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Faster claims and auto-adjudication in Ohio Medicaid

Gainwell Enterprise Claims and Encounter Processing







Challenge

Ohio Medicaid was operating under a legacy system that created significant inefficiencies. Managed Care Organization (MCO) encounter submissions that were difficult to reconcile, leading to data gaps and reporting challenges. Project timelines averaged nine months, slowing the pace of innovation and responsiveness. Manual claims editing further compounded delays, increasing the risk of errors and compliance issues. Despite these hurdles, the state needed to maintain its T-MSIS blue status—a benchmark for high-quality federal reporting.

Solution

To address these issues, Ohio implemented Gainwell Enterprise Claims, Encounters, and Financials (CEF), a modular and scalable MES solution. A key innovation was the creation of a "one-front-door" claims clearinghouse, which allowed the state to view provider claims before they reached MCOs improving transparency and control. Automated workflows replaced manual claims editing, while advanced configurability reduced the need for custom coding and accelerated implementation. The solution also tightly aligned T-MSIS reporting with the claims engine, ensuring compliance with federal standards.

Fast Facts: Ohio Medicaid

2.9 million

Medicaid members

65% of Medicaid spend flows through Managed Care

\$30.3 billion annual spend

Key functionality included:

- End-to-End Claims Processing & Adjudication:
 A unified "one-front-door" clearinghouse streamlined claims flow, pricing, and adjudication from providers to MCOs.
- Configurable, Automated Workflows:
 Automated workflows and flexible configurations eliminated manual edits and accelerated implementation timelines.
- Compliance-Driven Reporting & Integration:
 Integrated reporting tools and federal alignment ensured high-quality,
 T-MSIS-compliant data throughout the system.

Results

Gainwell Enterprise CEF helped Ohio Medicaid improve operational efficiency, accuracy, and compliance. By modernizing its claims, encounters, and financials infrastructure, Ohio Medicaid was able to achieve:

- >99.5% auto-adjudication rate:
 Reduced manual intervention and administrative
 overhead, streamlining claims processing.
- Accelerated project timelines: Implementation cycles were shortened by weeks or even months, enabling faster deployment of system enhancements.
- Improved claims reconciliation:
 Enhanced visibility and control over MCO claims and encounters led to more accurate and timely reporting.
- High T-MSIS data quality maintained:
 Despite complex system changes, Ohio
 Medicaid preserved its federal reporting
 standards, reinforcing operational excellence.

Visit our our site to discover how Gainwell Enterprise Claims, Encounters, and Financials can help your Medicaid program achieve similar success.

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