

ADVANCED MEDICAID COMPLIANCE

THE CHALLENGE:

- IMPROVING REPORTING, APPROVAL, AND AUDITING PROCESSES TO AID IN STATE MEDICAID CLAIM RESOLUTION

A large pharmaceutical company was using a well-known state Medicaid compliance system to aid in claim resolution, but that system did not have the flexibility to track and report on all claim resolution data or the capability to match the client's claim auditing and approval processes. Contract departments were compiling and tracking the data associated with the approval and audit processes manually, wasting time and effort, and cycling through often inefficient processes. It had become a confusing, counter-productive cycle.

This client needed a cost-effective way to add flexible reporting tools and augment the Medicaid compliance system to associate meaningful comments with each claim, enforce the policy of collecting upper-management signatures for large claims, and conduct and track peer reviews or audits of claims, all processes relevant for SOX compliance.

THE SOLUTION:

- A CENTRALIZED APPLICATION WITH FLEXIBLE MEDICAID CLAIM RESOLUTION REPORTING, AUDITING, AND APPROVAL TOOLS

Aspect Consulting provided a cost-effective and practical way to enhance the client's state Medicaid compliance system that goes far beyond what the state Medicaid compliance system can provide. Aspect developed an add-on tool to provide centralization, automation, and control over the client's claim reporting, audit, and approval processes.

Intuitive pages provide review areas for one-stop claim tracking. Tracking of signatures and comments is automated. Peer review forms make the auditing process standardized and controlled. Robust reporting capabilities were also added to the application. Users can now report on the status of the claim review process. In fact, users can query and build reports from any field in the Medicaid compliance system database, using intuitive and flexible query tools.

THE BENEFIT:

- IMPROVED MEDICAID CLAIM RESOLUTION WORKFLOW AND REPORTING WITH FULL SOX COMPLIANCE

Audit and approval of claim data is now automated and claim data is now available for custom reporting for a more complete Medicaid claim tracking picture. With peer review and signature collection, the client can be assured that the claim was researched and processed properly. Intuitive and flexible query tools make creating custom reports easy for the end user. And, all approval and auditing processes are automated and centralized within one application that interacts with the client's Medicaid compliance system. The new tool's automation ensures better compliance to internal processes, and makes SOX compliance easier to demonstrate to auditors.