

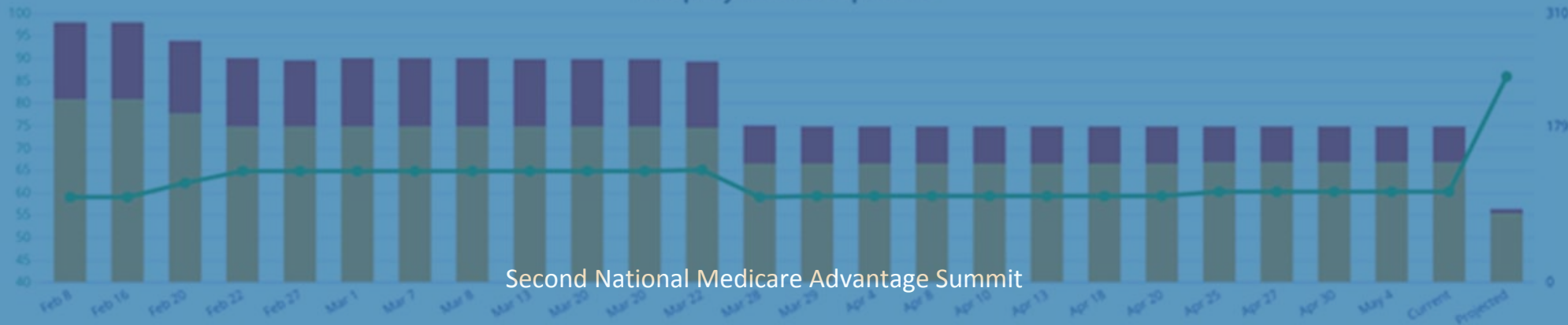
Data Driven

Regulatory Requirements & High Value Networks

John P Weis

May 17, 2018

Adequacy Index vs Gap Counts



Today's Challenges

HEALTH PLAN



- Ongoing compliance monitoring against the same standards as CMS
- Ongoing, timely processes for validation, verification and updating provider data
- Integration with internal process for directories listing (consumer/regulator)
- Lack of effectiveness of existing sources of provider data
- Desire to drive members to high value providers without violating member rights or regulatory standards.

REGULATOR



- Provider networks are narrowing and tiering
- Unflattering media attention
- Researchers are documenting narrowing
- Advocates are forwarding access issues

CONSUMER



- Inaccuracies on key patient's needs
- Insurance accepted
 - Contact information and location
 - Accepting new patients
 - Appropriate specialties

CMS will use directories to help determine whether insurers have enough doctors to meet beneficiaries' needs.

The Result: The Stakes are Rising

- Now: Adequacy
Are there enough providers?
- Now: Accuracy
Are consumers correctly informed of their providers?
- Coming: Comparative
How do networks look vs. each other?
- Coming: Stability
Are networks fluctuating unusually?

April 2, 2018

NOTE TO: Medicare Advantage Organizations, Prescription Drug Plan Sponsors, and Other Interested Parties

Announcement of Calendar Year (CY) 2019 Medicare Advantage and Part D Payment Rates

CMS received many submissions in response to the Advance Notice, published on December 1, 2018, and the Call Letter, published on February 1, 2019. In response to the comments, CMS is announcing the 2019 Medicare Advantage (MA) and Part D Plan Sponsor rates. CMS expects the additional flexibility will result in more choices for Medicare beneficiaries. CMS is committed to transforming the MA and Part D programs to improve beneficiary choice, and is looking forward to achieving its goals.

Enforcement Actions for Provider Directories

As reiterated in the 2019 draft Call Letter, **CMPs and other enforcement actions may be imposed** against MAOs that have received a compliance notice or notices for violations that have gone uncorrected. In addition, CMS (similar to other government agencies with enforcement authority) has the discretion to take **enforcement actions** when egregious instances of non-compliance are discovered.

