Universal Provider Datasource
Defining Quality: an Update from the Universal Provider Datasource Data Quality Task Force

CAQH Administrative Simplification Conference
September 25, 2008
Agenda

• Introduction and Panelists

• United Study Overview

• Data Quality Work Group
  – Objectives
  – Responsibilities
  – Progress to date
  – Next Steps
Introduction and Panelists

- Carrie Call
  National Director, Provider Data Quality
  UnitedHealthcare

- Rishma Mohamed
  Consultant
United Program Background / History

**Background on data accuracy issues**

It has been illustrated through research studies and periodic news articles that the managed care industry has done a poor job of maintaining the quality and accuracy of provider data.

- *Washington Post, August 2003*
- *Georgetown University study, 2005*
- *Wall Street Journal, August 2006*

  - Using the same search criteria for all insurers, the author of the WSJ article contacted the first 5 physicians that appeared in the directory—3 out of the 5 physicians that appeared on myuhc.com contained errors

Promotion of healthcare consumerism requires a concerted effort in providing accurate data to our constituents
United - Cleaning the Data

The solution is to update the data using two key efforts:

- Delegated provider process to manage full roster updates once per year plus monthly / quarterly updates - we will cycle through all delegated providers over the next 12 months
- For non-delegated providers, phone calls confirm and update information through Provider Verification Outreach (PVO) program.

Benefits:

- Consistent network representation to stakeholders regardless of the means by which they obtained the information
- Healthcare consumerism places more responsibility for customer involvement – improved data supports this concept
- Decreased work effort in acquisition/alliance integrations related to data reconciliation
- Reduction in returned mail cost of annually
United Program Background

• Kicked off the PVO in Q1 2007
• Tremendously positive response from providers and customers
• Large investment to make phone calls

We asked ourselves
• How do we verify the uncooperative and unreachable providers?
• Are their alternatives to verifying the data?

• Taking a sample we called the providers and asked for the data and compared to the files from CAQH and the other vendors
• The assumption was that the data being provided on the phone from the provider’s office was accurate
• If the files from CAQH/other vendor was blank it was considered not a match and in turn inaccurate
United Program Audit Results

Alternative Data sources

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* These fields are not mandatory in the CAQH application. The lower score is due to lack of data (lower fill rates) compared to PVO collected values, versus incorrect data in CAQH.
Provider Data Quality – The Challenges

- Various departments throughout the enterprise need provider data
  - Different needs
  - Different data
  - Different timeframes

- Sources for provider data vary
  - Provider self reported
  - Primary sources
  - Third party databases
  - Internal databases
  - Delegates

- Consistency, timeliness and accuracy of data varies
CAQH View of Provider Data

Non-Payer Data Requirements

Enterprise Wide Data Needs

Elements Required on Most Paper Applications

Minimum Required by Accreditation Organizations
Provider Data Quality – CAQH/Lewin Study

The Lewin Group was engaged to

- Identify the current and potential use for provider information among participating organizations
- Identify barriers preventing wider use of CAQH’s data beyond current uses,
- Assess the potential for savings resulting from broader use by participating organizations,
- Make recommendations about how CAQH can achieve wider acceptance and uptake of the Universal Provider Data Source (UPD) initiative.
CAQH has created a **Data Quality Work Group** to study and make recommendations on how to validate and expand the use of the UPD data throughout the organization.
The Data Quality Work Group – Responsibilities

- Define and develop methods to confirm completeness, timeliness and quality of the provider data in the UPD

- Identify what/how provider data is used throughout the health plan enterprise

- Identify additional data that is required for broader adoption and utilization of the UPD by participating organizations, including critical data elements common to all enterprise users

- Conduct and publish study summarizing work group findings

- Based on published findings, recommend actions to improve and maintain the overall data quality of the UPD; and determine the UPD data applicability and value throughout the organization.
Data Quality Work Group - Membership

- Aetna
- Coventry Health Care
- Independence Blue Cross
- Blue Cross Blue Shield of Michigan
- HAP
- Magnacare
- Cigna
- HIP - Health Plan of New York
- CDHP
- Humana
- Wellpoint
Data Quality Work Group - Progress to Date

Master List of Data Elements

- All fields on CAQH application

- Current requirement status
  - Required
  - Conditionally Required
  - Suggested
  - Optional

- Fields to consider adding in the future
Data Quality Work Group - Progress to Date

Identified a comprehensive list of departments/functions within participating organizations that use provider data:

- Credentialing
- Provider Directory
- Claims
- Communications
- Network Development
- External Reporting
- Finance
- Marketing/Sales
- Medical Affairs
- Pharmacy
- Provider Data Management/IS
- Customer Service
Data Quality Work Group - Progress to Date

- Work Group members have analyzed the data elements and identified which elements are “critical” to each of the departments/functions and which are voluntary/optional.

- Currently, conducting regulatory review of elements:
  - Group members volunteered to sub-committee
  - Identify regulatory needs and to UPD requirements
  - Fields that are required by regulatory bodies and not already required by CAQH will be placed on high priority.

- Defining list of “critical” items to test quality of real data.
Data Quality Work Group - Next Steps

- Commission a study that validates completeness and accuracy of the data in the UPD
  - Sample UPD data and compare with participating organization data
  - Determine timeliness of UPD data
  - Validate provider data updates
• Data Quality Study methodology to be determined with the help of third party

• Publish white paper of study findings