



Modernizing International Insurance

World-class solutions
for connecting, centralizing
and empowering your business
in developed and emerging
International Insurance
Markets





Who is PLEXIS?

PLEXIS Healthcare Systems is a leading payer solution and claims processing technology company based in Ashland, OR. Founded in 1996, PLEXIS provides enterprise software and services that process millions of claims transactions daily for diversified organizations throughout the United States and the larger global insurance community.



☰ Profile of our Customers

- ☑ Multi-line international insurers
- ☑ Multi-national employers
- ☑ U.S. insurers/health plans expanding abroad
- ☑ TPAs administering fully insured products
- ☑ International cost containment companies
- ☑ Medical tourists (individual purchasers)
- ☑ National Health Plans





Expansion and Collaboration in the Evolving Global Landscape

International insurers are quickly adopting flexible, yet centralized technology platforms that enable inter-organizational collaboration, comprehensive analytics and reporting for better decision making, and ultimately, greater business efficiencies.

Additionally, the modernization and standardization of global technology systems are empowering organizations with the ability to:

- ✓ Expand and scale faster and more efficiently
- ✓ Enhance automated processes and workflows
- ✓ User definable labeling options
- ✓ Reduce costs and duplication of services
- ✓ Innovate and provide consumer-centric solutions



Why PLEXIS?

With over thirteen years implementing and supporting international customers doing business in over twenty countries, PLEXIS has significant international domain experience and support capabilities to empower with the technology platform to centralize and expand its global insurance operations.



Our experience is unmatched among U.S. software providers



We maintain a strong understanding of processing needs of international insurers



We understand the unique functional requirements and cultural differences, and manage them successfully



Our retention rate is 100% of our 15 implemented international customers

Our platform is supported by a seasoned team of international subject matter experts that have delivered similar solutions to numerous organizations over the last decade and architected by technologists who build data-driven user experiences and functionality for our clients year after year.



The PLEXIS Approach to Successful International Modernization

Platform Flexibility

PLEXIS recognizes the business requirements, procedures, codes, and cultural environments differ from country to country. Our world-class benefit administration platform provides international organizations with standardization tools for a non-standard world.

1 PLEXIS empowers international insurance organizations with the flexibility needed to **adapt to unique markets while standardizing global operating processes.** Our platform:

- ✓ Provides the ability to set up custom procedure and diagnosis codes
- ✓ Provides the ability to structure specific claims processing rules (tied to use of custom codes)
- ✓ Enhances automation / minimizes the need for manual intervention
- ✓ Provides the ability to accurately report and analyze claim data
- ✓ Provides the ability for insurers to provide more meaningful, detailed data to their clients
- ✓ Provide the ability to interface with U.S. standards

(coding, EDI) and cross-reference to proprietary formats/datasets

- ✓ Provides support for non-medical products/travel insurance

Our platform’s flexible configuration of benefits and reimbursement rules provides a ‘building block’ approach promoting the re-usability of configured items.

2 PLEXIS empowers international insurance organizations with the flexibility needed to **provide base and supplement plan processing functionality.** Our platform:

- ✓ Processes individual claims automatically under both the base and supplemental plans within the same claim (eliminating the need for manual intervention or duplicate claim entry)
- ✓ Provides the ability to configure Episode-based accumulators

3 PLEXIS empowers multi-national insurance organizations with the flexibility needed to **provide multi-currency support.** Our platform:

- ✓ Saves claims in the native currency of the payer and pays claims in the native currency of the payee





- ✔ Supports multiple exchange rate dates for claims processing and displays and modifies claims in any supported currency

