Simplify Healthcare®

REGIONAL PAYER CUTS OPEN ENROLLMENT TIME IN HALF, BOOSTS ACCURACY

Claims1® Delivers Faster, Higher-Quality Open Enrollment

THE CHALLENGE

A regional health plan in the Northeast needed to improve efficiency during the ASO open enrollment season, the highest-volume and most time-sensitive period in the payer calendar.

During this time, health plans must configure benefits, update group structures, and validate eligibility and claims logic before strict deadlines. Any delays or errors directly impact member experience, compliance, and client satisfaction.

THE SOLUTION

The plan partnered with Simplify Healthcare® to modernize its open enrollment configuration process using Claims1®, a claims lifecycle management platform. During the 2025 cycle, the team managed 180 groups, with shell configuration lasting 23 days. Limited audit tooling resulted in low quality visibility, reflected in an external audit score of 23%.

Platform enhancements launched in Claims1® in 2025 significantly streamlined the operating model for the 2026 cycle, improving both speed and quality across the configuration lifecycle. As a result, shell completion time was reduced by 50%, while audit scores exceeded 97% across all phases demonstrating a more efficient, scalable, and high-quality configuration process. Additionally, shell build was completely automated by May 2026.

KEY PLATFORM IMPROVEMENTS DRIVING RESULTS

01 | Simpler, Faster Configuration UI

A redesigned interface reduced manual steps and streamlined workflows, enabling faster and earlier configuration.

- Started all shells 12 days earlier in the season
- Cut completion time in half (23 → 11 days)
- Reduced end-of-cycle pressure through parallel work

02 | Improved Quality and Audit Scoring

Launched efficiencies which introduced consistent, real-time quality measurement.

- External audit score improved from 23% to 88% (3.8x increase)
- Shell audit score reached 99%
- Full build audit score reached 97%

03 | Self-Service Review (SSR)

A new self-service capability enabled earlier validation by client teams.

- 1,028 reviews completed
- Issues identified earlier, reducing downstream rework

04 | Shift Toward Quality in Full Build

Full build time increased slightly as more validation was completed upfront.

- Increased from 17 to 19 days
- Higher audit scores confirm this as a quality investment, not inefficiency

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RESULTS

ASO Open Enrollment Season Performance Comparison

The following table summarizes key performance indicators across the two peak enrollment cycles.

Metric	2025 Season	2026 Season
Shell Days to Complete	23 days	^ **11 days**
100% Shells Started	December 13	^ **December 1**
Full Build Days	17 days	19 days (expected shells prioritized)
SSRs Completed	N/A	^ **1,028**
External Audit Score	23%	^ **88%**
Shell Audit Score	N/A	^ **99%**
Full Build Audit Score	N/A	^ **97%**

KEY TAKEAWAYS

50%
Faster shell completion

3.8x
Improvement in external audit scores

Near-perfect accuracy across all configuration stages

Earlier start and more balanced workload across the cycle

CONCLUSION

The results achieved by the regional payer illustrate how Claims1® can help payer organizations modernize and scale their open enrollment operations. By streamlining configuration workflows, introducing automated quality controls, and enabling earlier validation through self-service capabilities, Claims1® helps payers accelerate configuration timelines and improve accuracy. For payers managing complex, high-volume enrollment cycles, Claims1® provides a more efficient, predictable, and quality-driven approach to configuration, supporting better member outcomes and stronger client satisfaction.

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