



Managing Growth in Medicare Enrollment and Claims Processing

In 2008, 45 million Americans were enrolled in Medicare. With 1.5 million Baby Boomers signing up for Medicare each year, enrollment is expected to reach 78 million by the time Boomers reach full enrollment in 2030.

The Medicare open enrollment period offers the opportunity for Medicare subscribers and newly eligible beneficiaries to enroll in their health and prescription drug plans for the coming year. Payer organizations need to be prepared for this influx of applications and subsequent claims with enrollment and claims processing solutions that will enable them to capture and process documents in a timely, cost effective and compliant fashion.

Paragon's Medicare Enrollment and Claims Processing solutions help insurers easily handle the receipt and processing of enrollment applications, claim forms and other supporting documentation with an automated end-to-end process, streamlining application and claim fulfillment from days to hours.

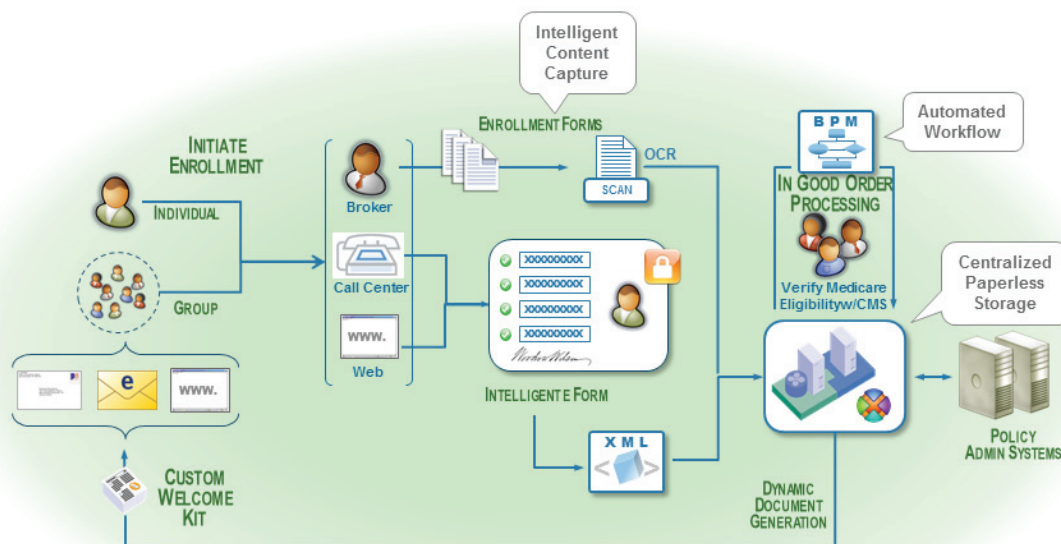
Paragon's Medicare Enrollment Solution

The Medicare Enrollment Solution leverages Paragon's straight-through processing framework and market leading business process management tools to dramatically improve cycle time and processing cost associated with Medicare enrollment. The solution can help payer organizations achieve:

- ▶ **Streamlined application processing** – Eliminates time-consuming, manual processing which reduces the number of incomplete applications and initiation to completion time from weeks to days.
- ▶ **Reduced operating costs** – The efficient, automated process eliminates the costly follow-up required to track down lost documents and rekey the same customer information.
- ▶ **Improved compliance** – The ability to retain and audit at any point in the process allows for better recordkeeping across service lines and faster access to regulators.
- ▶ **Enhanced member experience** – Offers the ability to provide personalized messaging to reach the right member with the right message via print, Web, email and other channels.

