





Utilization Management

A cutting-edge, customizable utilization and prior authorization management system for health plans.

Features



Comprehensive platform where you get three levels of evidence-based assessment for disease management



Primary Care Physician Office Portal for electronic transfer of authorization requests



Compact, efficient and comprehensive workflows with imbedded quality checks



Real-time global view of authorization and outstanding requests from multiple sources



Dedicated product (Calypso Smart Assign®) for intake, processing nurse review, MD review, and PAC (Prior Auth Coordinator) approvals within an hour



Full Health Plan functionality, including Member and Provider correspondence



Consumer Friendly Language (CFL) capability



Designed to integrate easily with Managed Care systems



Optimized EDI (278 transaction) capability



Letter batching, CMS-ODAG Reporting



Utilization Management

Benefits



Optimized for case and disease management



Flexible architecture to meet specific requirements



Real-time updates and notifications



Identification of Patients who need your services at the health plan level



User-friendly interface



Reduced turnaround time

Utilization Management

Our Other Solutions



Eligibility, Enrollment and Member Management



Premium Billing



Claims Adjudication



Encounter Data Processing System (EDPS)



Provider Portal



Customer Service Management



Appeals, Grievances and Complaint Tracking Module



Member House



Provider Villa



Utilization Management



Transforming Healthcare

For more information on our products and services, please reach out to:

Maru Krishnamurthy

Director, Strategy and Growth



marutheeshk@mirrahealthcare.com | info@mirrahealthcare.com



+1 573 418 9707 | +1 844 476 6900

www.mirrahealthcare.com

