

# Newgen Health

*AI-powered, Low-code Enterprise Platform for Healthcare*

A large, glowing orange "AI" graphic composed of circuit-like lines, positioned centrally over a hand. The hand is split vertically, with the left side being orange and the right side being blue. The background is a dark blue space with a network of glowing lines and nodes, and a large, faint circular graphic element.

# The Fundamental Shift

The US Healthcare is undergoing a fundamental shift from volume-based care to value-based care. It is reshaping the entire healthcare ecosystem, from fee for services to fee for outcomes to value-based care delivery models to provider-payer relationships to patient experience and patient engagement. Unfortunately, the payers often find themselves irretrievably entrenched in sustaining business-as-usual (BAU) operations and volume-driven models. While value & care outcomes are emerging as healthcare's new currency, Payer operations obsessed with billing, not outcomes, risk relegating organizations to a vicious cycle of missed opportunities.

## What Does It Mean For You?

Think about how preparedness and organizational competency would have placed your organization in a great position the last time this happened, say during the managed care revolution or the ACA reforms. Seeing it coming is one thing; being prepared to thrive in it is a different ball game. The equation on the ground is changing rapidly:

- ◆ Shift from traditional fee-for-service reimbursements (that incentivize high-volume care) to bundled payments, accountable care organizations (ACOs), and pay-for-performance that tie payment to quality outcomes and efficiency.
- ◆ Shift from cure-based care to preventive care, chronic disease management, and collaborative care
- ◆ Shift in quality metrics to steer patients towards high-quality, cost-effective payers and providers
- ◆ Shift in member population demographics and behavior that demand better engagement, transparent systems, and digital experience that they have become accustomed to in other parts of their lives
- ◆ Shift from standard contracts (that make up 80% of the whole) to value-based contracts that fundamentally change the way payers engage with members and providers

# Speaking of Preparedness...!

It is not without reason that healthcare payers find themselves unable to tackle such a shift. The challenges are deeply rooted in the way processes and systems have been built over time:

- ◆ **Legacy Systems and Processes:** Many payers have long-standing legacy systems and processes that are built around fee-for-service reimbursement models and volume-based metrics. These systems need a significant overhaul, which is costly and disruptive.
- ◆ **Manual and error-prone operations:** Payer operations are replete with manual processing of information and documents, severely limiting their ability to digitally engage their members and providers. This not only slows down their operations, frustrating everyone involved but also causes errors that lead to millions of dollars in compliance and CMS penalties.
- ◆ **Data silos and interoperability issues:** Payers often struggle with data silos, where critical patient and provider data is spread across multiple systems and lacks interoperability. This makes it arduously difficult to effectively measure quality, coordinate care, and identify opportunities for value-based interventions.
- ◆ **Organizational and Technological Rigidity:** When systems, processes, and behaviors are deeply entrenched in the traditional model, change feels insurmountable. Rigid and monolithic systems exacerbate the situation.
- ◆ **Widening talent gap and limited resources:** Implementing value-based care models often requires significant investments in technology, analytics, care management programs, and other resources.

*Making the transformation is a daunting and long-drawn undertaking that few have an appetite for in the absence of an efficient, nimble, and future-proof solution. Being prepared mandates future-ready technology. A fragmented point-solutions approach doesn't work.*





# *Think Software Platform. Think Newgen Health.*

Your quest ends right here. At Newgen Health, we have built the right products and platforms that empower you to transform your operations and tackle business and regulatory challenges. The good news is that the Newgen Software Platform is built on low code and can propel your compliance-driven, care-centric business forward. Even better news is that it is powered by AI (and Gen AI), which means expect speed and automation at scale.

It gets even better. Newgen Health vertical Products and horizontal Platforms come equipped with deep-domain, workflows focused, ready-to-deploy software, that you can configure and customize to speed up deployment & GTM. It is built on top of our NewgenONE low-code platform that helps you drive end-to-end automation at scale. It drives intelligence into operations for rapid innovation and responsiveness.

## *What Do You Get with Newgen Health?*

Newgen Health offers an integrated suite of capabilities that enable you to engage with members and providers with digital experience backed by automated AI-powered operations that deliver value-based outcomes with digital speed. While we offer individual modules and products, we've combined our industry-leading tools into 2 core packages:

- ◆ **Member Lifecycle Management** – All tools and accelerators needed to work with your core administration platform to onboard your members and drive managed care success
- ◆ **Provider Lifecycle Management**- All tools and accelerators needed for everything from onboard your provider to overlaying the core administration & claim platform as your Provider Data Management tool, feeding your value-based care payment models

# Member Lifecycle Management

**Enrolment Service Request Management** - to offer real-time enrolment request fulfilment for members with top-notch digital experience, which includes Mobile and Portal Medicare Enrollment intake and post-enrolment service requests.

- ◆ *Mailroom Automation (Scanning, OCR, ICR, Automation)*
- ◆ *Enterprise Case Management (ECM) Identify, Route, Triage*
- ◆ *Enrollment Case Management including Member 360*
- ◆ *Billing Case Management including Member 360*
- ◆ *EMB Offline Customer Service including Member 360*
- ◆ *Medicare Paper to Electronic AEP Application Conversion*
- ◆ *CCM for EMB Communications*
- ◆ *QA for EMB*
- ◆ *Reporting for EMB*
- ◆ *Medicare Mobile App for Sales Agent Mobile Medicare Enrollment*
- ◆ *Sales Case Management including Member & Provider 360*
- ◆ *Any Member Portals?*
- ◆ *Any other queue-based workflows historical or currently active?*



**Digital Appeals and Grievances** to efficiently manage members' appeals, grievances, and complaints, ensuring compliance with regulatory guidelines and CMS standards.

