

Building Accurate Member Materials with Centralized Plan & Benefits Data

Presenter:



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What We'll Cover Today

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Welcome and Introduction

02

The End-to-End Workflow

03

Centralize Your Data

04

Create Your Collateral

05

Deliver to Members

06

Case Study

Modernizing Health Plan Operations with Four Core Solutions:

Digital Mailroom — Intelligent Intake & Governed Workflows

- Multichannel capture & document prep
- Classification, extraction & validation using rules + targeted AI
- Paper-to-EDI (P2E) & data normalization
- Governed workflows & audit trails

Delivery Models: SaaS • BPaaS
HITRUST i1 Certified

Claims Adjudication

- Front-end processing & payment integrity
- High-volume & complex adjudication
- Knowledge AI (RAG) for research & exception handling

Delivery Model: BPO

Member Communications & Reconciliation

- Plan-benefit document management & print/fulfillment
- Coordination of benefits processing
- Medicare Secondary Payer reconciliation
- AI translation & 508 remediation (human-in-the-loop)

Delivery Models: SaaS • BPaaS

Contact Center

- Member & provider support
- Omnichannel engagement & call handling with AI Tier-1 automation & Agent Assist
- Credentialing & verifications

Delivery Model: BPO



Global Footprint

- 150+ Health Plans Served
- 1100+ Employees Globally
- 9 Nationwide Secure Facilities
- 1 Manila, Philippines Secure Facility
- HQ in Tampa, FL



The End-to-End Member Communications Lifecycle



The Communications Process



PBP Ingestion

Raw Data Processing
Data Validation

Single Source of Truth

Combines Plan and Benefits Data

Collateral Engine

Dynamic Templating, Versioning and Review

Print Queue

Handoff to Vendors

Fulfillment

On-Time Delivery

Start With a Single Source of Truth





Automated CMS-schema validation



Real-time discrepancy flagging



Built-in completeness gates



Flag it before it flows

Turning Raw Benefits Data Into Structured Outputs

PBP Import

New Import

In-Progress Imports

Name	Updated On	Updated By	Created On	Created By	File Name	Status	Actions
Test H4875-021-1 HMOPOS	11/27/24	Kelly Altmann	11/27/24	Kelly Altmann	PBP_JSON_File_11272024101105.zip	InProgress	

Items per page: 10 1 - 1 of 1

PBP Import

Filter Fields

Header	Field Description	Field Name	Previous	Incoming (New)
1a Inpatient Hospital Acute - BP				
1a Inpatient Hospital A...	IP hosp acute - Benefit Period	IPHA_BP	Original Medicare	Original Medicare
1a Inpatient Hospital Acute - LRD				
1a Inpatient Hospital A...	IP hosp acute - IN MC lifetime reserve ...	IPHA_LRD_IN	\$0 copay for each lifeti...	\$0 copay for each lifetime reserve day
1a Inpatient Hospital Acute - LRD - OON				
1a Inpatient Hospital A...	IP hosp acute - OON MC lifetime reser...	IPHA_LRD_OON	ENTER AMOUNTS; cont...	ENTER AMOUNTS; content not in PB...

- Step 1:** PBP File Uploaded (JSON)
- Step 2:** Companion Data Upload
- Step 3:** Automated Completeness Scan
- Step 4:** Flags Missing or Incomplete Fields
- Step 5:** Resolution
- Step 6:** Data Flows

Why a Single Source of Truth Reduces Risk at Scale



Combines Plan and Benefits Data

- One System = One Source of Truth
- Single Format
- Single Point of Entry

Single PBP Field → Multi-Sync

- Zero Manual Entry = Zero Drift
- Field: PCP_IN= \$15
- Auto-Populates ANOC Sec.1, EOC Ch. 4p.17, SB Front Page

Enterprise Ripple Effect

- Lower Member Call Volume
- Fewer Claims Denials Due to Mismatches
- Eliminates Costly Errata and Reprints

Transform Data Into Member-Ready Collateral



[Insert 2026 plan name] Annual Notice of Change for 2026 1

[MA-PD HMO (and HMO-POS, I-SNPs, C-SNPs) models]
[2026 ANOC model]

[Insert 2026 plan name] ([insert plan type]) offered by [insert MAO name] [insert DBA names in parentheses, as applicable, after listing required MAO names]

Annual Notice of Change for 2026

[Optional: Insert member name]
[Optional: Insert member address]

You're enrolled as a member of *[insert 2025 plan name]*.

