



The Cúram Solution for Medical Assistance transforms and modernizes medical assistance and disability programs with a powerful, proven set of business tools and processes.

IBM Cúram Solution for Medical Assistance

Government providers of medical assistance and disability programs need solutions that not only modernize, but transform the way they do business. Facing a changing philosophy focusing on outcomes, an increasing demand for services while struggling with high worker turnover, complex and often changing legislation and antiquated systems, agencies are incapable of meeting current, much less future business needs. Organizations need solutions that accurately determine the most appropriate mix of benefits and services to best serve the client. They need solutions that integrate service delivery throughout the enterprise spanning multiple programs, benefits and services. They also need solutions that are scalable, flexible and more easily interface with existing systems and that can be implemented more quickly, with less risk and with a lower total cost of ownership.

The IBM Cúram Solution for Medical Assistance is a commercial off-the-shelf (COTS) integrated service delivery solution that equips organizations with a powerful, proven set of business tools and processes:

- Supports multiple models of medical assistance including government subsidized insurance models requiring client payment of premiums
- Integrates service delivery by allowing agencies to share evidence and business processes and determine eligibility across multiple programs
- Automates the complexities associated with eligibility and entitlement determination using prepopulated rule sets that can be more easily appended and modified

In support of the Patient Protection and Affordable Care Act (PPACA), the Cúram Solution for Medical Assistance helps enable agencies to improve the efficiency and effectiveness of managing eligibility and enrollment services for a wide range of medical assistance and disability programs, including Medicaid. It delivers the rules, evidence, and streamlined eligibility to support the requirements mandated by the PPACA.



The Cúram Solution for Medical Assistance delivers a comprehensive set of business processes, rules, and evidence. It can be integrated to other Cúram IBM solutions, helping organizations to more efficiently screen clients, automatically determine eligibility, and integrate service delivery for multiple needs-based programs, including income, food, and medical support assistance. It is also designed to integrate seamlessly with other IBM Cúram components for an enterprise-wide solution providing holistic service delivery, integrated case management, service planning, and financial and provider management.

The Cúram Solution for Medical Assistance is a commercial off-the-shelf (COTS) solution that integrates service delivery, allowing agencies to share evidence and determine eligibility across multiple programs.

Key features and benefits:

- Outcome-based delivery model is client focused and client centric
- Provisions for complex processes including Children's Health Insurance Program (CHIP), spend-down, Long Term Care and retroactive eligibility
- Includes evidence, rules, and business processes for mandatory US Medicaid coverage groups, as well as optional programs, such as Long-Term Care, Refugee, Emergency Medical Assistance, and Breast and Cervical Cancer
- Helps facilitate compliance for US Health Care Reform (PPACA) requirements for enhanced eligibility and enrollment for Medicaid programs
- Complex eligibility rules and processes are managed by the system to enhance caseworker decision-making and effectiveness
- Cascading eligibility allows administrators to see program hierarchy and prioritize programs and allows for single or multiple program eligibility results to deliver the optimum benefits to clients based on their distinct circumstances
- Integrated verification and evidence management tools help ensure the greater accuracy of client information
- Change-in-circumstance processing supports retroactive changes in data and automatically reassesses client benefits
- Eligibility summaries and budget sheets display details on how eligibility is determined for medical assistance coverage groups
- Helps enable agencies to more easily configure and extend the solution using the extensive administrative and development tools, speeding the deployment and simplifying the maintenance of the system



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