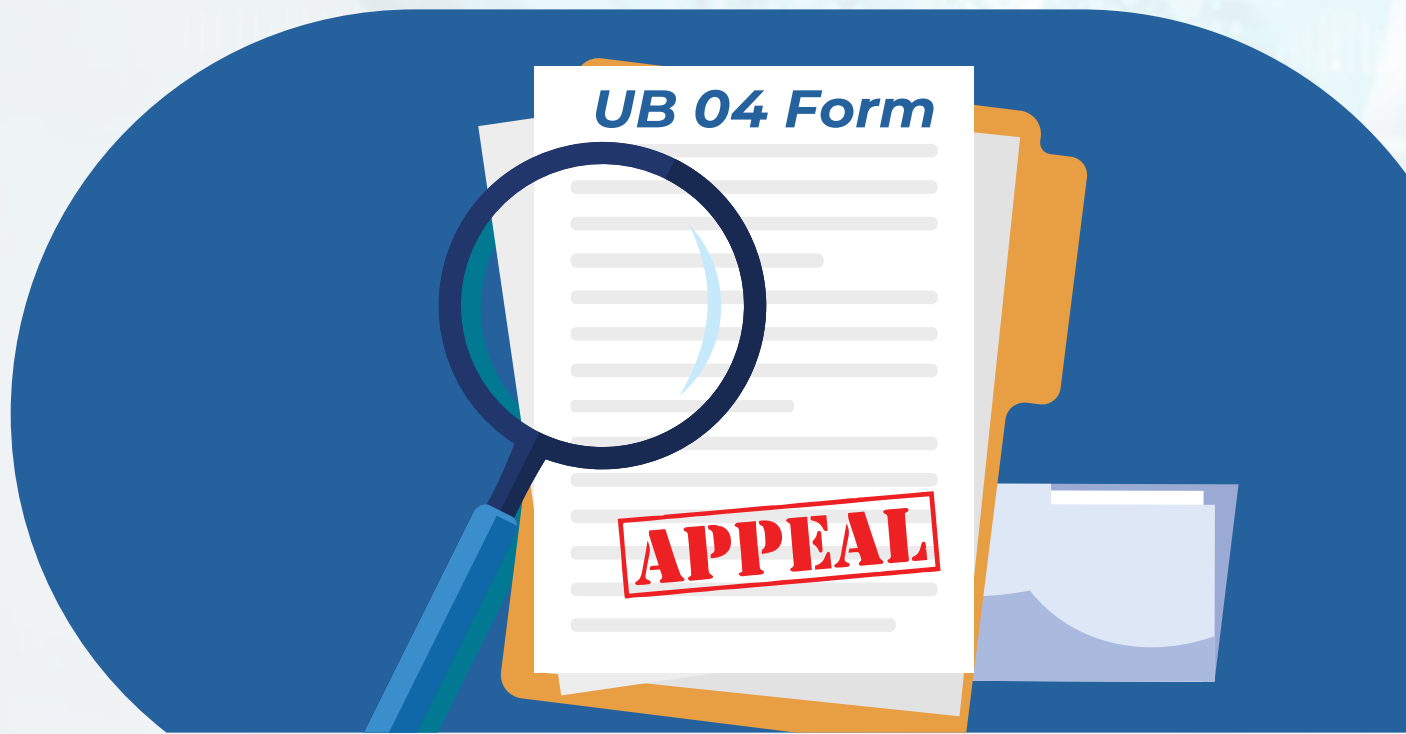
Detailed Case History

Capture all decisions, notes, and exceptions for future reference, ensuring accountability among the case workers and facilitating seamless case management. A case packet is created at the end of each case file, ensuring you are audit-ready or to send to an independent/external review entity like Maximus

