Newgen's Claims Repair Solution

Automate Correction I Accelerate Reimbursement I Maximize Efficiency

Real Cost of Claim Dropouts

Claims dropout is a persistent issue in U.S. healthcare. As payer systems become more advanced, the reasons claims fail to pass through adjudication have become more complex. Every pended claim adds cost, risk, and administrative burden, while directly affecting provider trust and member satisfaction.

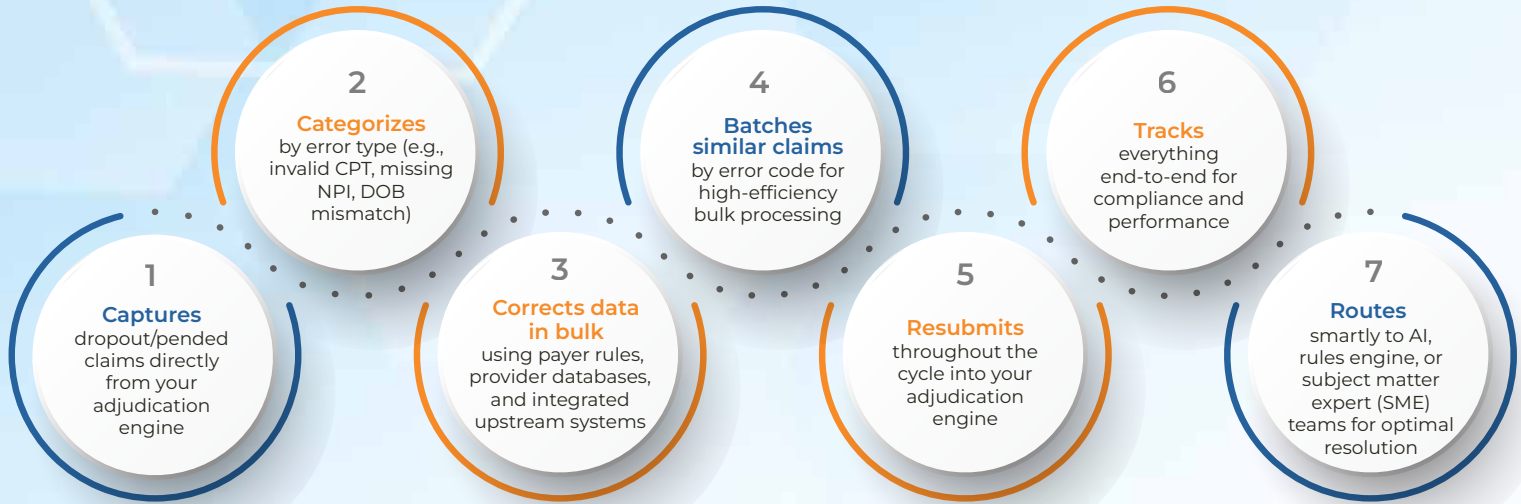Whether it's missing data, invalid codes, or mismatched fields, dropout claims translate to:

- Revenue leakage
- Costly denials and appeals
- Increased turnaround time and rework
- Strained provider relationships and escalations
- Penalties from untimely filing or missed deadlines

These aren't new problems, and most payers already have processes in place to address them.
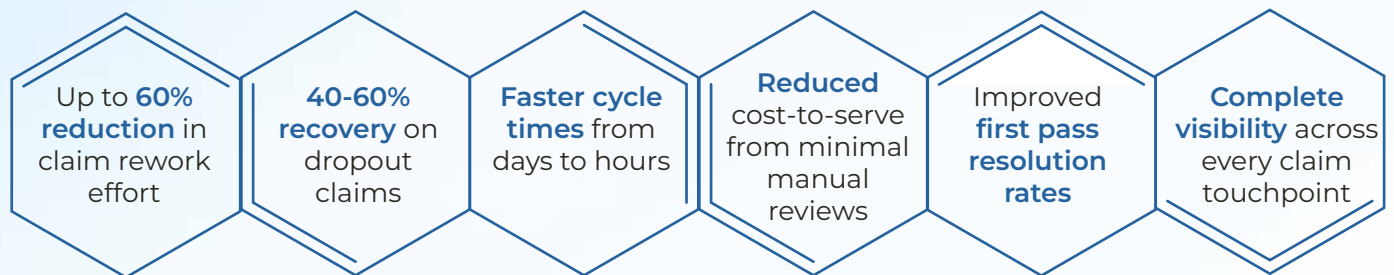
Smarter Claims Management and Faster Resolutions with Newgen's Claims Repair Solution

Newgen's Claims Repair Solution helps payers recover revenue by automatically fixing and resubmitting pended claims, thereby minimizing manual intervention, enhancing resolution speed, and ensuring accuracy at scale. Built on an **AI-first, low-code NewgenONE platform,** the solution fits right into the workflow. With AI, GenAI, and automation in one toolkit, payers get faster claims turnaround, fewer escalations, and a smarter way to prevent future exceptions before they hit your bottom line.

How Newgen's Claims Repair Solution works?

2 — **Categorizes** by error type (e.g., invalid CPT, missing NPI, DOB mismatch)

4 — **Batches similar claims** by error code for high-efficiency bulk processing

6 — **Tracks** everything end-to-end for compliance and performance

1 — **Captures** dropout/pended claims directly from your adjudication engine

3 — **Corrects data in bulk** using payer rules, provider databases, and integrated upstream systems

5 — **Resubmits** throughout the cycle into your adjudication engine

7 — **Routes** smartly to AI, rules engine, or subject matter expert (SME) teams for optimal resolution

What's the Real Impact of Smarter Claims Repair?

Up to **60% reduction** in claim rework effort	**40-60% recovery** on dropout claims	**Faster cycle times** from days to hours	**Reduced** cost-to-serve from minimal manual reviews	Improved **first pass resolution rates**	**Complete visibility** across every claim touchpoint

Use Case Snapshot: Before Vs After Claims Repair

Traditional Workflows	With Newgen's Claims Repair
Manual sorting of claims errors	*Auto-categorized and batch grouped*
SME teams manually pull dropout claims	*Smartly routed to the right teams*
Claims re-keyed into the system after correction	*Auto-corrected claims re-injected into the adjudication system*
Days/weeks of turnaround	*Reduced to minutes/hours*

What Sets Newgen Apart

- AI + Rules Engine = Tailor responses based on patterns or policy
- Deep Claims Expertise = Trusted by global payers and health plans
- No Rip-and-replace = Integrate with what you already have
- Modular Low-code Platform = Change fast, launch faster

About Newgen

Newgen is the leading provider of an AI-first unified digital transformation platform with native *process automation, content services, customer engagement,* and *AI/ML* 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 more details, visit *www.newgensoft.com* or email, *info@newgensoft.com*