# PAYER-PROVIDER ENGAGEMENT

Health payers occasionally underperform for a variety of reasons, many of which involve lack of trust with providers. Fragmented processes and systems along with inadequate interoperability standards has resulted in excess administrative cost for payers.

## Health Payers Constant Challenge: Provider Data



#### **Sources Of Provider Dissatisfaction**

Poor data transparency
Payer-provider communication gap
Lack of omni-channel platform for data exchange

30-50% Inaccurate Provider Data

\$200 Bn a year is spent on administrative waste in the US

0 + hours spent by Providers per week on administrative work

20% Physicians change address and/or phone number

5% Status changes (licenses, sanctions, retirement)

30% Change health plan, hospital or group affiliations

Source: Provider directory data management, 2016, Optum

## **Provider Engagement Journey**



#### **Enroll & (Re)-Credential**

- Credentialing degree, licenses & affiliations
- Coordination with payer / CVOs
- Enroll as participating



#### **Medical Management**

- Utilization management
- Care & disease management
- Care coordination
- Prior auth & referral workflow



## Eligibility check

- Billing & Medical coding
- Remittance and check
- Adjustments / Reversals
- Explanation of payment



#### **Contract Management**

- Execute contracting terms
- Repricing for OON plans
- Reimbursement agreement
- Incentives & P4P for value-based care



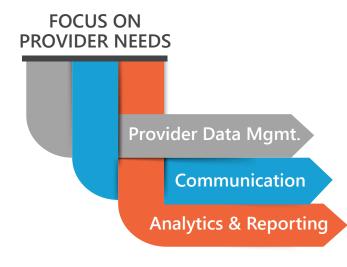
- for contracted providers
- Reimbursement for certain productsIPAs / MSOs coordination
- Educating provider



## Quality & Risk Mgmt.

- Chart chase for HEDIS & STARRisk adjustment / HCC –
- Risk adjustment / HCC MA plans
- Care gaps & closure
- Clinical data exchange

**Enhanced transparency** can ensure better clinical outcomes and greater value throughout the healthcare system. Health payers must systematically engage with providers to ensure better cost, care, quality, and revenue outcomes. Improved provider engagement enables interactive closure of care gaps and allows providers to proactively improve payer quality scores.



### **Optimizing The Provider Engagement Journey**

- Effective management of provider data can lead to improved provider data directory accuracy, accurate claim adjudication, claim reimbursement, and overall operational performance
- Real-time communication and engagement tools simplify the way payers and providers interact with each other and enable a 'provider-centric' approach
- Robust analytics and intuitive dashboard reporting improve data quality and derive actionable insights that aid in outcomes-based decision making

## Unlock Value With Optimized Provider Engagement



Improve Risk Adjustment Performance



Improve Member Satisfaction



Increase Quality Compliance



Increase Primary
Care Visits



Reduce Hospital Readmission



Improve Provider

Experience



For 1 Mn member population, every half star increase in quality score adds an additional funding of around \$50 Mn to the health plan.



An engaged provider adds an average of \$460K in patient revenue per year.

With effective provider engagement strategies payers can improve health plan performance and quality scores for challenging measures. CitiusTech works with leading payer organizations in areas such as:





