

HealthRules® Payer

HealthRules Payer is a next-generation core administrative processing system that provides transformational capabilities to health plans of all types and sizes. For more than ten years, health plans implementing HealthRules Payer have been able to quickly address market opportunities and stay ahead of their competition. They have done this with high levels of customer and provider satisfaction and transparency by providing accurate, real-time information to everyone involved in the care continuum. Simultaneously, those health plans have also significantly lowered administrative costs by automating their critical manual business processes, resulting in an enhanced bottom line.

Widely deployed legacy claims processing solutions were not designed to handle today's healthcare challenges:

- Aging enterprise systems built using yesterday's technology are unable to meet the demands of today's healthcare marketplace
- Legacy systems were never intended to support anything more than limited lines of business with few changes
- Unwieldy custom solutions require substantial, expensive ongoing maintenance and support

HealthRules Payer enables organizations to:

- Respond in real time to new opportunities and market needs
- Quickly take on new business, regardless of complexity
- Automate and streamline existing lines of business, eliminating costly manual processing
- Provide superior customer service by connecting all constituents in the healthcare continuum
- Compete like never before, using a solution that was built to address the needs of the new healthcare economy

Gartner Perspective on Legacy Core Administrative Systems*

Figure 1. Payer CIOs Must Evaluate CAPS Against Next-Generation CAPS Digisystems Characteristics

Characteristics of CAPS Archetypes

	Cloud + Delivery Models	Configurable	Componentized	Value-Based Capable	Ecosystem Enabled
Franken-systems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legacy Packaged Systems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Generation 1 Digisystems	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>
Next-Gen CAPS Digisystems	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

*Gartner, U.S. Healthcare Payer CIOs Must Pursue Next-Generation Core Administrative Processing Solutions, by Mandi Bishop, June 11, 2020. ID#G00729469

Gartner cited HealthEdge® as a Sample Vendor for its next-generation core administration system in its July 2021 Hype Cycle for U.S. Healthcare Payers Report, 2021 for the 11th consecutive year.*

The Heart of HealthRules Payer – The HealthRules Language

HealthRules Payer is unlike any other core administrative solution on the market because of its use of the patented HealthRules Language.™ [The HealthRules Language](#) is a revolutionary new approach to configuration, claims processing and transparency of information that leverages an English-like vernacular to enable health plans to quickly react to market changes and new opportunities. With the HealthRules Language, payers define the rules, terms, and business logic that is easily understood by everyone. The unique characteristics of the HealthRules Language enable:

- Fast, flexible, and accurate configuration capabilities
- System-wide configuration tasks that can be performed by business analysts with minimal IT intervention
- Easy construction of new products and benefits with re-usable categories, components, and user-defined terms
- Reduced administrative costs and increased operational efficiency
- Quick adaptation to changing business, market, and regulatory dynamics
- Real-time transparency with explanatory language on a claim, not just the system configuration

To complement and strengthen the functions and benefits of HealthRules Payer, HealthRules Answers and HealthRules Connector are always delivered as part of the solution.

HealthRules Answers

HealthRules Answers is a transformative business intelligence solution that elevates the way health plans see and use data in real-time. It provides critical access to operational data for reporting and analytical dashboards. Metrics can be seen by HealthRules users and shared with stakeholders immediately, allowing members and providers to make informed decisions at the point of care.

HealthRules Connector

HealthRules Connector is a robust, enterprise-class integration layer that provides real-time and batch access to all HealthRules data and functionality, enabling our customers' enterprise integration with any other system or third-party platform that can consume real-time data.

Imperatives for Change – The HealthRules Advantage

Health plans have internal goals to lower costs, maximize operational efficiency, and optimize the use of existing resources while innovating to serve providers and their demanding membership.

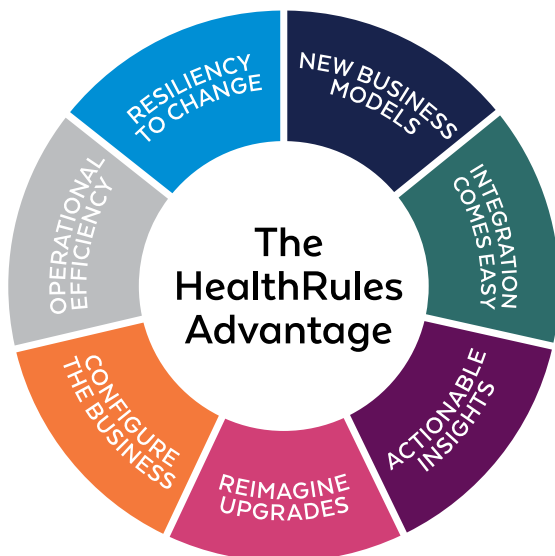
HealthRules Payer allows health plans to grow, innovate, and compete beyond any other core administrative system today.

See how HealthRules Payer differentiates:

Resiliency to Change

HealthRules Payer customers embrace change and take advantage of opportunities created by a variety of market dynamics. Health plans can react to:

- **Competitive pressures**
With the unparalleled ability to configure virtually any type of product in days or weeks instead of months, HealthEdge customers can easily bring to market unique and differentiated benefits faster than the competition
- **The latest regulatory shifts**
HealthEdge customers with Medicare, Medicaid, Duals, and other highly regulated lines of business rely on HealthRules Payer to remain compliant regardless of changing regulations



- **Opportunities for expansion**

With HealthRules Payer, customers enjoy flexible structures for accounts, benefits, providers, networks, and value-based contracting made possible by the system's componentized, reusable nature. Customers can quickly replicate and modify existing configurations, products, fields, workflows, rules, user-defined terms, and more, resulting in faster time to market than other solutions.