CMS Has Embraced Automated Solutions

Network Adequacy	Directory Accuracy
Automated HSD review with manual exceptions process	Auditing directory accuracy
Migrating to enterprise-wide audit activity	Machine readable directories previously recommended

Automated Solution Revolution

Automated Network Adequacy System Permits:

- Using the same standards as your regulator
- Checking network adequacy in real time throughout the year
- Using a master provider list to focus provider outreach on the providers you need most
- Having an empirical exception argument ready when a standard cannot be met

Automated Network Accuracy Solution Permits:

- Linking Adequacy to Accuracy to help ensure Access to care
- Combining Data Science with Primary Source Validation
- Integrating accurate data into your existing workflow and data management system
- Trending your improvement over time to show commitment to fixing the problems

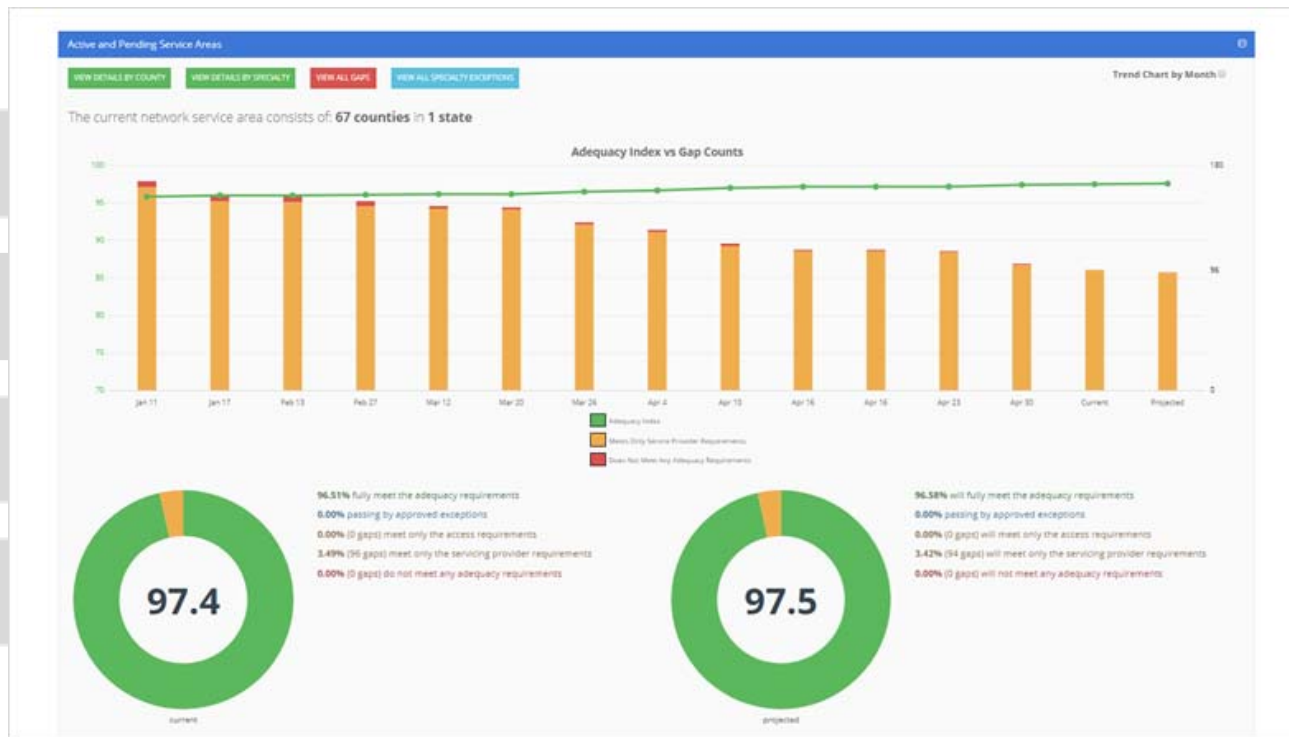
Ongoing Monitoring

Adequacy Index

Adequacy Trending

Gap Trending

Adequacy Market Comparison



Data Inspection Index Trending

✓ NPI Inspection		Change	
Status	Apr 3, 2018 5:05:13 PM	May 4, 2018 1:42:56 PM	
	401,155	352,808	-48,347 ↓
Valid	546	0	-546 ↓
Deactivated	819	0	-819 ↓
Invalid	37	0	-37 ↓
Missing	309	0	-309 ↓
Medicare Opt Out	27	0	-27 ↓
OIG Exclusion	2	0	-2 ↓
OIG Exclusion Waiver			

