HEALTHCARE



CLAIMS ADMINISTRATION

When professional liability and medical malpractice claims and litigation are managed separately from quality and safety, it's virtually impossible to identify — and address — potentially compensable events before they escalate.

STREAMLINE THE CLAIMS PROCESS

The Riskonnect Claims Administration solution helps reduce costs by consolidating claims information, integrating with quality and safety, and automating routine processes so you can focus on resolving even the most complex claims quickly, easily, and fairly. Our software helps you improve workflow efficiency and outcomes by reducing clicks, automating tasks, facilitating reporting, and integrating with third parties – including EHR systems – for faster, more informed decisions.

TAKE CONTROL

Designed for organizations that manage their own claims or manage claims on behalf of others, our solution enhances the stakeholder experience with real-time collaboration between internal and external parties.



ALL-IN-ONE

The single platform puts
everything you need
right at your fingertips by
seamlessly integrating
people, systems, and claims
data from multiple sources.



CONFIGURABLE

Automated workflows offer consistency and efficiency – with built-in flexibility to deliver just what you need.



INTELLIGENT

Advanced reporting and analytics track both performance and overall claims-handling efficiency.

CLAIMS ADMINISTRATION FOR HEALTHCARE

Riskonnect's Healthcare Claims Administration software offers everything you need to get the job done not just faster, but smarter.

SEAMLESS INTEGRATION WITH SAFETY AND INSURANCE CLAIMS

- Uses an easy spreadsheet upload or automatic data service to quickly consolidate claims data from any number of sources.
- Automatically reformats data for effortless reporting.
- Ensures your claims information is accurate through better data capture, tighter integration with third parties, and automatic data validation.

EASY VIEWING, MONITORING, AND COLLABORATION

- Quickly locates claims based on predefined filters, such as coverage, cause, state/province, loss date, create date, and claim status.
- Tracks historical reserve and payment changes.
- · Groups claims by allegation, similarity, event date, responsible department, specialty and more.
- Provides data in one consolidated record, including financial, related parties, and communications.

BETTER INSIGHTS DELIVERED

- Compares like claims based on cause, nature of injury, coverage, and loss date for better understanding of the potential outcome.
- Provides extraordinary insight into the entire claims lifecycle using embedded analytics.
- · Measures claims management effectiveness through dashboards and advanced analytics.
- Provides a single dashboard to view claims management activities and patient safety programs, including patient experience, patient safety, peer review, and more.



CLAIMS **ADMINISTRATION** FOR HEALTHCARE **SOLUTION:**

AUDIT

CLAIMS REGULATORY COMPLIANCE SERVICES

DATA TRANSFORMATION SERVICES

DOCUMENT MANAGEMENT

ELECTRONIC REPORT OF INJURY

REPORTING & ANALYTICS

RESERVE MANAGEMENT

RETURN TO WORK

WORKERS' COMPENSATION SEVERITY MODELS

WORKFLOW MANAGEMENT

ABOUT RISKONNECT

Riskonnect is the leading integrated risk management software solution provider. Our technology empowers organizations with the ability to anticipate, manage, and respond in real-time to strategic and operational risks across the extended enterprise.

More than 900 customers across six continents use our unique riskcorrelation technology to gain previously unattainable insights that deliver better business outcomes.

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