



HGS Medical Cost Management Services:

Ensuring Quality, Cost Containment with Lifecycle Focus

Managing medical costs has never been a more dedicated focus for health insurers, due in large part to the post-reform call mandating 80% spend on member health. Today, these services need to be a combination of member-engaging concierge type services and health education and outcome management services.

HGS's medical cost management service comprises a combination of concierge, health education, and outcome management services. We also assist providers in evaluating their patients' health outcome at every encounter in the most cost-effective way. HGS leverages rightshoring to ensure optimal cost-containment for our health plan partners.

HGS Capabilities

HGS is a global provider of customer care solutions and back-office processes for insurance payers, with more than 15 years in the payer industry and extensive experience in both back- and front-office Medical Cost Management Services. HGS currently employs 1,100 clinical staff members, many who carry US licenses offering Utilization Management, Case Management, and Care Coordination, as well as Nurse triage support.

Bolstering our medical cost management services, HGS also provides Member Health and Enrollment and Claims Administration Cost and Efficiency that help achieve the most important goals of a payer organization.

HGS Medical Cost Management solutions include:

- **Nurse Triage HIL & Triage, Care Coordination:** Our health information line is a resource to members for 24x7 servicing. This clinical expertise directly answers to the outcomes focus and also provides care deflection and call triage. Our U.S.-certified RNs provide these services from the Philippines.
- **Utilization Management:** Our RNs provide skills and expertise to effectively manage healthcare costs for the payer by helping to guide patient decision making and payment processes with case-by-case assessments of medical appropriateness.
- **Case Management:** We work to assess, plan, and facilitate care coordination for chronic or complex medical conditions. Nurses evaluate a patient's eligibility to join the case management program in which dedicated case managers support the patient through treatment options for that medical condition.
- **Medical Necessity Review, Provider Engagement:** HGS checks the medical appropriateness and necessity for the level of care rendered. HGS educates intermediaries, and has established operations centers to work all Medicare and Medicaid accounts in the USA.
- **HEDIS Reporting:** We provide medical records review and abstraction of star rating indices to enable healthcare organizations to track, monitor and improve HEDIS compliance, develop and measure proprietary quality metrics, facilitate NCQA submission, and implement year-round clinical compliance reporting that increases health plan ranking.

Along with our Medical Cost Management Operations, HGS also provides extensive Claims Management, Clinical Operations, Benefit Configuration, Enrollment, and Fulfillment processes, among other services.

"The ACA has spurred activity in both the public and private sectors, contributing to the accelerated pace of state and local innovations across the country. There is widespread agreement that fee-for-service health care should no longer be the norm, and that fundamental shifts are needed to produce affordable, high-quality, value-based care."

"The Affordable Care Act's Payment and Delivery System Reforms: A Progress Report at Five Years"

The Commonwealth Fund

"The [HGS] team that I work with continues to meet and exceed the goals set for them. They're always willing to assist in any way that they can so that the overall goals are met. The team makes every effort to improve their service if issues are identified."

-Project Manager - Fortune 50 Healthcare Company

As reported by **Black Book Market Research**, 61% of health plans are contemplating outsourcing utilization management by 2016, and 27% of payers are currently reviewing the potential for plan effectiveness by outsourcing care coordination and case management

15-Year
Client Relationships

10,000+
Healthcare Professionals

**ISO 27001 2013,
PCI, GLBA, and
HIPAA certified**

1/2 of Top
Healthcare Payers
Supported

Over our history, HGS has become the partner of choice for five of the top ten insurance payers within the United States. We have a 100% client retention rate among our payer clients.

Tangible and Measurable Results

Our solution presents these outcomes for our clients:

- Impact to health outcome metrics
- Cost containment, via offshoring, accuracy of payouts
- Proactive payment management eliminates need for reconciliation
- Impact to member behaviors in managing their health
- Improved member experience
- Impact to operational efficiencies

18% Improvement
in Efficiency

8% Decrease
in Transfer Rate for a Global
Health Insurance Company





5% Decrease
in Claims Rework for a US
Managed Healthcare Company

About HGS

HGS is a leader in optimizing the customer experience and helping clients to become more competitive. HGS provides a full suite of business process management services from marketing and digital enablement services, consumer interaction services to platform enabling back office business services. By applying analytics and interaction expertise to deliver innovation and thought leadership, HGS increases revenue, improves operating efficiency and helps retain valuable customers. HGS expertise spans the telecommunications and media, healthcare, insurance, banking, consumer electronics and technology, retail, consumer packaged goods industries, and the public sector. HGS operates on a global landscape with more than 37,000 employees in 65 worldwide locations delivering localized solutions. HGS, part of the multi-billion dollar Hinduja Group, has over four decades of experience working with some of the world's most recognized brands.

- 3-time Partner of the Year for a Major Asian Telecommunications Client
- Contact Center World Awards – 2015
- Best Large Contact Centre (Gold)
- Best in Customer Service (Gold)
- Best Outsourced Partnership (Gold)
- 2014 - Customer Service Department of the Year – International Business Awards

Hinduja Global Solutions Limited (HGS) was ranked as a “Leader” in the NelsonHall Vendor Evaluation and Assessment Tool (NEAT) for Customer Management Services (CMS) in Healthcare under both Payer and Provider categories. Vicki Jenkins, CMS Industry Analyst with NelsonHall, said, “HGS currently provides a wide portfolio of offerings and is looking to the future, as it supports its healthcare payer and provider clients.”

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