✓ Specialty Inspection

✓ Address Inspection

NPI Inspection

Suspect Specialty Inspection

Suspect Location Inspection

Medicare Opt-Out Inspection

OIG Inspection

Leveraging an Automated Solution:

- An enterprise solution provides utmost transparency on current network footprint and how it trends over time
- Encourages cohesion across the organization
- Bridges gaps between various departments and compliance
- Reduces risk and prevents surprise

An elderly couple is shown in a close-up, medium shot. The man, on the left, has short grey hair and is wearing a blue and white checkered short-sleeved shirt. He is looking down at a tablet computer. The woman, on the right, has short grey hair and is wearing a grey button-down shirt. She has her arm around the man's shoulder and is smiling as she looks at the tablet. The background is softly blurred, showing what appears to be a window with light coming through. The overall mood is warm and collaborative.

**Consider Developing a
High Value Network**

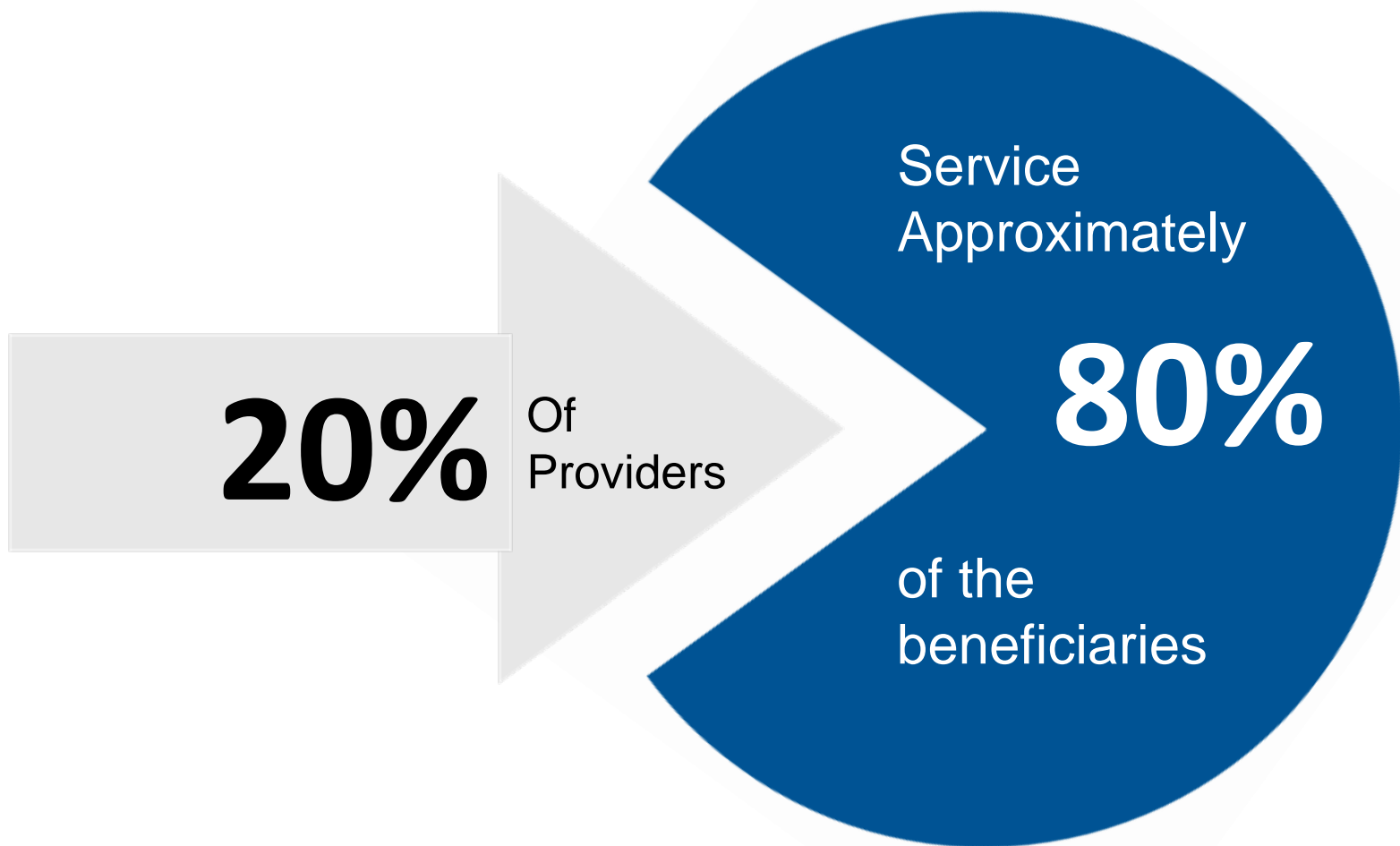
Do You Know How Your Network Compares to the Market?