- ◆ *Mailroom Automation (Scanning, OCR, ICR, Automation)*
- ◆ *Enterprise Case Management (ECM) Identify, Route, Triage & Data Enrichment*
- ◆ *ECM & Intake Quality Audit Tool (PreClose and Post-Close Capabilities)*
- ◆ *Offline Customer Service (Inquiries) including Member & Provider 360*
- ◆ *Appeal Case Management including Member & Provider 360*
- ◆ *Grievance Case Management including Member & Provider 360*
- ◆ *External Case Management (IRE, Legal, DOI, CMS, ALJ, MAC, State, etc.)*
- ◆ *Clinical Case Management (Clinical, Nurse, MD, Pharmacy, Quality of Care, Retrospective UM)*
- ◆ *Manual & Automated Claim Adjustment Processing*
- ◆ *Payor & Vendor SubCase Management (Enterprise-wide Connectivity)*
- ◆ *CMS CTM Integrated Case Management Including Member & Provider 360 with Daily HPMS Download/Upload*
- ◆ *Quality Assurance for Case Management (PreClose and Post Close Capabilities)*
- ◆ *CCM for Case Management plus Portal, CRM, IVR and more integrations*





# Provider Lifecycle Management

Comprehensively manage the entire lifecycle of the provider's engagement and performance with the payer organization and members, which includes:

- ◆ **Provider Network and Contract Management** will enable payers to create a high-performance network of hospitals, clinics, physicians, and specialists. It is fundamental to balance member needs, provider quality, and cost-effectiveness for the shift from volume to value while driving compliance in provider network accuracy and directories.
- ◆ **Provider Credentialing and Configuration** to perform fast and accurate due diligence on provider quality and performance before inducting them into the network.
- ◆ **Provider Data Management** to keep a well-organized "address book" of providers in the network, which is critical for member experience as well as compliance with the "No Surprises Act" and network directory accuracy. Perfect your provider panel and drive swift resolution of Risk Adjustment and Care Gap management activities.
- ◆ **Provider Self Service Portal** to make providers self-sufficient for their various service requests and enable streamlined communication and information exchange for rapid clarity/corrections in network data.
- ◆ **Provider Dispute Resolution** enables payer and provider to resolve disputes before they become an appeal or grievance, which impacts payers star ratings and various other compliance-related factors.



***Newgen Health offers you the ability to transform your operations and comes equipped with cutting-edge capabilities:***

- ◆ *Automated member enrolment journey*
- ◆ *Fast AI-driven decisions in credentialing, contracting, and complaints management*
- ◆ *Digital integration with partners, agencies, and network of providers for real-time outcomes*
- ◆ *Accelerated time-to-outcomes across the board with end-to-end workflow automation*
- ◆ *Digital document and media ingestion and processing for real-time decisions*
- ◆ *Digital, omnichannel access to members, providers, and partners through portals*
- ◆ *Automated administration and traceability for compliance*
- ◆ *Rapid change management and innovation with low code*





# Why Newgen Health?

Newgen offers a platform-based approach that allows you to experience the digital speed of change while keeping you ahead of time with a comprehensive set of automation technologies.

- ◆ ***Unified Platform Architecture: NewgenONE is a unified architectural stack that enables fully automated end-to-end processes, AI-powered decisions and operations, personalized omnichannel engagements, and agility for innovation through low code.***
- ◆ ***Integrated Portal: One-stop solution for all member, provider, and payer needs with integrated interfaces and workspaces.***
- ◆ ***AI and rule-driven automation: Newgen Health leverages our cutting-edge AI and rule-driven platform to enable real-time, accurate, and smart decisions and outcomes.***
- ◆ ***No more build v/s buy dilemma: Newgen Health is ready-to-deploy with deep-domain models built on our decades of experience serving large organizations globally. The speed of change and customization enabled by our ahead-of-time low-code capability enables you to build your operations the way you want, giving you the formidable competitive advantage of differentiated offerings and processes without overhauling the whole infrastructure.***



## Did You Know?

- ◆ *Newgen is a Leader in The Forrester Wave: Content Platforms, Q1 2023*
- ◆ *Newgen is a Niche Player in Gartner Magic Quadrant for Enterprise Low-Code Application Platforms, 2023*
- ◆ *Newgen is recognized in Gartner's Market Guide for Content Services Platforms 2023*
- ◆ *Newgen is a Strong Performer in Forrester Wave: Robotic Process Automation, Q1 2023*
- ◆ *Newgen is a Business Automation "Leader" in the 2021 Aspire Leaderboard for CCM*



### 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.

### For Sales Query

AMERICAS: +1 (202) 800 77 83  
CANADA: +1 (202) 800 77 83  
AUSTRALIA: +61 290 537174  
INDIA: +91 11 407 73769  
APAC: +65 3157 6189  
MEA: +973 1 619 8002, +971 445 41365  
EUROPE: +44 (0) 2036 514805

info@newgensoft.com  
www.newgensoft.com

