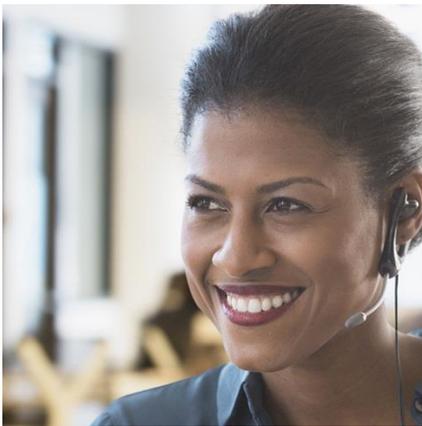


Business process services for your health and human services programs.

Simplifying healthcare reform, improving access to care and reducing your costs.



As states address healthcare reform, their expanding Medicaid programs and integrated eligibility processing, many need to enhance their support operations to meet the growing needs of customers in the public and commercial health insurance marketplaces.

Under the Affordable Care Act, states need to address member questions about Medicaid, CHIP, health insurance coverage, and tax subsidies, while also facilitating a smooth enrollment process. At the same time states are taking advantage of A-87 funding and upgrading their eligibility systems to take a more consumer-centric approach to providing health and human services benefits.

Leadership by the Numbers

- Proven call center solutions in more than 30 locations serving state Health and Human Services programs
- More than 300 domestic and international multilingual centers, many of which provide 24x7 customer service
- 45,000 professional customer care representatives, including more than 4,000 supporting public sector clients
- Processing of more than 2 million customer calls every day, as well as fax, email, chat and Web transactions

Is your program prepared for the next influx of inquiries from consumers and other stakeholders?

A flexible eligibility platform with a robust online enrollment tool is only part of the solution. Complex application processes and evolving eligibility requirements leave many consumers confused and looking for knowledgeable one-to-one interaction.

That's why Conduent helps you answer the ongoing challenges of health and human services reform with a customer service approach that is more than just a call center. We offer a range of business process services that simplify the way work gets done and increase efficiencies – enabling you to focus on better serving your members.

Integrated Health and Human Services readiness is here.

Our Customer Service Center solution helps eliminate confusion by offering a range of eligibility and enrollment support services that can improve, shorten and simplify the application process for health insurance, as well as other public assistance programs.

Flexible, scalable solutions align with your timeline and budget.

Our customer care centers can be set up within 120 days to coordinate with a state-based or federally facilitated marketplace model as well as other state programs. And we can add capabilities incrementally as budgets and resources permit.

A Complete Approach to Customer Care

Our customer service solution includes more than a best-in-class call center. It can easily be expanded to support:

- Application intake processing and data entry
- Case processing and data collection
- Document imaging and management, including medical records collection
- Optical Character Recognition (OCR) and other strategies to improve efficiency and accuracy
- Eligibility screening for Medicaid and other public assistance programs
- Application follow-up, providing caseworkers with all the information they need to determine eligibility
- Timely redeterminations to ensure program integrity
- Remote imaging and EDI strategies to reduce paper handling
- Support for hearings and appeals
- Overpayment and benefit recovery activities
- Inbound and outbound customer service
- Various program analytics and specialized reporting capabilities

We allow customization of our services to meet any decisions your state makes regarding your marketplace, Medicaid program or integrated eligibility process. Our combination of subject matter expertise, business process services, configurable technology, program innovation and scalability makes us a trusted resource for helping state agencies deliver professional, sensitive and comprehensive customer service to their citizens, including:

- Experienced, program-specific trained representatives who resolve issues quickly while coordinating between multiple organizations.
- A “client choice” model offering multi-channel access via Web, phone, mail, fax, chat, kiosk, in-person or any combination of contact points.
- An enhanced Interactive Voice Response (IVR) approach that reduces common mistakes and significantly cuts call times.
- Performance enhancements through customer care feedback – combining customer care and program data for better service design.
- Early intervention capabilities such as appointment alerts through outbound messaging.
- A workflow management system that distributes work to available staff.
- Operations consulting services to reengineer and standardize eligibility and enrollment processes.
- Document management technologies that streamline operations and support casework functions in multiple locations – placing complete information at your fingertips.
- Robust technologies that create an audit trail for every document or customer interaction and track it through every stage of the process.
- A transaction-based pricing model that enables you to pay for only the services used – reducing upfront capital expenditures and eliminating build-out delays.

You can learn more about us at www.conduent.com/govhealthcare.