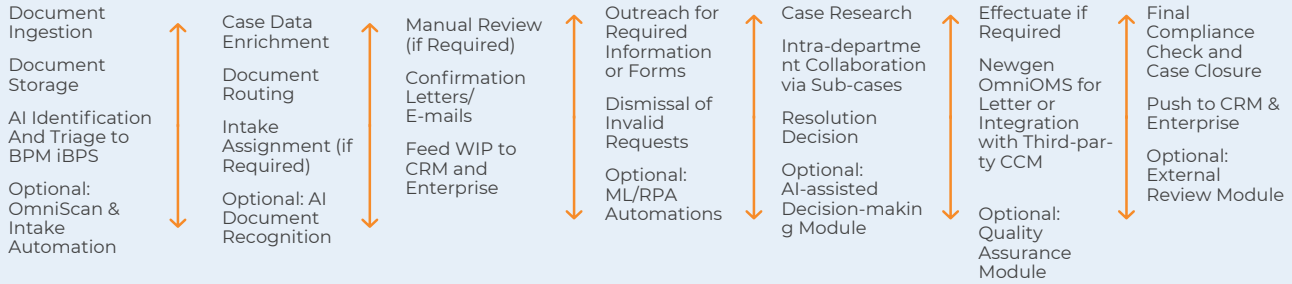
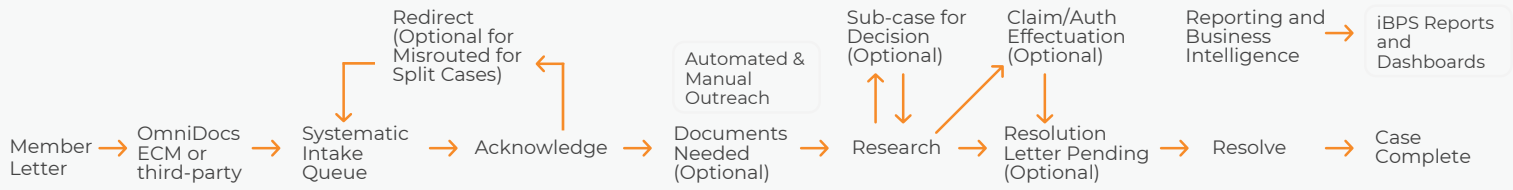


Quality Assurance Sampling

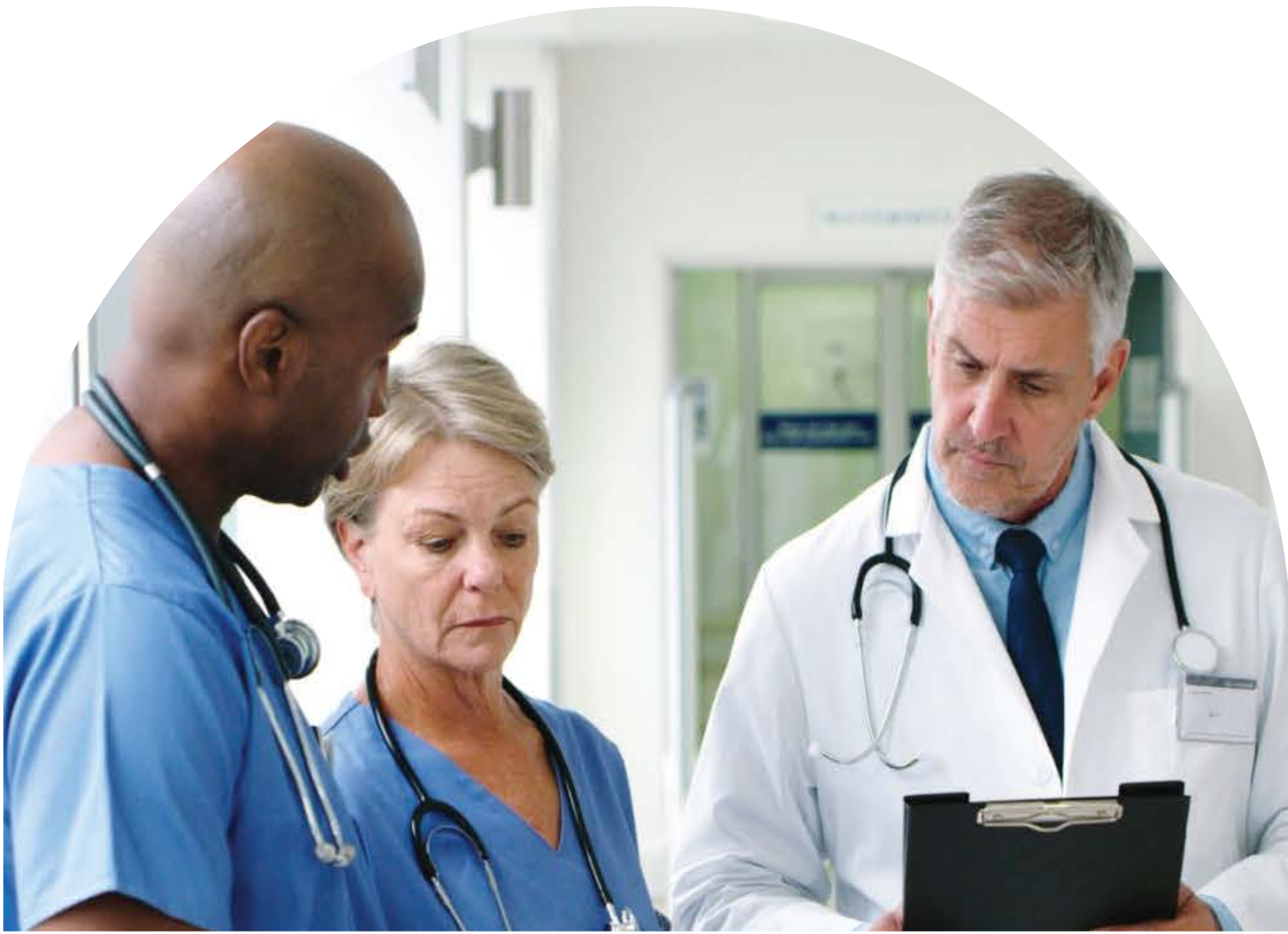
Apply advanced sampling algorithms for 'pre-QA' and 'post-QC' to evaluate coordinator efficiency and work accuracy. Utilize a detailed checklist within the system to ensure thorough adherence to research points and accurate decision-making. Assign scores for each correct research method executed to evaluate coordinator performance. Facilitate bi-directional communication between auditors and researchers to address necessary suggestions and corrections



