



Challenges Faced by State Employee Benefit Departments

Rising Healthcare Costs

Reducing healthcare benefits is the first reaction to rising healthcare costs. State Employee Benefit Departments are realizing that reducing operating costs, monitoring disbursements and managing utilization should be the logical first steps taken before reducing benefits or denying care.

Enrollment

Enrollment for an employee is usually offered at the nearest human resources department and data is later centralized at a TPA or a healthplan. Web-based enrollment offers the dual advantage of decentralized enrollment and centralized data capture.

Electronic Standards & Code Sets

Even though employers are technically exempt from HIPAA, TPAs and healthplans have invested heavily to be HIPAA compliant, and require that eligibility files be in HIPAA the 834 standard.

Shadow Processing to Catch Errors

State Employee Groups contract with TPAs and healthplans to administer the delivery of healthcare. Absent any incentives to curtail payments, monitoring these disbursements is critical because many of the TPA systems are antiquated and prone to make mistakes.

How Do You Compare?

Comparing claims with benchmark data can help identify anomalous patterns of spending and other cost trends. Clinical professionals can then suggest ways of “managing” these events proficiently.

PayerSoft-BAS

Benefit Administration System to Manage State Employees’ Healthcare Benefits

Web Enrollment

Physmark’s web enrollment module offers employees the opportunity to manage their enrollment at their desktop even while the data is consolidated in one central site. It saves time, minimizes errors and reduces costs. Also, employees love it.

Premium Payments and Timely Notices

Physmark's PayerSoft-BAS calculates premiums and bills for benefits supplied either by payroll deduction or directly to retirees and Cobra participants. Automatic reminders and alert notices can be triggered by events defined by clients.

Reconciling Claims and Payments

PayerSoft-BAS has a complete claims processing engine that can, once populated with provider contracts, reprocess claims and adjudicate them. Catching duplicate claims and reconciling payments against existing provider contracts is important to eliminate overpayments.

Understanding Cost Trends

PayerSoft-BAS’ datamart option called MediMart allows claims data to be stored and analyzed using a multi-dimensional database. Graphical display with OLAP tools make this a powerful analytical tool to gain insight into cost trends and utilization patterns.

Quick ROI with Rapid and Phased Implementation

Lengthy implementation can disrupt ongoing operations. PayerSoft-BAS can be implemented rapidly and in phases, according to a client’s need. Most start with web enrollment and premium payment modules. Later, and optionally, claims processing and datamart features can be added.

About PayerSoft-BAS

PayerSoft-BAS is a program designed to specifically address the business demands of a State Employees Benefit Department that enrolls employees, defines benefits for enrollees, sets premiums, and contracts with TPAs to pay providers for the services rendered. PayerSoft-BAS also has a powerful claims processing system that can be used for “shadow processing” of claims to reconcile actual payments against contracted amounts.

PayerSoft-BAS

Specific Features

- ◆ Membership/Eligibility
- ◆ Benefits/Plan Management
- ◆ Provider Contract Management
- ◆ Claims/Encounter Repricing
- ◆ Claim Adjudication
- ◆ Member and Provider Services
- ◆ Premium Billing
- ◆ Web based enrollment
- ◆ Premium billing and reconciliation

Oracle Products

- ◆ Oracle 9i and 9iAS
- ◆ Oracle's Express Server, the OLAP product with a multidimensional database and tools (optional)
- ◆ Oracle's browser-based querying tool, Discoverer and Oracle Reports

Preferred Hardware

Sun Microsystems' servers and Solaris OS are preferred by enterprise users.

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Advanced Options

MediMart It's a Datamart in a Box.

- ◆ Integrates data from multiple sources to provide a complete picture, often referred to as a "longitudinal record" of a patient
- ◆ Offers multiple ways of viewing information and including graphs, reports, spreadsheets, etc. It provides powerful analytical tools to slice and dice data in many ways
- ◆ Gives users control with little support from IS personnel
- ◆ Trending of costs
- ◆ Custom Briefs
- ◆ Physician Profiling
- ◆ Ad Hoc Reporting

Expert Consultants

Physmark has assembled a team of highly skilled professionals from nationally recognized healthcare consulting organizations to help interpret reports and understand cost trends.

Unraveling the mystery of healthcare purchases

What are employers buying when they pay an insurance premium for their employees? How can an employer determine if an HMO or health plan is delivering superior care? These marketing questions are becoming important in differentiating one delivery system from another in an increasingly demanding healthcare delivery care arena.

MediMart reports can help measure the delivery of health care by using national benchmarks, peer group profiling and comparisons of severity adjusted data. Proving the high quality of care and showing how enrollees benefit are two ways in which the value of a healthcare purchase can be demonstrated.

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