



DirectAssure[®]: Proven Strategies for Improving Provider Directory Accuracy

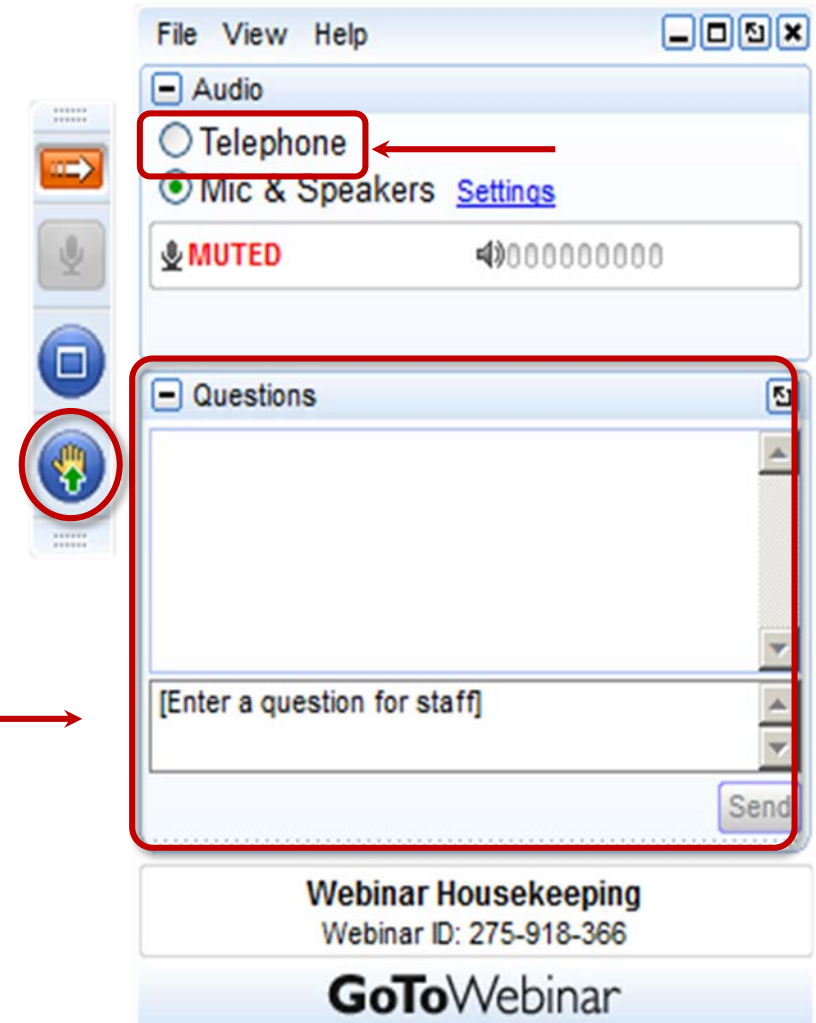
Ann Brisk, Director, Business
Development, CAQH

Ron Urwongse, Senior Product
Manager, Solutions, CAQH

July 27, 2017

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Webinar Speakers



Ann Brisk
Director, Business Development
CAQH
ABrisk@CAQH.org



Ron Urwongse
Senior Product Manager
CAQH
Rurwongse@CAQH.org

Agenda

- About CAQH.
- Update on Provider Directory Requirements
- Leveraging CAQH ProView® to Improve Directory Quality.
- Addressing the Most Prevalent Provider Directory Errors per CMS.
- Results Report – CAQH and UnitedHealthcare.
- Ongoing Improvements in 2017.
- Summary.

About CAQH and its members

CAQH, a non-profit alliance, is the leader in creating shared initiatives to streamline the business of healthcare. Through collaboration and innovations, CAQH accelerates the transformation of business processes, delivering value to providers, patients and health plans.



CAQH initiatives streamline business processes in healthcare.



COMMITTEE ON OPERATING RULES
FOR INFORMATION EXCHANGE

Maximizes business efficiency and savings by developing and implementing national operating rules. More than 140 participating organizations.



INDEX®

Benchmarks progress and helps optimize operations by tracking industry adoption of electronic administrative transactions.



COB SMART®

Quickly and accurately directs coordination of benefits processes.



PROVIEW®

Eases the burden of provider data collection, maintenance and distribution for more than 1.4 million providers and 800 participating organizations.



VERIFIDE™

Streamlines credentialing by consolidating and standardizing primary source verification.



DIRECTASSURE®

Increases the accuracy of health plan provider directories.



SANCTIONSTRACK®

Delivers comprehensive, multi-state information on healthcare provider licensure disciplinary actions.



ENROLLHUB®

Reduces costly paper checks with enrollment for electronic payments and remittance advice for more than 500,000 providers.

Update on Provider Directory Requirements: Federal

Source	Requirement	Effective Date	Key Considerations
Medicare Advantage 2016 Advance Notice	MA organizations must maintain “Regular, ongoing communications / contacts (quarterly) with providers...”	January 1, 2016	Penalties up to \$25k per day per beneficiary. CMS has begun monitoring plans.
HHS Final 2016 Letter to Insurers in the Federally-Facilitated Marketplaces	QHP issuers must update their provider directory information at least once a month. Includes field-level requirements for data.	November 1, 2015	Penalties up to \$100 per day per individual affected.
Medicaid and CHIP Proposed Rule	Medicaid MCOs must update electronic provider directories no later than 30 calendar days after updated provider information is received.	July 1, 2017	Machine-readable requirements are now aligning with QHP requirements.