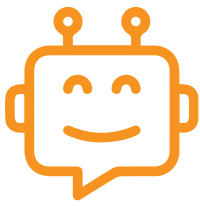
NewgenONE Complaints, Appeals, and Grievance Solution



Payer Platforms, APIs, Data → **OmniOMS CCM or Third-party** → **Letter from CCM** ▶ **to Member**



Key Differentiators



GenAI Capabilities

GenAI Capabilities

- Ensure lightning-fast processing of content, application development, and advanced content automation, empowering you to stay ahead of the curve
- Leverage NewgenONE Marvin to swiftly scan through documents, delivering detailed insights and summaries in real time
- Ask Marvin a question for the data you need, and get it right away, making your workflows smarter and smoother with remarkable speed instead of searching through the documents



AI-based Decision-making

AI/ML Decision-making

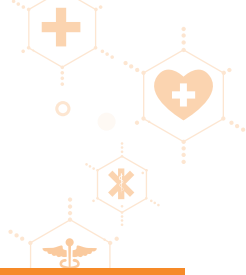
- Drive accurate decision-making, predict inventory trends, and streamline document identification, ensuring you make informed choices at every step
- Use integrated AI-based assistive decision models to handle the high inventory volumes while complying with regulatory guidelines
- Identify, classify, and process incoming documents automatically into various categories, including 'Waiver of Liability' (WOLs), 'Appointment of Representative' (AORs), 'standard,' and 'expedited'



Smart Auditing

Smart Auditing

- Proactively perform internal audits and identify outliers before regulatory audits, ensuring your organization is always audit-ready
- Manage all your auditing configuration using an intuitive interface



Let AI Do the Heavy Lifting

AI-ML

Assistive Decision-making for Appeal cases

Enable research coordinators to predict whether an appeal will be upheld or overturned, providing a confidence percentage to guide better decisions and improve star ratings

Inventory Prediction - Workforce Management

Forecast appeal inventory with AI, providing low, medium, and high estimates. Enable the operations team to plan workforce availability for varying inventory levels

Smart Intake - Automated Document Classification

Automatically classify incoming AOR/WOL records and link them to original cases using file numbers and member IDs, speeding up processing and enhancing the member experience

Automated Standard & Expedite Identification

AI categorizes incoming appeal cases as standards or expedites and assigns them to coordinators for the prompt processing of the expedited cases

Gen AI

Document Summarization & Realtime Interaction

Use Marvin—Newgen's GenAI layer—to summarize medical records and EOB and allow research coordinators with real-time interaction for quick access to critical information

