



TriZetto® CareAdvance®
Care Management Solutions

Care collaboration in the digital age


The CareAdvance platform is a set of member-centric, data-driven, complete care management solutions that leading health plans rely on to manage over 40 million members — so you know it works.

What sets the CareAdvance platform apart from the crowd is its unique integration with both Facets® and QNXT™ solutions, exchanging data between core administration and medical management to support population health management and inform

case, disease and utilization management decisions with maximum efficiency and accuracy **in real time**.

What's more, because CareAdvance leverages cloud and web-based technologies, it easily fits into your organization's IT strategy and deployment preferences. With flexible configuration tools designed for clinical and business analysts, it provides medical management with more independence.





Whether you have 10 thousand or
over 10 million members,
CareAdvance scales to your needs

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The CareAdvance approach

Create a flexible, automated ecosystem for medical management that integrates data and workflows to enable realtime collaboration between utilization managers, care managers, members and their providers for optimized health outcomes.

A high performing, automated ecosystem for utilization management

Creating a **high-performing, automated ecosystem for utilization management** means that your core systems need to tightly integrate with your care management system, from both a data and a workflow perspective. That's why Cognizant® weaves CareAdvance into the fabric of both Facets and QNXT. No matter which system you rely on for core operations, you can realize optimal efficiency between utilization, case and disease management.





The power of integrating Facets, QNXT and CareAdvance can drive greater efficiencies with lower risk and reduced overall cost of mission-critical work:

- ✓ Improve auto-adjudication rates
- ✓ Improve prior-authorization request turnaround time to providers
- ✓ Automate workflows, correspondence, care management referrals, case approvals and more
- ✓ Increase accuracy in case processing using real-time data and automation that will create a consistent, compliant workflow
- ✓ Support population health management strategies and programs, including a timeline of member care history
- ✓ Ease regulatory compliance
- ✓ Ensure consistent clinical validation with industry-leading MCG and Change Healthcare clinical guidelines



The secret to care management success

The secret to care management success

The secret to care management success starts with integrating member-specific data and care management best practices. That way, you'll know who among your members need care management and you can create a complete view of member health for appropriate care plan and interventions. But assessing a member's needs, especially for complex cases, takes time. And creating the right plan for the individual and then following up on their progress toward goals can span weeks, sometimes months. That's why CareAdvance is built with efficiency in mind.



Identify, stratify and triage members for accurate and efficient referral to care management programs and to identify care gaps, reduce avoidable readmissions, and meet HEDIS and other quality goals.



Enable care managers to spend more quality time interacting with members using response-driven care plan assessments and recommendations.



Ensure best practices are consistently applied when developing member-specific care plans with pre-built, vetted clinical content.



Drive workflow efficiency with work management tools, including task calendars, work lists and role-based workflows that are just a click away from the most common daily tasks.

Standards-based clinical content



Standards-based clinical content

CareAdvance's optional standards-based content gives your care team an instant foundation for care management.

Cognizant's clinical experts and independent third-party review process do the research, design, development and vetting of standards and evidence-based clinical care management content so you don't have to. Not only that, we review the content annually for compliance with industry standards and update it as needed. This saves you both money and time that's better spent focusing on your members with complex needs.

Optimize CareAdvance with:



A foundation of **clinical content aligned with national/societal standards** and evidence-based guidelines



Integrated member and clinician educational tools from WebMD Ignite and other medical organizations (e.g., NIH, AHA, CDC)



Population identification and stratification using analytics combined with campaign profiles



Automated campaigns that trigger actionable prompts for care manager interventions



Care plan goals to support healthy behaviors, self-management and coordination of care



Initial and outcomes **assessments**



Communication tools such as care management letter templates



CareAdvance Standard Content

CareAdvance Standard Content creates a solid base for member education, care plan development and interventions to optimize health outcomes.

