Driving Digital Innovation in Healthcare Claims Processing

The landscape has changed for healthcare claims

Increasing costs and a shift to value-based care are making efficient claims processing more important than ever for health-insurance companies. Redis Enterprise provides the building blocks for modern digital claims-processing platforms with fast in-memory database performance, real-time event processing, and artificial intelligence and machine learning (AI/ML) model serving.

$12B in total annual costs avoided by automating medical claims submission

1 in 10 claims are incorrect, requiring additional investigative effort by insurers

33% projected annual cost savings from transitioning to fully digital claims processing

Insurance companies receive millions of claims each day from healthcare professionals via a vast array of channels. Errors in the claims process lead to countless phone calls and resubmittals that waste time, raise the cost of care, and frustrate patients and providers.

Traditional claims processing systems that run on legacy architecture and rely on inflexible approval rules can’t process claims quickly, and are significantly harder to update. Modernizing these systems can enable insurers to efficiently handle healthcare claims in real time.

Building a superior claims experience

Drive digital claims processing workflows with events

Events can represent claims workflows without tightly coupled application logic. Use Redis Enterprise to trigger claims data processing in response to updates, and as a store for real-time events and streams.

Deliver real-time claims status inquiry

Claims processing involves expensive queries across dozens of systems. Redis Enterprise can be used as an event store and search engine to speed claims-status inquiries, or as an in-memory database for fastest performance.

Apply AI and ML to claims adjudication and fraud detection

While AI and ML models typically need to query reference data stored in a separate database, Redis Enterprise lets you serve deep-learning models directly where data is stored to enable faster claims adjudication and fraud detection.

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Addressing the challenges of digital claims processing

Redis Enterprise improves digital claims processing systems by providing high throughput, minimal latency, and high availability. It combines unmatched database performance with capabilities that can be used to more efficiently perform claims status inquiries, detect insurance fraud, and improve operational efficiency.

Build real-time digital claims processing with Redis Enterprise

Capture
- Capture insurance claims information with native JSON support in Redis.
- RedisJSON

Adjudicate
- Improve the speed and accuracy of fraud detection with AI/ML model serving.
- RedisAI

Inquire
- Quickly perform member lookups with in-memory database performance.
- Redis Enterprise

Validate
- Confirm whether members are in-network by examining graph connections between your customers.
- RedisGraph

Aggregate
- Redis Streams
- RediSearch

Redis Enterprise can be used as both an event store and a search engine, allowing claims workflow events to be seamlessly registered to event streams and aggregated in real time.

Operational efficiency without compromising service

Health insurers need to strike a cost-effective balance between claims efficiency and value-based care. Redis Enterprise offers flexible storage options and a multi-tenant architecture to help make the most of your infrastructure, while providing significant cost savings compared to other vendors.

Get started with Redis Enterprise
redis.com/solutions/use-cases/claims-processing

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