

CAQH FACTS



More Than 930,000 Providers Now Using UPD

Overview

The CAQH® Universal Provider Datasource® (UPD) is achieving its vision of simplified credentialing by reducing paperwork and millions of dollars of annual administrative costs for more than 930,000 providers and over 600 participating health plans, hospitals and managed care organizations across the United States.

Launched in 2002 by CAQH, UPD lets registered physicians and other health professionals in all 50 states and the District of Columbia enter and maintain their credentialing information free of charge into a single, uniform online application that meets the credentialing data needs of health plans, hospitals and other healthcare organizations. Approximately 7,000 new providers begin using the service each month. Nearly three in five physicians are using UPD.

The UPD application also meets the data collection requirements of URAC, the National Committee for Quality Assurance (NCQA) and the Joint Commission standards.

The UPD service streamlines the initial application and re-credentialing processes, reduces provider administrative burdens and costs, and offers health plans and participating organizations real-time access to reliable provider information for claims administration, quality assurance and member services, such as directories and referrals.

The UPD add-on service, SanctionsTrack®, quickly identifies any provider in the U.S. with sanctions and/or disciplinary actions through daily updates drawn from all state licensing boards, the Office of Inspector General, Office of Personnel Management and Medicare/Medicaid sources -- more than 450 in all.

State Support: Indiana, Kansas, Kentucky, Louisiana, Maryland, Missouri, New Jersey, New Mexico, Ohio, Rhode Island, Tennessee, Vermont and the District of Columbia have adopted the CAQH Standard Provider Credentialing application – the centerpiece of the UPD online service – as their mandated or designated provider credentialing form. Additional states are expected to mandate, support and/or adopt the CAQH application in 2011. In addition, several state Medicaid agencies are exploring participation in UPD.

Industry Support: UPD is supported by America's Health Insurance Plans, the American Academy of Family Physicians, the American College of Physicians, the American Health Information Management Association, the American Medical Association, the Healthcare Administrative Simplification Coalition, the Medical Group Management Association and other provider organizations. In addition, the Vermont Hospital Association, with 14 members, adopted UPD as its recommended process for provider data collection in that state.

Measures of Success

Providers: Based on figures from a Medical Group Management Association analysis of administrative costs, CAQH estimates that UPD is effectively reducing provider administrative costs by approximately \$110 million per year or 3.7 million man-hours – the amount of time required to complete and send the application. Those stats represent the equivalent of 1,800 full-time employees. UPD has eliminated over 2.8 million legacy credentialing applications to date. CAQH estimates these eliminations have saved 98 million pieces of paper or about 11,800 trees.

Health Plans: Participating health plans have reported one or more of the following efficiencies by using the service:

- Decreased average processing turnaround time by 8-10 days
- Reduced frequency of returned provider correspondence due to poor address quality by 80-85 percent
- Near elimination (97 percent) of new provider initial credentialing packet mailings
- Reduced legacy re-credentialing mailings by 15,000 units (\$5-8 each)
- Reduced sanctions monitoring resources by 56 percent
- Real-time updating of provider directories
- Facilitated implementation of NPI
- Reallocated legacy paper credentialing application storage space
- Assisted with overlap analysis when merging different networks

Data Integrity: Providers that have completed the UPD application keep their data current by interacting with the UPD on a regular basis – attesting every 120 days. From Jan. 2006 through Aug. 2007 (five re-attestation periods):

- 383,911 unique providers attested or re-attested through UPD
- 1,798,729 attestation events were conducted through UPD by those unique providers – 4.7 attestations per provider
- 1,100,031 (61%) of the re-attestations were accompanied by at least one data change

Future Enhancements and Directions: CAQH is reviewing the following new features to UPD:

- Type 2 (group) NPI number capture
- Improved Practice Administrator module to further streamline data entry
- NTIS auto feed to eliminate need for DEA registration document imaging
- “Pushed” alerts when provider documents are about to expire
- Data import capability for provider groups to bulk download provider data into UPD
- Provider opt-in module to allow interested providers to participate in different initiatives and programs, such as emergency responder registries
- Communicating with CMS to allow UPD data to update 855 form

About CAQH

CAQH solutions help promote quality interactions between plans, providers and other stakeholders, reduce costs and frustrations associated with healthcare administration, facilitate administrative healthcare information exchange and encourage administrative and clinical data integration. Visit www.caqh.org or call (202) 861-1492 for more information.