Update on Provider Directory Requirements: States and Others

Source	Requirement	Effective Date	Key Considerations
NCQA Health Plan Accreditation 2016 Proposed Updates	Using valid sampling methods, analyze the accuracy of information within provider directories.	July 2016	Must annually identify opportunities to improve accuracy and take action.
California SB 137	Health plans must obtain an affirmative response from providers acknowledging notification was received, and providers must confirm information in directories is current and accurate.	July 1, 2016	Must investigate reported errors within 30 days. Providers who do not confirm information must be removed from directories.
Other state requirements	Twenty-seven states have now enacted rules on provider directories, with about half of the states specifying update frequency.	Varied	Varied

CAQH and its member health plans recognized that new requirements for health plans to maintain provider directories were unachievable with current processes.

Multiple, Redundant Inquiries and Responses



Providers receive requests from multiple plans on a reoccurring basis.

Changes require providers to update each plan separately.

Outreach via Multiple Channels



Plan outreach to providers via email, fax, direct mail and phone.

Excessive Resources



Individual health plan

Questionable Data Integrity



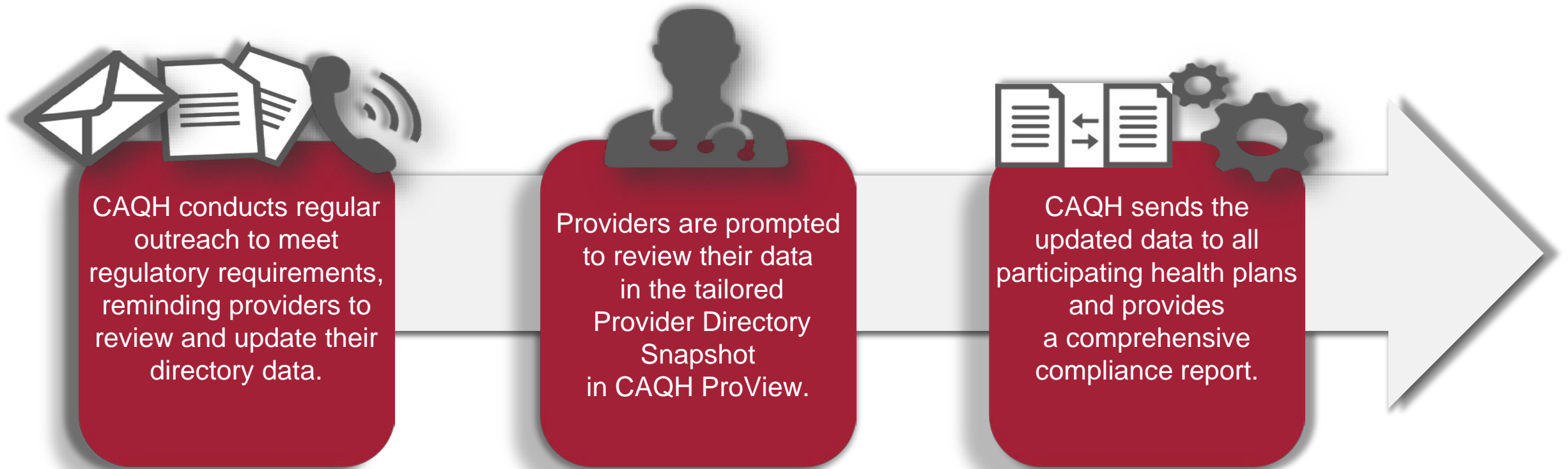
Little measurable improvement in provider data errors.

CAQH built upon the self-reported data from 1.4 million providers in CAQH ProView to create a new directory solution to resolve industry challenges.

- Trusted and used by healthcare providers and organizations for **more than 15 years**.
- **1.4 million** unique participating providers, including allied providers (+8,000 each month).
- **Over 900** participating health plans, hospitals, provider groups, state Medicaid agencies and other organizations.
- **Twelve states** and DC have adopted the CAQH Standard Provider Credentialing Application.
- Contains **more than 225 self-reported and attested data elements**, including those required for provider directories.
- Providers reminded to **re-attest every 120 days**. One million providers have re-attested in the past 120 days.
- **25K unique users per day**.

The screenshot shows the CAQH ProView application interface. At the top, it says 'Welcome to the CAQH ProView application' with links for 'HELP', 'CONTACT CAQH', and 'LOG IN'. The main header features the 'CAQH Solutions' logo and 'PROVIEW™'. The page is divided into two main sections. The left section, titled 'CAQH ProView™', contains a welcome message: 'Welcome to CAQH ProView™, formerly the Universal Provider Datasource®.' It explains that CAQH ProView is more than a credentialing database, available at no cost, and eliminates duplicative paperwork. It also states that through an intuitive, profile-based design, users can easily enter and maintain their information for submission to selected organizations, helping to reduce inquiries and save time. A sign-in instruction reads: 'Sign in on the right to update your existing profile information or, if you are a new provider to CAQH ProView, register to create a profile.' Below this is a link for 'CAQH ProView Reference Material' with a list of resources: Provider User Guide, