

# Comparative Analysis: Arcsona's Claims Solution (Salesforce) vs. Pega for Health Insurance Claims Processing

# Introduction

In today's rapidly evolving healthcare landscape, efficient claims processing is essential for healthcare payers to optimize operations, reduce costs, and enhance member satisfaction. This document provides a comparative analysis of Arcsona's Claims and Pega for health insurance claims processing, highlighting the unique advantages offered by Arcsona's solution.

### 1. Integration

#### Arcsona's Claims:

Seamless integration with existing systems, provider networks, and data sources, utilizing flexible and configurable EDI integration module.

Built-in third-party integrations for claims validation and check-run.

Additionally, Arcsona's Claims benefits from seamless integration with other Salesforce products and third-party applications on the Salesforce AppExchange, further enhancing its usability and adaptability to diverse user needs.

### Pega:

Like other BPM tools, Pega provides integration capabilities with various systems but require additional customization efforts as there are no no-code tools in the platform.

# 2. Unified Member and Subscriber Management

#### Arcsona's Claims:

Arcsona's Claims revolutionizes member and subscriber management for payers by consolidating all aspects into Salesforce, offering a comprehensive 360-degree view. From policy management to claims processing, prior authorizations, inquiries, and appeals & grievances handling, Arcsona's solution provides seamless integration and real-time





visibility across every stage of the member journey, empowering payers with holistic insights and streamlined operations.

### Pega:

Pega does have a rudimentary CRM, but we have no information on usage. We note that there is no quote and enrollment functionality in this CRM, so integrating to another system for this functionality appears necessary.

### 3. Customization

#### Arcsona's Claims:

Highly customizable low code workflows and business rules tailored to the specific needs of healthcare payers utilizing the state-of-the-art and ever enhancing Salesforce platform.

#### Pega:

Customers frequently provide feedback regarding the steep learning curve and technical knowledge required to use and customize Pega; even simple change to the application require expert resources while dedicated teams need to be assembled to meet everchanging industry standards.

# 4. Automation and Efficiency

#### Arcsona's Claims:

Advanced automation capabilities for claims ingestion, auto & manual adjudication, audits, and check-run reducing manual intervention and processing time.

Automate tedious processes in a matter of hours using Salesforce's workflow automation tools like Flows, Omniscripts and Flow Orchestration.

### Pega:

Pega's automation and customization options are limited as compared to Arcsona's Claim + Salesforce. This leads Pega customers to write code and increase technical debt/cost of ownership.

# 5. User Experience and Interface

#### Arcsona's Claims:

Arcsona's Claims boasts a superior user experience (UX) and user interface (UI) due to its foundation on Salesforce Lightning Web Components (LWCs). Leveraging the intuitive design and seamless interaction capabilities of LWCs, Arcsona's Claims offers healthcare





professionals an intuitive and visually appealing platform that enhances productivity and streamlines the claims processing workflow with its user-centric approach.

### Pega:

Pega's UI and UX are often described as "old school," characterized by a traditional design that may feel outdated compared to modern interfaces. While functional, Pega's interface lacks the sleekness and intuitive navigation found in more contemporary platforms, potentially hindering user adoption, productivity and engagement.

# 6. Accelerated Portal Deployment

#### Arcsona's Claims:

Arcsona's Claim extends its functionality by seamlessly integrating with Salesforce Experience Cloud. Leveraging Arcsona's Spark, payers can rapidly deploy tailored provider and member portals within days, offering intuitive self-service experiences. This integration empowers payers to enhance engagement and satisfaction while accelerating portal deployment and ensuring seamless access to critical healthcare information.

### Pega:

Pega does not provide a member or provider portal and building one would require a significant amount of time and development resource.

# 7. Scalability and Performance

#### Arcsona's Claims:

Utilizing the power of the Salesforce platform provides scalable architecture capable of handling large volumes of claims with minimal performance impact.

### Pega:

Scalability dependent on infrastructure and configuration and may require additional resources for handling high volumes of claims.

Limited cloud deployment options compared to Arcsona's Claims.

# 8. Analytics

#### Arcsona's Claims:

Arcsona's Claims leverages Salesforce's robust analytics capabilities including reporting, dashboards and CRM Analytics to run advanced analytics for comprehensive insight into claims processing, member trends and compliance.





### Pega:

Specific capabilities and functionalities of analytics tool in Pega vary depending on version and licensing. Advanced analytics capabilities can be acquired by paying additional cost.

## Conclusion

®arcsona.com | Digital Ignition

Arcsona's Claims outshines Pega in critical aspects of healthcare claims processing. Its seamless integration with Salesforce enables interoperability with existing systems and third-party applications, while its 360-degree view of member management streamlines operations from policy to claims handling. With highly adaptable workflows and advanced automation, Arcsona's Claims reduces manual intervention and enhances efficiency. Its user-centric interface, built on Lightning Web Components, ensures intuitive navigation and productivity. Moreover, rapid portal deployment via Salesforce Experience Cloud accelerates engagement and satisfaction. With scalability and performance optimized, Arcsona's Claims is the top choice for healthcare payers aiming for operational excellence and member-centricity in today's dynamic healthcare environment.