UST HealthProof

UST HealthProof Delivers Best-in-Class Customer Outcomes Across Multiple End-User Profiles

Health Plan A

Medicaid and Medicare D-SNP
425K Members

Health Plan B

ACA, Medicare, Commercial
1MM Members

Health Plan C

Medicaid and CHP+
725K Members

Pain Points

Health Plan A
- High Admin Cost
- Lack of Centralized Reporting
- Long Call Center Wait Times
- Siloed Ecosystem

Health Plan B

50+
Legacy Systems and Applications

2500+
Entangled Business Rules

Lack of Centralized Reporting

Health Plan C
- Early Adopter of QNXT with Considerable Customization
- Sub-Par Performance
- Call Center Inefficiencies
- Siloed Ecosystem

UST HealthProof Results

Health Plan A

30%
Reduction in Overhead Costs

90%
Reduction in Monthly Claims Backlog

50%
Reduction in Call Handling Time

25%
Membership Growth

Health Plan B

<12 Months
Core System Implementation Timeline

50%+
Total Cost of Ownership Savings

Health Plan C

<12 Months
Transition from QNXT to HealthProof BPaaS

<0.25%
Enrollment Fallout During Transition

<6 Months
Time post-HealthProof Implementation to Demonstrate Operational Metric Improvement

Organizational Benefits

- Automated Claims Management
- Claims Adjudication and Accuracy Above Industry Benchmark
- Improved Enrollment Accuracy and Member Engagement
- 99.8%+ Absolute System Availability
- Payment Variance < 0.2%
- 99.7% Financial Billing Accuracy

About HealthProof

We streamline health care operations with trusted solutions, ensuring our customers meet their strategic objectives and prioritize member well-being.