

# scintel

Technology for a **Changing World**

## Middleware Implementation Case Study

### PAS Case study

#### INTRODUCTION:

The client needed to develop PAS (Pre-Authentication Service) to determine if the patients who want to avail a medical service is covered for a prescribed procedure, service, or medication. After a physician orders a medical service for a patient, the physician's staff will fill the Pre-Authorization request form and send it to Payer (insurance companies). Manual process of Pre-authorization requires manual filling of forms and sending by fax or calling over telephone to insurance companies (payers). The medical service may be approved, rejected, or additional information may be requested. If a service is rejected, the physician may file an appeal based on the provider's medical review process. In some cases, an insurer may take up to 30 days to approve a request.

Going online usually gets a quicker response and saves the cost and time by up to 80%. To minimize the number of times required to get a prior authorization one should be familiar with insurers' formularies, and develop a list of drugs they all cover for common diseases and ensure all the criteria of the payer is met before submitting the form. If there are any deviations in the recommended treatment guidelines the explanation should be justifiable. It is also mandatory that the staff has the forms required for the drugs and procedures that most commonly require a prior authorization easily available.

#### BACKGROUND:

The client is an industry leader and a Fortune Global 500 Company that provides the connectivity and solutions that enable constituents across healthcare to exchange information securely and conveniently. By connecting patients, providers, pharmacies, payers and pharmaceutical manufacturers, it offers real-time solutions to streamline interactions throughout the healthcare. Ultimately their mission is improved care, faster access, lower costs and enhanced bottomlines.

## CHALLENGES:

- The current Pre-Authorization process supports only big providers.
- Pre-Authorization from varies from insurer to insurer.
- The current request schema of PAS follows International healthcare standards like EDI & X12.

## SOLUTION:

Working with the client, Scintel was able to demonstrate the effectiveness and capability of off-shore development team to transform data into actionable items. The team showed their technical expertise in TIBCO, RIT, Jenkins Server, Maven, Oracle 11g, and Java in choosing the right palettes of TIBCO, effective TIBCO and RIT integration, optimized oracle queries.

- Delivered PAS as a TIBCO web service.
- Delivered the PAS project well before the client expected.
- Designed optimal data flow architecture, Request/Response Schemas.
- Designed the Business rules for PAS.
- Optimized error handling process.
- Completed the Code Coverage for PAS using RIT.
- Completed the Maven migration and Continuous integration in Jenkins server.
- Standardized the Pre-authorization form.

## BENEFITS:

- A standardized request form for all insurers.
- Now PAS supports both big and small providers.
- The current request schema of PAS follows no international standards.
- Once authorized 80% of the amount is paid by the payer before availing the service and 20% after the service.

### ABOUT THE CLIENT:

Leading Healthcare Player in US.

### INDUSTRY:

Healthcare.

## BUSINESS NEED:

Deliver a feasible solution that is cost effective and efficient which would enable the streamlined management of its IT infrastructure environment along with multiple servers and technologies.

## SCINTEL SOLUTION:

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## BENEFITS:

- Managed \$12 million infrastructure by providing support on Directory Services, Server Administration, Patching, Backup and Virtualization.
- Incorporated 24 x 7 support in resolving complex technical issues.
- Adhered to process compliance by establishing strong ITIL Processes.