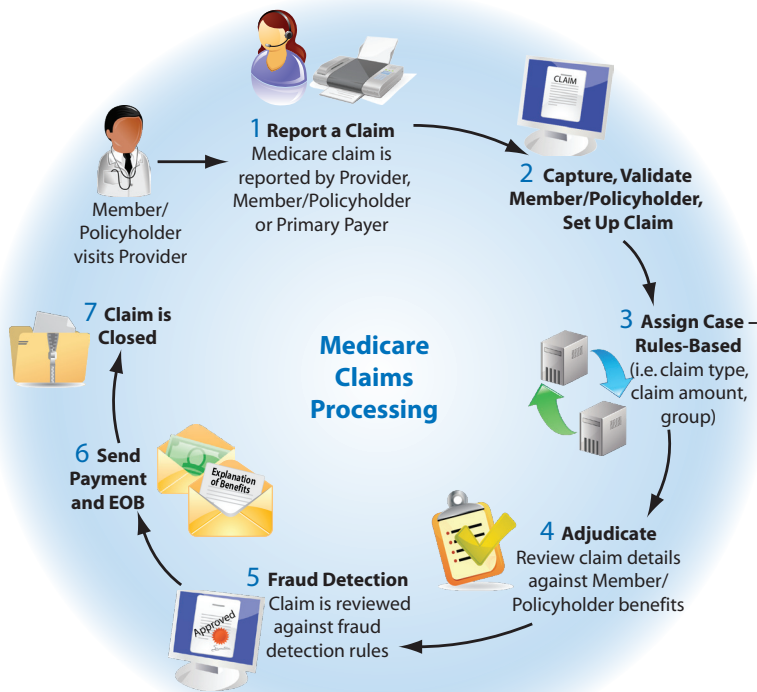
Paragon's Medicare Enrollment Solution Model

Paragon's end-to-end solution streamlines the medicare enrollment process from the point of client contact to welcome kit fulfillment. Key features of the solution include: consolidated digital capture of enrollment data (paper and electronic); character recognized extraction and indexing of customer information and form types; workflow/BPM automation driving prioritized segmentation of work items for improved efficiency; virtual folders of all client information; automated population of policy administration systems; and creation and delivery of member correspondence on demand.



Medicare Claims Capture and Processing

When a Medicare claim is initiated, it must go through a process that includes claim set up, coverage and eligibility verification, adjudication, fraud detection, and claim payments.



Features of Paragon's Medicare Enrollment and Claims Processing Solutions

Intelligent Content Capture

With Paragon's solutions, document capture provides capabilities for capturing images and other data at its source. Documents can be ingested into the system using a scanner, fax machine, or multifunctional peripheral (MFP) to be transformed into business ready content—without the need for manual data entry. Information and content can be managed with enterprise-grade security, scalability and reliability. The result is faster processing with fewer errors.

Streamlined Processing

Once documents and data have been captured, Paragon's solutions provide powerful capabilities for defining, automating, orchestrating, and optimizing the processes using business process management (BPM) strategies. By applying these strategies, insurance companies can automate formerly manual tasks and significantly reduce processing time and costs.

Automated Correspondence

Managing correspondence effectively can also have a dramatic impact. Now customer representatives, field agents and others can develop clear and precise correspondence and other coverage-related communications in real time and on demand, using an Internet browser. For example, Explanation of Benefit (EOB) statements can be triggered automatically through an unattended process by leveraging business rules within BPM.

About Paragon

Paragon Solutions is an advisory consulting and systems integration firm that specializes in enterprise information management to help clients leverage information assets for better business results. The company does this through its industry practices, solution accelerators and specialized technology competencies that help clients achieve operational efficiency, business scalability and regulatory compliance.

Paragon's Insurance Solutions practice addresses the key challenges insurers and other financial services firms are facing today: rising costs, increased complexities meeting regulatory requests, and diverse distribution. Paragon's custom-tailored solutions leverage decades of experience in insurance process engineering and automation. We offer customized solutions for straight-through processing in life and annuity, P&C, reinsurance and health.

For more information, please visit the Paragon Web site at www.consultparagon.com or call, 1.800.462.5582.

Paragon Client Roster

Paragon's client roster includes industry leaders from the financial services, insurance and healthcare sectors such as:

Financial Services

- ▶ Bank of America
- ▶ Blue Healthcare Bank
- ▶ BNY Mellon
- ▶ Citibank
- ▶ JPMorgan Chase

Insurance/Healthcare

- ▶ Conesco
- ▶ BCBS of NC
- ▶ Emory Healthcare
- ▶ Horizon BCBS of NJ
- ▶ Wellmark



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