NTT DaTa

NTT DATA welcomed Dell Services into the family in 2016. Together, we offer one of the industry's most comprehensive services portfolios designed to modernize business and technology to deliver the outcomes that matter most to our clients.

Streamline Enrollment and Billing to Improve Payment Accuracy and Drive Health Plans

Enrollment and Billing Solutions by NTT DATA

NTT DATA **Services**
formerly Dell Services

Health insurance exchanges (HIXs) are more than websites — they are stores. As thousands of shoppers begin browsing for the best deals and start enrolling, the sheer magnitude of open enrollment on private exchanges puts real pressure on your health plan organization to ensure enrollment, billing, tracking and collection run smoothly.

The Enrollment and Billing Solution by NTT DATA is a robust enterprise integration solution offered for private exchanges to enable secure, real-time quality transactions between health plans, providers and federal/state systems. We help you ensure speed, flexibility and accuracy with improved customer satisfaction, regardless of high volume.

Key benefits:
- Easily introduce new consumer-driven retail products/plans
- Quickly enroll new groups and members
- Turn around premiums faster
- Streamline invoice processing and receipts
- Ensure accurate payments and adjustments
- Lower administrative costs
- Increase cash flow
- Improve accuracy and customer satisfaction
- Manage an unlimited number of complex contractual and payment relationships

Launch a private HIX with streamlined enrollment and billing to quickly process transactions accurately, accelerate product introductions and improve consumer satisfaction

Federal/state exchanges

Medicare and Medicaid exchanges

Other health plan exchanges

Provider exchanges

Your private exchange

Capitation · Enrollment · Purchasing · New products · Billing · Collection · Adjudication · Claims processing · Data retrieval

Seamlessly connect to multiple exchanges

Our solution includes:

- A wide range of public or private exchanges for individuals and groups
- Comprehensive or modular components to manage all administrative functions
- Robust applications to manage the full range of enrollment, pricing, billing, reimbursement, reporting and more
- Real-time membership data integration, scalable to meet high volume
- Seamless interconnections across multiple exchanges

Why NTT DATA?

- More than 50 insurance organizations served, with support for 65 million policyholders
- More than 100 million claims processed annually, with 99% of claims processed within the service-level agreement
- More than 1.3 million enrollments per annum, with 98% of changes processed within 48 hours

A partner you can trust:

- Managed individual enrollment and billing (834 transfers/effectuations, rating, quoting, invoicing, accounts receivables) for more than 14 health plans for a state-based HIX serving more than 300,000 uninsured residents (medical and dental)
- Processed more than 55% of all HIX memberships, benefits, accumulators and claims for 600,000 members in California, which equates to 23% of all state-based marketplaces in the country
- Integrated with the Data Service Hub's Direct Enrollment
- Managed more than 14 million members in our member master file for our largest client (72 million eligibility entries, 110 million addresses)

Offering	Solution highlights
Rating and quoting	• Calculates premiums based on various rate attributes with a flexible rule-driven rating engine • Generates initial and reinstatement quotes for employer groups and individually billed members in real time
Enrollment and eligibility verification	• Simple group contract and enrollment processing • Electronic enrollment • HIPPS transaction support for 834, 270 and 271 • Customizable data quality and business validation rules • Reconciliation with health plan systems and Centers for Medicare and Medicaid Services (CMS)
Premium billing and payment	• Produces all data needed for electronic billing and remittance at group or individual level • Supports employer group, individual and split billing • Supports ad hoc and annual premium rate updates, as well as retroactive enrollment and rate changes • Tracks real-time premium payments, including electronic funds transfer and lockbox payments, manual adjustments and manual fees • Provides transaction support for 820, CMS Regtap reporting • Manages complex billing scenarios, Medicare, subsidies, waivers and payment plans
Life event management	Supports more than 100 life event changes, such as: • Marriage • Divorce • Job change • Relocation • Death of spouse • Adoption • New baby • Retirement • Plan change
Customer service representative dashboard and financial reporting	• Quickly manage customer contacts and issue resolution • Manage call center productivity • Manage appeals and grievances according to policies • Produce standard and customized reports via easy-to-use reporting tool • View complete member/employee information
Interfaces and integration	• Robust system to effectively manage and analyze member interactions and data throughout the member lifecycle, including enrollment, invoicing, tracking, reimbursement, payment and more • Supports integration into ancillary accounts receivable/general ledger systems • Claim system integration for paid thru date processing
Analytics	Utilize a full range of health plan data, reporting and analytics, such as: • Membership reports • Operational reports • Analytics reports • Financial reports • Compliance and regulatory reports • Metrics dashboard
Quality assurance (QA) and testing services	• Tests QA framework for healthcare payer solution testing — enrollment, billing, claims, electronic data interchange (EDI) transaction • Provides a full range of testing services — billing platform (financial management system), benefits configuration, carrier/issuer, HIX/Affordable Care Act related, EDI/interfaces, claims platform, functional and non-functional, security, automation, mobile application, compliance, user experience/interface, compatibility, UAT as service and more • Ensures quick, quality implementation with more than 40,000 ready-to-use test cases