Pending Service Area



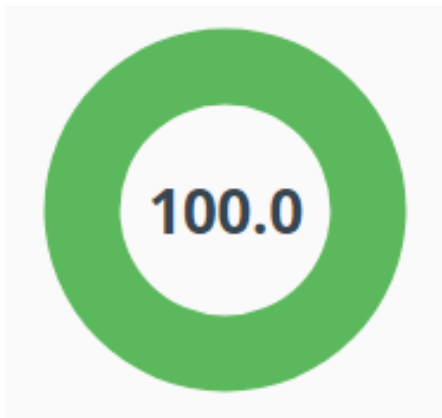
20150 - York, Maine

Metro			Access Requirements					Servicing Provider Requirements				Overall		Market Analysis				Prospect
	Code ^	Specialty	With %	Without %	Avg Dist	Avg Time	Met	Required	In County	Servicing	Met	Met	Gap Age	Access %	In County	Servicing	Market %	Impact
	034	Vascular Surgery	100.0	0.0	15.8	17.3	Y	1	2	5	Y	Y	---	100.0	5	96	5.2	
	035	Cardiothoracic Surgery	100.0	0.0	16.5	18.1	Y	1	0	15	Y	Y	---	100.0	2	36	41.7	
	040	Acute Inpatient Hospitals	99.6	0.4	9.9	10.8	Y	75	2	1,531	Y	Y	---	100.0	51	1,953	78.4	
	041	Cardiac Surgery Program	75.6	24.4	31.2	37.5	N	1	0	3	Y	N	91	100.0	0	6	50.0	●
	042	Cardiac Catheterization Services	75.6	24.4	31.2	37.5	N	1	0	5	Y	N	91	100.0	2	15	33.3	●
	043	Critical Care Services – Intensive Care Units (ICU)	49.8	50.2	31.2	37.5	N	1	0	7	Y	N	91	100.0	2	16	43.8	●
	044	Outpatient Dialysis	88.0	12.0	15.7	17.1	N	1	1	15	Y	N	91	100.0	3	23	65.2	●
	045	Surgical Services (Outpatient or ASC)	49.8	50.2	31.2	37.5	N	1	0	7	Y	N	91	100.0	3	43	16.3	●
	046	Skilled Nursing Facilities	99.4	0.6	9.4	10.3	Y	1	6	21	Y	Y	---	100.0	14	81	25.9	



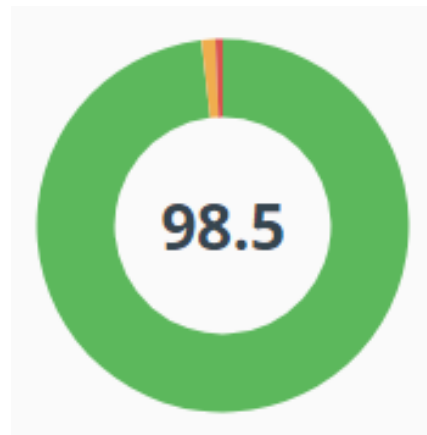
Drop Low Volume Producers — Still Serve Your Members

Your Full Network



3,830 unique providers
1,528 unique locations

Your Optimized Network



838 unique providers
650 unique locations

↓ 78% Providers
↓ 58% Locations

Who Would You Rather Have in Your Network?

