

## **Healthcare Software Vendor**

Distributed Shore Claims Rules Engine Development

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**Distributed team following Agile Development methodology, combined with domain depth provides faster time to market for leading Healthcare Software vendor.**

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## **Background**

An industry leader in the healthcare software space has built and rolled out a comprehensive Hospital Information Management Systems that provides an array of capabilities on the clinical side of the business combined with a robust revenue cycle management solution.

## **Business Challenge**

Hospital systems are consistently losing money due to poor revenue cycle management. One part of the problem is payment denials from Health Insurance companies and the other part is non-collection from patients.

The major component of the hospital systems revenue is the claims that they send on behalf of their patients to the health insurance companies. The health insurance company is looking for a claim that meets all their internal system needs, checks and balances, processes and specific edits etc. The complexities involved in creating a “clean claim” for a health insurance payer is an extremely difficult task. This is compounded for a hospital as they have to deal with many such insurance companies having its own variations and specificities with regards to claims processing.

The vendors promise to their health systems clients was to engineer and implement an efficient revenue cycle management solution that will enable hospitals to send a “clean claim” to all the insurances they deal with and collect monies in the first attempt.

## **Objectives**

Create a development model that will enable quick delivery and fast turn cycles. Integrate the end Customer into the development and delivery cycle to provide them more visibility about progress

Introduce a robust model to capture all the business rules and edits that are required to build a “Clean Claim”.

Adopt a method to keep track of the changes of these rules at each insurance payer in every state.

Engineer an efficient delivery mechanism for customer deployments of the solution.

## **Technical Solution**

A build plan using Agile development methodology was created for each release which further broke out the new functionality to be delivered in each release into a set of minimally dependent “work tracks” and a series of iterative builds at two week intervals.

Work tracks were structured to allow agile development to continue as independently and as quickly as possible; used parallel runs with either an onshore or offshore team.

Services included mapping and companion guide rules writing for over 100 payer direct connections.

Conducted rules conversion from internal rules engine to Blaze advisor business rules management system from Fair Isaac

Developed a custom application to manage and maintain the business rules implemented in the Blaze Advisor rules engine

IGI subject matter experts analyzed the new Business Requirements, working with client and IGI Quality Assurance team members to create test cases for the new functionality in each build’s deliverables.

Continuous Testing and development were tightly integrated for the deliverables of each work track and build. Continuous Integration Testing, using a common code base, minimized interface issues between the application’s functional components.

The Development Environment comprised of a Project team consisted of large team offshore and analyst, lead architect, project lead and program manager onsite.

### **Results and Business Benefits**

- Claims were processed 4 times faster than in earlier releases. Product is stable with few enhancement requests
- Improved business value as a result of higher levels of business buy-in, higher business involvement, clearer alignment of functionality to business requirements, higher levels of adoption, and better ROI.
- Reduced delivery risk as the technology was proven earlier in the project lifecycle, through easier management of scope and delivery with clear and immediate communication of risks and issues.