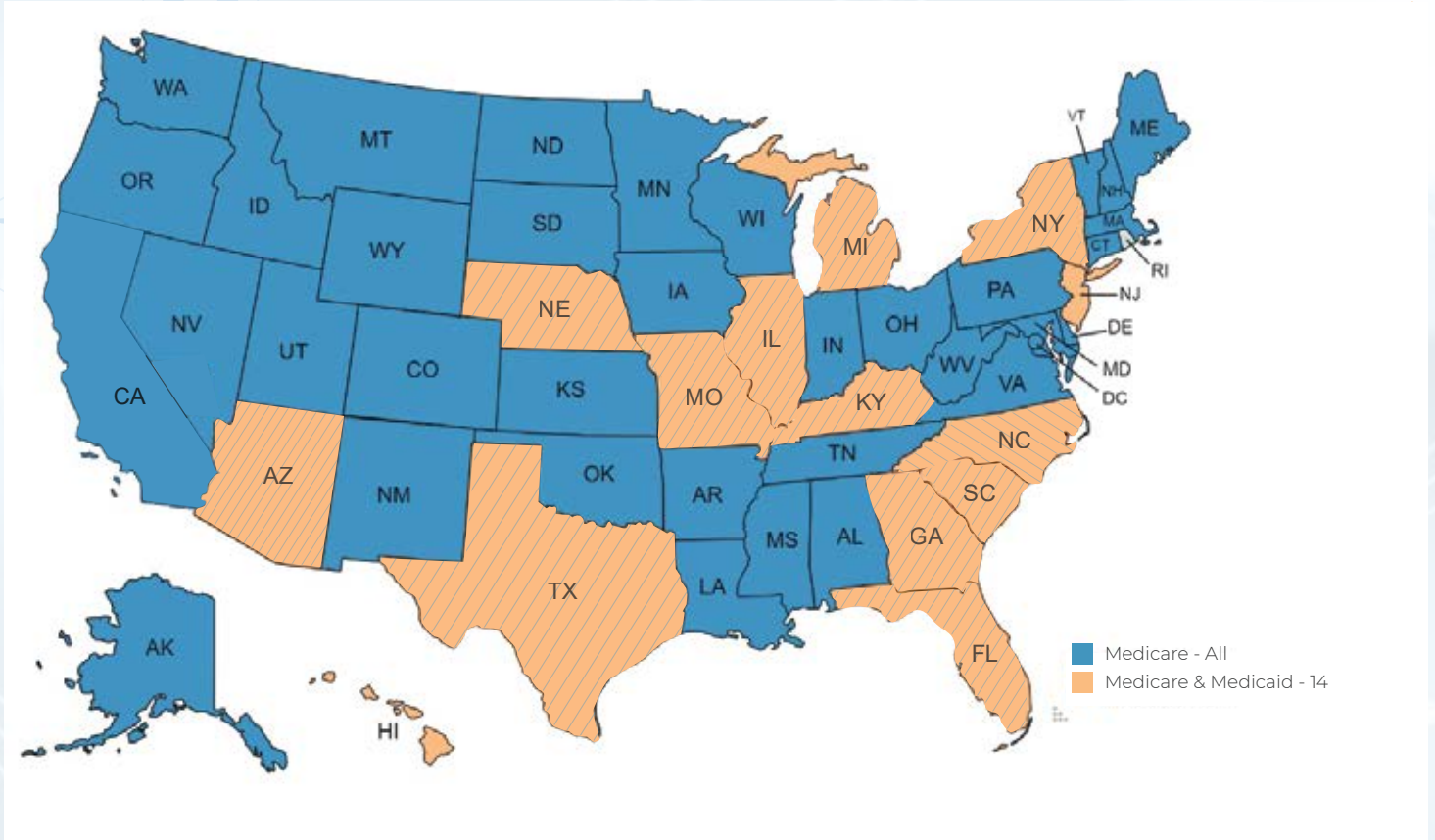
RPA

Untimely Filing and Automated Dismissal

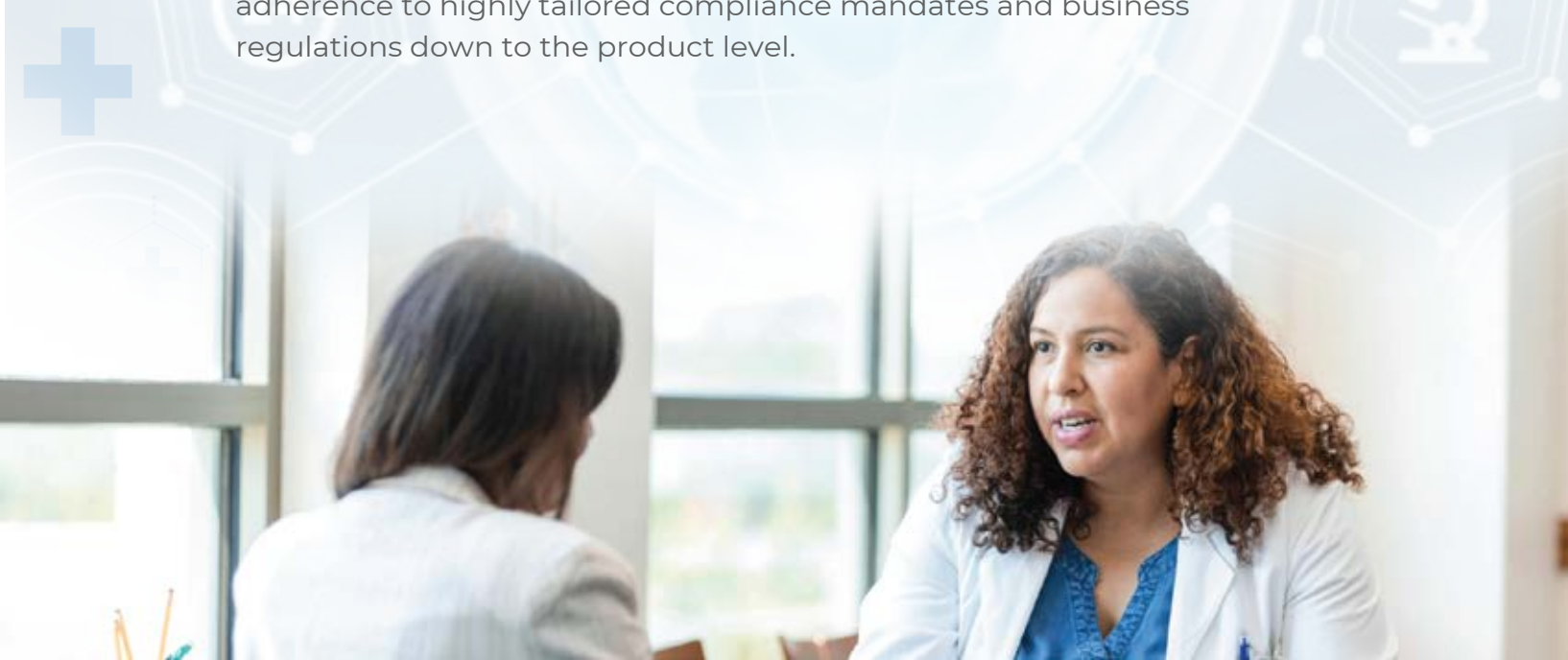
Leverage RPA functionalities to automatically dismiss appeals that are filed late or lack timely document submission



From a Few States to All States, Newgen is Committed to Your Success



Newgen Health Solutions offer extensive Medicare coverage nationwide, services across 14 Medicaid states and customized products for ACA/exchange and commercial sectors available now. Our solution is designed for efficient, cost-effective expansion into new markets, ensuring adherence to highly tailored compliance mandates and business regulations down to the product level.



Quantitative Benefits of the Solution

Case Processing & Resolution Parameters

215% more efficient vs legacy systems

Reporting & Auditing Parameters

242% more efficient vs legacy systems

Agency & Compliance

340% more efficient vs legacy systems

Compliance Excellence

CMS, state, internal & external audit validated

STAR Rating

1.5 increase vs pre-implementation



Why Choose Newgen's Solution?



Better Decision-making

Empower smarter decisions by ensuring consistency and improved performance through better interrater reliability and STARS outcomes



Optimized Resource Management

Maximize resource efficiency to reduce burnout and boost productivity without overburdening staff



Strengthened Team Collaboration

Foster better collaboration for timely, transparent, and auditable decision-making across teams



Real-time Performance Monitoring

Offer continuous, real-time oversight of regulated cases, ensuring prompt actions and accuracy



Enhanced Operational Efficiency

Drive cost savings and boosts productivity by streamlining processes, achieving a 3:1 ROI at minimum



Robust Compliance Assurance

Ensure strict compliance with regulations to avoid penalties, reputational damage, and legal risks

Scan here
to learn more about
Newgen Health





About Newgen

Newgen is the leading provider of AI enabled unified digital transformation platform with native process automation, content services, and communication management capabilities. Globally, successful enterprises rely on Newgen's industry-recognized low code application platform to develop and deploy complex, content-driven, and customer-engaging business applications on the cloud. From onboarding to service requests, lending to underwriting, and for many more use cases across industries. Newgen unlocks simple with speed and agility.

Request a Demo

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