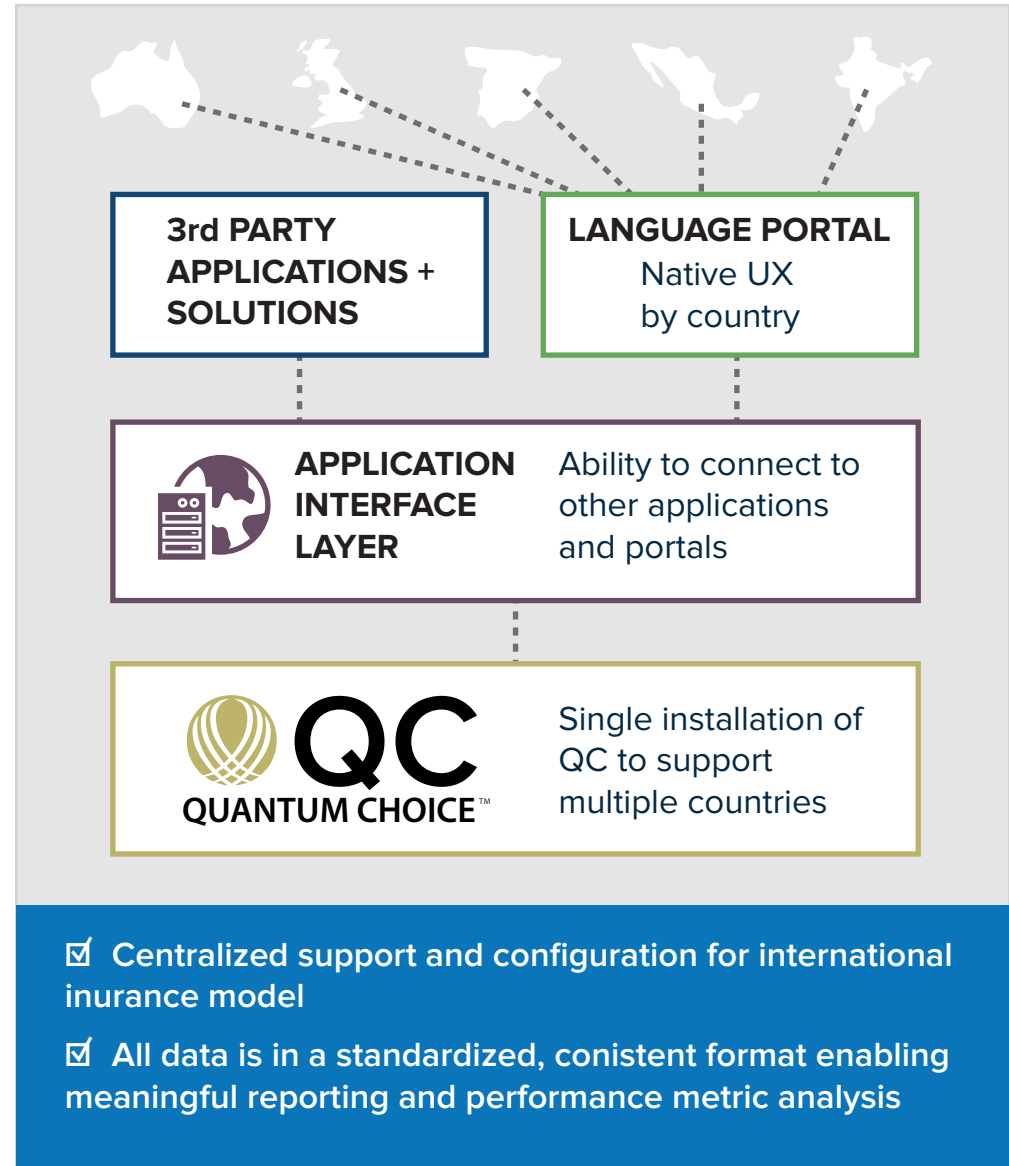
Centralized Infrastructure

PLEXIS' technology platform is built on a distributed, enterprise architecture, providing scalability to support very large claim and premium billing transaction volumes. Our architecture allows for growing transaction volume while maintaining or reducing processing timeframes; leveraging your current technology investment while expanding business growth.