- **Large-scale public health and environmental events**

During times of unprecedented or unforeseen events, such as the COVID-19 pandemic, HealthEdge customers were able to enact policy changes quickly and effectively — and without disruption to the business

HealthRules Payer customers can regularly achieve auto-adjudication rates up to and over 90% with **financial accuracy up to 99%**

Operational Efficiency

Cost pressures continue to weigh heavily on health plans, making operational efficiency a key priority for their organizations.

- HealthRules Payer customers can regularly achieve auto-adjudication rates up to and over 90% with financial accuracy up to 99%
- Revamped processes and modern technology help eliminate waste through automation while maximizing the use of available resources
- Savings make reallocation of resources possible, enabling additional innovation

New Business Models

The modern architecture and unique design of HealthRules Payer lends itself to a controlled and comprehensive modeling of new product designs and provider pricing methodologies. HealthRules delivers unparalleled support for new healthcare business models including:

- Value-based benefit and payment approaches
- Complex provider networks
- Accountable Care Organizations
- Individual and Exchange business
- New consumer engagement initiatives
- Medicare and Medicaid expansion

“HealthRules Payer allows a configuration analyst in our organization to much more rapidly configure new benefits, new products, and new groups. Where it used to take a month or more, it now takes less than a week.”

Eric Decker
Chief Information Officer
Independent Health

Flexibility of Configuration

The HealthRules Payer platform allows business analysts to do rapid configuration and make changes with ease and confidence. Those changes proliferate throughout the entire system, meaning that modifications are made once, without the need to make extensive and costly adjustments. With HealthRules Payer, organizations can:

- Set up a plan for modeling while negotiating with the employer, resulting in quicker turnaround of new product offerings, better customer service and increased sales
- Configure new products and benefits according to specific business rules, compliance programs, health conditions, quality metrics, and more

Ease of Integration

HealthRules Payer easily integrates with other best of breed systems in real time via APIs and integration technologies, resulting in more cost effective and low risk maintenance of the IT ecosystem. Health plans can work with third party vendors of their choice, a list of our recommended partner choices, or internally developed solutions.

- Data exchange in real time
- Implementations and ongoing maintenance of a health plan's IT infrastructure are lower cost and lower risk than with a legacy solution

Insights for the Business

HealthRules Payer can combine with analytics to provide insights that improve patient outcomes, lower costs, and enable transparency inside and outside the health plan. Leveraging actionable, real-time insights improves patient outcomes, lowers costs, and enables transparency inside and outside of the health plan.

- Plans can expect robust, comprehensive, and actionable data that can be shared with key stakeholders
- Everyone in the plan has access to the same information at the same time

Reimagined Upgrades

HealthEdge is reimagining core administration software upgrades by reducing the operational challenges our customers face in taking regular upgrades by minimizing external costs. With each HealthRules Payer upgrade, customers can enjoy:

- Lower cost to upgrade
- Shorter time to upgrade
- Compatibility with future versions of HealthRules Payer
- High-quality custom code
- Shorter time to value

“We have a rhythm where upgrades are delivered each month in a way that we can just absorb them. It’s the epitome of efficiency around maintenance and support.”

Craig Azoff
VP Health Information Services
Elderplan

About HealthEdge

HealthEdge® is the health insurance industry's first digital nervous system to provide automation and seamless connectivity between all parts of a payer's administrative and clinical systems. HealthEdge provides modern, disruptive healthcare IT solutions that health insurers use to leverage new business models, improve outcomes, drastically reduce administrative costs, and connect everyone in the healthcare delivery cycle. Its next-generation enterprise solution suite is built on modern, patented technology and is delivered to customers via the HealthEdge Cloud or onsite deployment. In 2020, funds managed by Blackstone became the majority owner. **HealthEdge** and its portfolio of mission-critical technology assets for payers, including HealthRules® Payer, Source, GuidingCare®, and **Wellframe** are collectively driving a digital transformation in healthcare. Follow HealthEdge on [Twitter](#) or [LinkedIn](#).

Focused on Customer and Data Protection

HealthEdge achieved SOC2 Type 2 Certification based on an independent audit on how HealthEdge safeguards customer data with a focus on security, availability, confidentiality, and privacy. This achievement builds on SOC2 Type 1 and HITRUST certifications.

*Gartner, Hype Cycle for U.S. Healthcare Payers, 2021, Bryan Cole, Jeff Cribbs, Mandi Bishop, 13 July 2021; Gartner and Hype Cycle are registered trademarks of Gartner, Inc. and/or its affiliates in the U.S. and internationally and is used herein with permission. All rights reserved. Gartner does not endorse any vendor, product, or service depicted in its research publications and does not advise technology users to select only those vendors with the highest ratings or other designation. Gartner's research publications consist of the opinions of Gartner's research organization and should not be construed as statements of fact. Gartner disclaims all warranties, expressed or implied, with respect to this research, including any warranties of merchantability or fitness for a particular purpose.

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