This content facilitates consistent clinical best practices and is customizable to help you maintain and propagate your institutional knowledge across all care managers within the organization.



General Assessment

Includes:

- Asthma
- Behavioral Health
- Heart Failure
- Medication Management
- Physical Activity
- Coronary Heart
- Stroke Disease
- Diabetes
- Maternity Care



Partner Programs

Includes:

- Comprehensive Pediatric
- Hepatitis C
- Multiple Sclerosis
- Traumatic Brain Injury
- Stroke



Specialized Assessments & Tools

Includes:

- PHQ2 & PHQ9
- Transitions of Care
- Wellness
- Learning and Literacy
- Assessment
- Home Safety



Comprehensive Bank of Care Plans

Includes:

- Effectiveness of Care
- Oncology
- Special Needs
- Care Coordination
- Self-Management

Did you know?

The flexibility and ease of CareAdvance enables your care management teams to quickly adapt and respond to changing business conditions, including time-critical needs when public health emergencies such as the Covid-19 pandemic occur.

Extended value with engagement

Extended value with engagement tools help you:



Engage Providers

With CareAdvance Provider®, extending the utilization management process to the provider desktop has far-reaching benefits for members, providers and utilization managers:

- Improve member satisfaction by avoiding treatment delays with automatic, real-time authorization request and response
- Streamline provider workflows, lowering their costs and improving their satisfaction
- Improve efficiency with increased auto-approvals
- Align your business policies with standards-based medical reviews



Engage Members

Through integration with TriZetto® Value-Based Benefits you can now integrate member incentives, care management and claims data to drive healthy member behaviors and habits:

- Automate incentive program enrollment, and integrate achievement tracking and reward processing with care plan progress against goals
- Incorporate members' fitness activity through a single connection point to hundreds of activity trackers and wearables
- Engage and motivate members to improve their health through the evidence-based WebMD Ignite Knowledgebase; plus, encourage ongoing education with quiz and reward features

Advanced technology offers extensible, flexible choices

Today's dynamic healthcare industry calls for health plans to deploy mission-critical solutions in ways that meet their business strategies and goals when and how they need them.

In response, we offer CareAdvance on premise or in the cloud. Either way, it's an open, flexible, event-driven system that's both proven and extensible.

CareAdvance is designed to support ever-changing care management models as well as regulatory and accreditation requirements so the value of your investment can increase over time.



Technology take-aways

- The open architecture easily connects and integrates with any type of external solution, including SaaS and digital technologies, when you want to extend care management capabilities
- The integration framework, with our unique data concept structure, simplifies bringing in data from multiple sources, and then using it in a simple and automated way
- The configurable advanced rules engine automates operational decisions
- Cloud- or web-based, it delivers the value you need
- Pre-integration with Facets or QNXT means no custom integration work adding time and money to implementations. And you never have to worry about system updates or upgrades “breaking” the integration between care management and core systems — or disrupting dataflows or workflows





Why trust Cognizant?

CareAdvance is a proven care management solution that:

- Has helped health plans for over 15 years effectively manage care for over 40 million lives across 23 health plans
- Makes it easy for plans to meet and maintain compliance requirements for utilization, case and disease management
- Scales from 10,000 to over 10 million members
- Maximizes operational efficiency with pre-built, productized integration with Facets or QNXT, the industry's leading claims systems
- Helps engage members with pre-built, productized integration with Cognizant's Value-Based Benefits
- Reduces costs, delays in care and provider effort by integrating electronic prior authorizations from provider workflows
- Helps ensure best practices are consistently applied for case and disease management by leveraging an available library of 14 pre-built workflows, 62 assessments, 319 care plans and a care management rules configuration engine



Cognizant helps engineer modern businesses by helping to modernize technology, reimagine processes and transform experiences so they can stay ahead in our fast-changing world. To see how Cognizant is improving everyday life, visit them at www.cognizant.com or across their socials [@cognizant](https://twitter.com/cognizant).

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