This material describes changes to our plan's costs and benefits next year.

Automate – Don't Copy-Paste

- Modular, CMS-Compliant Templates
- Built-in Business Rules
- Color-Coded Content for Easy Review

Version Control

- Role-Based Permissions
- Revision Tracking
- Audit-Ready

Dynamic Composition

- One Template = Many Versions
- Consistent Formatting
- Auto-Updates of TOCs, Page Numbers, Section Numbering

GoldCare Medicare Advantage Prime Plus Annual Notice of Change for 2026

1

GoldCare Medicare Advantage Prime Plus (HMO) offered by GoldCare Medicare Advantage (dba GoldCare Medicare Advantage Prime)

Annual Notice of Change for 2026

You're enrolled as a member of GoldCare Medicare Advantage Prime Plus.

This material describes changes to our plan's costs and benefits next year.

- **You have from October 15 – December 7 to make changes to your Medicare coverage for next year.** If you don't join another plan by December 7, 2025, you'll stay in GoldCare Medicare Advantage Prime Plus.

Be Ready

- Identify Project Champions
- Dedicate Document Developers
- Alert SMEs and Content Owners

Review Early

- Global Compliance Review of Model Language
- Global SME Review of Common Language

Track Your Progress

- Establish Common Workspaces for Collaboration
- Use Task Tracking Tools
- Stay in Contact with Your SMEs

Finalize & Deliver With Accuracy





EDI Handoff to Print Vendor

Seamless integration without missed emails

Staggered Runs + QA Gates

Batch by geography: NY → CA → TX → reduces USPS sort time

Serialized Tracking

Piece-level tracking



THE HEALTH PLAN:

A leading Medicare Advantage & Commercial Group Plan, located in the Southwest with 52 hospitals, more than 800 patient care sites, 7,300 active physicians, and over 49,000 employees.

THE CHALLENGE:

- Small marketing team of 3 responsible for creation and fulfillment of member materials for 480+ unique plans spanning both Medicare Advantage and Commercial lines of business.
- Plan, benefits, and operational data scattered across multiple systems and vendors.
- Eight different vendors involved in data, design, print, and fulfillment.
- Multiple templates across plan types and states, creating high risk for defects, errata, and reprints.



THE SOLUTION:

- Consolidated **8 vendors into 1** integrated data and document lifecycle partner.
- Centralized plan and benefits data into a **single source of truth**, with automated population of benefit grids.
- Standardized and consolidated templates across states and lines of business.

THE IMPACT:

- Enabled a **3-person team** to produce **46,000+ member materials for 480+ plans** on time.
- Improved accuracy, reduced reprints and errata, and strengthened audit readiness and cross-functional consistency.

Metric	Example Input	Annualized Value
FTE Time Saved	0.5–1.0 FTE per bid cycle	\$40,000–\$80,000 annually
Compliance Risk Avoidance	25% reduction in rework / corrections	\$10,000–\$25,000
Accelerated Delivery	2–3 weeks faster time-to-market	Enables earlier member communications & CMS submissions
Efficiency Gains (Automation)	15–25% fewer manual steps per cycle	~100–200 labor hours saved

Thank You!



Scan the QR code to schedule a 20-minute Member Communications Readiness Review.

We'll map your process, highlight 2–3 quick wins and outline a realistic 30-day implementation—no prep needed.



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