

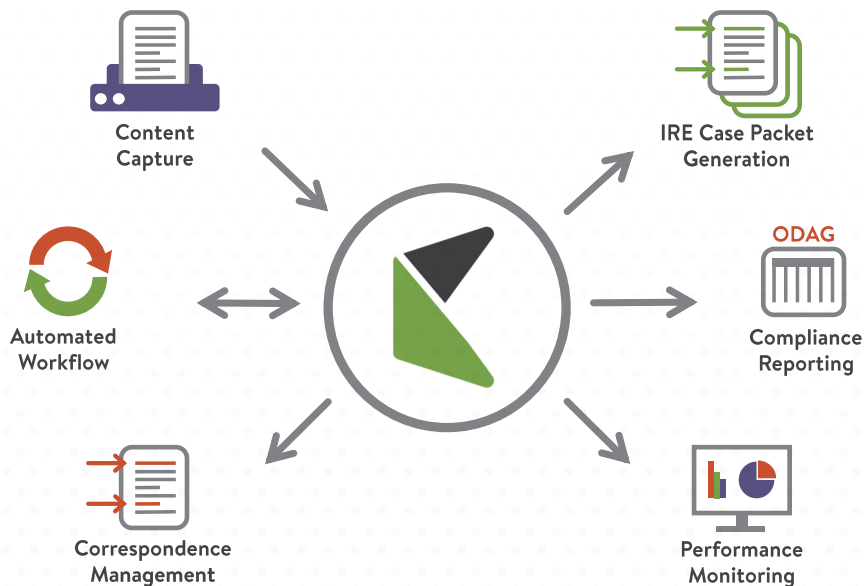
Increase Timeliness While Improving Quality and Enforcing Compliance

Quality improvement is talked about more and more within the healthcare payer industry. Quality isn't just the service provided, but the complete process of doing business. The appeals & grievance process is complex and manual, making it difficult to manage deadlines, obtain complete information and report accurately. Any misstep in the process can mean lengthy audits, heavy fines or even suspension of enrollment. Kiriworks Appeals & Grievances (A&G) is designed to ensure these missteps don't happen, data and information is documented accurately and all compliance needs are met. Kiriworks A&G tracks the process from beginning to end, providing a more efficient and effective process and ultimately giving a transformational approach to compliance challenges.

AUTOMATIC GENERATION OF
CMS UNIVERSE

SIMPLIFY COMPLEX DATA

AUTOMATE CORRESPONDENCE
CREATION



Automatic Generation of CMS Universe

Generating CMS' universes can be a complex process that takes time, is difficult to manage and sometimes inaccurate. With Kiriworks A&G a single source of truth ensures all data is captured accurately and formatted correctly. Universe reports can be generated at any time with the click of a mouse. This enables users to proactively manage the quality of their reports to ensure compliance and avoiding penalties for timeliness of reports. Our solution provides businesses with confidence going into an audit that their data is complete and meets CMS requirements.

The screenshot displays a software interface for managing appeals and grievances. A 'Constraints' dialog box is overlaid on the main data table, showing filters for 'Case Open Date' (>= 1/1/2016) and 'Case Close Date' (<= 12/31/2016). The main table lists various records with columns for Beneficiary Name, Enrollment Effective Date, Cardholder ID, Contract ID, Plan ID, Patient Residence, Date the request was received, and Time the request was received. The table is currently displaying 516 records.

