CitiusTech

CitiusTech Offering: Insights Assistant for Payers

Limitation with BI tools and unlock with CitiusTech's Payer Insights Assistant

Empowers Payers with a self-service, interactive tool to explore quality metrics, claims, member and Provider network insights through natural language queries, thereby eliminating IT dependencies and specialized resource expertise for delivering insightful analytics.

Typical Scenarios with Traditional BI Approach	Challenges
IT dependencies and high cost of analytics operations **70% Payers** cited limited staff and competing organizational demands to meet analytics requests and new datasets integration (claims, clinical, third-party inputs)	**HEDIS/STARS Quality Analyst** How do I assess current compliance for contract X in view of long delays in updating quality reports with latest HEDIS measures?
Under-utilized healthcare data for clinical & business decisions **47% of healthcare data** remains untapped, due to inability to tap into multi-modal data such as clinical notes, transcripts and external sources (e.g. EHR)	**Care Manager** How do I merge care gaps data with discharge summary notes to shortlist & assign members to care plan X?
Delayed, static and retrospective insights **40% of care gap closures** are missed due to real-time tracking, costing plans below 4 stars $278–$396 in bonuses per MA enrollee	**Claims Negotiator** How do I benchmark claim amount reimbursed for GLP-1 drugs across the network?

CitiusTech Offering - Payer Insights Assistant

Interactive, self-service interface for users

Create, customize, and iterate insightful analytics independently, reducing turnaround time and resource costs

Unified semantic layer across sources

LLM-powered semantic parsing interprets both structured and unstructured data & enables context-aware queries

Real-time data access for faster decisions

Provides the ability to run ad-hoc queries directly on large datasets, with real-time access to most current data

Potential Use Cases for Payers

Health Plan Quality Analytics

Interactive analysis at a contract and measure-level to build targeted cohorts, identify actionable items and drive actions to improve ratings for Star measures

Note : Implemented for a client by transforming their quality improvement with an intelligent chat-based agent, delivering 65+ actionable insights and faster decision-making.

Claims Analytics

Conversational interface for claims analysts, adjudicators and negotiators to assist with utilization reviews, payment integrity audits, FWA detection across various claim types (medical, pharmacy) and LoBs (Medicare, Medicaid, Commercial).

Member Cohort Builder

Interactive, easy to use chatbot to dynamically generate member cohorts in real-time, in order to assign them to VBC or disease management programs

Provider Performance Analytics

Conversational interface to analyze Provider performance against a facility, geography, diagnosis or condition level, for quality and VBC programs

Non-exhaustive list of use cases