4 PLEXIS empowers international insurance organizations with the infrastructure for real-time adjudication to **help curb fraud/abuse and increase provider satisfaction**. Our platform:

- ✔ Integrates automated workflow orchestrations together across disparate systems (Life, Commission, etc.), minimizing error-prone duplicative data entry between systems and reducing decision processing time.
- ✔ Additionally, our solutions' role-based security provides defined security by user group and role,

eliminating the need to maintain multiple databases for the same line of business.





Case Study: Increasing Market Share

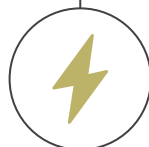
A Jamaican multi-national insurance company sought to grow market share by offering greater customer service capabilities while curbing fraud and abuse

The Goals

- ✔ Install an automation system that provided for benefit administration, claim processing and premium billing/collections
- ✔ Easily track all financial transactions, expenses, revenue and liabilities
- ✔ Curb rampant fraud and abuse of RX claims seen by all other insurers in Jamaica
- ✔ Provide automated customer service capabilities that were superior to all other insurers in the country

The PLEXIS Solutions

- ✔ Architected an end-to-end core admin solution with a portal-based partner solution
- ✔ Worked with pharmacies to create requisite interfaces to allow for real time claim submission, adjudication and response (vs. nightly batch submissions offered by other insurers which allowed a lag in claim processing resulting in rampant fraudulent prescription drug refill claims)
- ✔ Provided WEBWorks – a customizable web portal for payers to provide significant self-service and reporting/analytics capabilities



Results

- ✔ **Dramatic market share increase (0 lives to over 100,000 in second year of operation)**
- ✔ **Minimized fraudulent claims expense**
- ✔ **Quicker turnaround on claim processing and decreased need for post-pay recoveries**
- ✔ **Increased customer satisfaction and client retention due to self-service reporting and analytics provided to employer group purchasers**





Case Study: Expanding Lines of Business

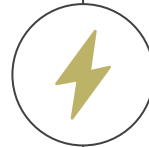
Leading global provider of risk management and insurance, expanded and set up a TPA in Angola to compete with new entrants in that market.

The Goals

- ✔ Install an automation system that provided for benefit administration, claim processing and premium billing/collections, as well as automated authorization request submission from providers' mobile devices.
- ✔ Easily track all financial transactions, expenses, revenue and liabilities.
- ✔ Expand market share and minimize expenses by setting up and operating its own TPA, which can serve to process its own claims, as well as that of other insurers/employers in the future.

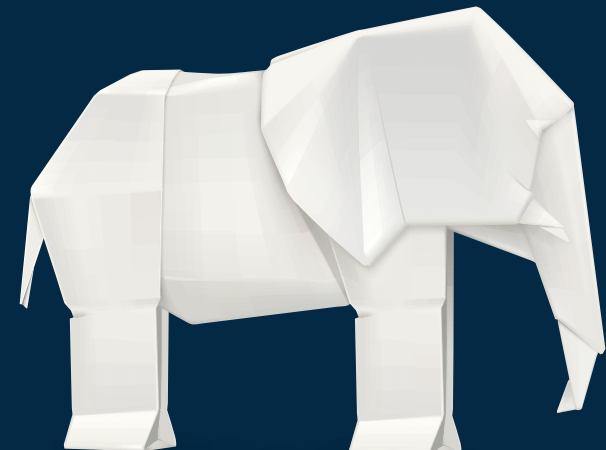
The PLEXIS Solutions

- ✔ Architected an end-to-end core administration solution with a web based transaction processing solution for authorization requests
- ✔ Worked with client on development of new web services processing that would take inputs submitted by lightweight cellular data transactions from providers' mobile devices and route those to the web services layer for automated entry and response
- ✔ Worked within extremely tight client budget and time constraints



Results

- ✔ Allowed company to provide competitive product offering and minimize expense
- ✔ Drastically shortened authorization request time
- ✔ Increased provider satisfaction by providing real-time access to information via mobile device
- ✔ Quicker turnaround on claim processing and decreased need for post-pay recoveries





EMPOWERING THE BUSINESS OF HEALTHCARE.

**340 Oak Street
Ashland OR, 97520
1 (877) 475-3947**

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www.plexishealth.com**