Provider Name	Specialty	Total Paid	Benes Served
John P. Jones, MD	Primary Care	\$475,716	744
Melody M. Rodriguez, MD	Primary Care	\$1,473	22
Susan L. Sitka, MD	Orthopedic Surgery	\$21,845,794	3,810
Frank K. Elorana, MD	Orthopedic Surgery	\$438	11
Melissa S. Gomez, MD	Ophthalmology	\$6,145,551	2,708
Juan P. Rodriguez	Ophthalmology	\$4,390	58

Another Way to Prioritize Providers — PQRS

Active Service Area													
021 - Oncology - Medical, Surgical												19140 - Concordia, Louisiana	
Access Requirements				Serving Provider Requirements				Overall	Market Analysis			Prospect	
With %	Without %	Avg Dist	Met	Required	In County	Servicing	Met	Met	Access %	In County	Servicing	Market %	Impact
20.5	79.5	61.9	N	1	0	5	Y	N	100.0	0	17	29.4	
Enter an Exception													
 Concordia, Louisiana is a Rural county where networks are required to cover 90% of the beneficiaries with access to one Oncology - Medical, Surgical provider within 60 miles.													
Network Providers													
Prospect Providers													
Market Providers													
The following market prospect providers are capable of servicing currently unserved beneficiaries. Green increases access to at least 90%, yellow increases access to at least 25%, otherwise red .													
 TARGET AVAILABLE EXCLUDED													
	Name	Address		Serves	Gains	Impacts	Medicare	Participates In PQRS					
<input type="checkbox"/>	 VERGHESE, CHERIAN 1568548824	187 9th St Jena , LA 71342 (419) 383-6644		100.0 %	79.5 %	100.0 %	<input checked="" type="checkbox"/>	TRUE					
<input type="checkbox"/>	 RODRIGUEZ, JACK JOSEPH 1184623886	106 Jefferson Davis Blvd SUITE 120 Natchez , MS 39120 (601) 442-9210		100.0 %	79.5 %	100.0 %	<input checked="" type="checkbox"/>	TRUE					
<input type="checkbox"/>	 SUBBIAH, SUKANTHINI 1578627394	242 W Shamrock Ave CENTRAL LA STATE HOSPITAL Pineville , LA 71360 (504) 988-5482		29.1 %	8.7 %	29.1 %	<input checked="" type="checkbox"/>	TRUE					
<input type="checkbox"/>	 RIKER, ADAM IRWIN 1194773069	242 W Shamrock Ave CENTRAL LA STATE HOSPITAL Pineville , LA 71360 (504) 568-4752		29.1 %	8.7 %	29.1 %	<input checked="" type="checkbox"/>	TRUE					
<input type="checkbox"/>	 WOLD, HOWARD G 1467455501	605 Medical Center Dr Alexandria , LA 71301 (318) 442-2232		21.3 %	0.8 %	21.3 %	<input checked="" type="checkbox"/>	FALSE					

Focus Resources, Save Time, Reallocate Budget Dollars

One Example: Primary Source Validation

Required: Quarterly

Cost: Up to \$10-\$40 per provider/per quarter



Network Providers	Cost Per Provider	Frequency a Year	Total Cost
3,830	\$10-\$40	4	\$153,200 - \$612,800
838	\$10-\$40	4	\$33,520 - \$134,080
TOTAL SAVINGS:			\$119,680 - \$478,720

Thank You: Q&A



John P. Weis

Quest Cloud Services™

As the industry continues to focus around Network Adequacy concerns, continuity of care and access to selected providers, it becomes increasingly important for plans to have tools in place to measure, monitor, trend and compare their networks across all product lines. The Quest Cloud Services™ is a proven automated solution used by 300+ health, dental, vision and pharmacy plans to help ensure the Adequacy and Accuracy of their networks.