Beneficiary First Name	Beneficiary Last Name	Enrollment Effective Date	Cardholder ID	Contract ID	Plan ID	Patient Residence	Date the request was received	Time the request was received
Abdul	Dyer	2016/04/18	51183984	H9384	005	11	2016/08/04	20:12:37
Abel	Dejesus	2016/07/15	86782112	H9384	005	03	2015/09/27	10:26:45
Adam	Durham	2016/03/08	27979053	H9384	005	04	2016/06/08	07:43:43
Adara	Levine	2016/08/16	86255035	H9384	005	03	2016/07/27	18:53:34
Adara	Griffin	2016/08/08	95485009	H9384	005	06	2016/07/29	01:53:52
Adara	Reilly	2016/02/11	10855642	H9384	005	06	2015/11/23	14:10:33
		2016/02/18	31935292	H9384	005	11	2016/08/13	13:17:11
		2016/05/19	68102408	H9384	005	01	2016/06/05	12:37:53
Aileen	Guy	2015/10/02	86969255	H9384	005	00	2016/05/12	22:49:42
Alana	Wynn	2016/05/04	65274893	H9384	005	01	2015/12/04	03:24:49
Alea	Jimenez	2016/04/04	68510668	H9384	005	11	2015/12/20	03:49:29
Alexander	Cooke	2015/11/22	65712179	H9384	005	06	2016/07/30	09:41:52
Alexander	Ellis	2015/12/21	97251489	H9384	005	06	2016/07/09	10:18:45
Alexandra	Sellers	2016/06/05	61414641	H9384	005	09	2016/05/18	13:55:04
Alfonso	Snow	2015/11/21	97260456	H9384	005	09	2016/06/03	10:25:12
Alika	Winters	2016/03/16	67143034	H9384	005	06	2015/10/31	10:57:57
Alisa	Conley	2015/11/05	44058150	H9384	005	04	2016/08/27	09:13:51
Allen	Little	2016/04/13	80734281	H9384	005	11	2016/05/05	09:22:29
Alyssa	Bowman	2016/06/23	82145973	H9384	005	09	2016/08/17	09:42:22
Alyssa	Cotton	2015/11/21	19322943	H9384	005	04	2015/12/09	09:22:34

Automatic capture of data throughout the process allows users to generate their Universe with the click of a button.

Simplify Complex Data

Process improvement is an ongoing challenge that many businesses face. Kiriworks A&G provides reporting dashboards that allow real-time process insight. Managers can monitor due dates and receive alerts when dates will be out of compliance. They can also manage work distribution by processing time or priority by driving directly into the case from the dashboard. Our goal is to give users the tools necessary to make educated decisions when it comes to urgent matters, bottlenecks and delays in the process. Kiriworks A&G empowers users to make informed decisions necessary to improve the overall quality of their process.



Screenshot from Appeals and Grievances dashboard allowing users to quickly digest data.

Automate Correspondence Creation

Timely and organized correspondence is essential for communicating with providers and members. Kiriworks A&G manages the correspondence generation process by creating a central library of approved templates and leveraging data that already exists within the business environment. Correspondence is created automatically with the date and time of creation being tracked and is stored within Kiriworks A&G which can be accessed at any time. Automating member and provider communications ensures data integrity and eliminates process inefficiencies. Creating the right letter, at the right time, with the correct language creates a more efficient process and reduces the mistakes from manual creation.

Overall Impact

Kiriworks A&G manages every aspect of the appeals and grievances process from automated correspondence creation, CDAG & ODAG Universe reporting, and real-time process dashboards. It has been designed with compliance at the center of the solution. Kiriworks A&G begins managing and monitoring the process as soon as an appeal, grievance, complaint or inquiry is received. Our focus is to make your process more efficient, meet compliance regulations and improve the overall quality of your member & provider experience.

Learn more at Kiriworks.com/appeals

Milwaukee / Cleveland / St. Louis / Chicago
1-800-242-1777 / kiriworks.com

twitter.com/kiriworks facebook.com/kiriworks

Appeals & Grievance Department
14725 Detroit Ave. Suite 260
Lakewood, OH 44107



February 9, 2017

Michael Scott
123 West Mifflin St.
Scranton, PA 18501

Member Name: Michael Scott
Member ID: 1234567

Dear Michael Scott,

Your request was denied

We looked at the facts in your case and after a review by a Board Certified Medical Director, Kirihealth Medicare Advantage ("Kirihealth") has decided that our first decision to deny authorization for **knee surgery** was right.

Why did we deny your request?

We denied the authorization of services/items listed above because you asked us to cover services with a provider that is not part of our network. Your 2016 Evidence of Coverage Chapter 3 Page 37 says out of network care is only covered in the case of an emergency.

We are here to help you

You can call us at the number listed below if you have questions about how to name a representative. If you have problems hearing or speaking, please call us at TTY 711 or the number listed below for your area. Kirihealth Member Services Department hours of operation are:

- October 1 through February 14: 8 a.m. to 8 p.m., 7 days a week
- February 15 through September 30: Monday through Friday 8 a.m. to 8 p.m.
- You may leave a voicemail message after-hours, Saturdays, Sundays and holidays.
- Language services available upon request

For Pennsylvania Residents:
Call 1-800-685-5209
TTY users should call 711 (1-800-654-5984)

Sincerely,
Jon Swisher
Analyst, Appeals & Grievances

Kirihealth offers HMO plans with a Medicare Contract. Some Kirihealth plans have a contract with Medicaid in the states where they are offered. Enrollment in these plans depends on contract renewal.

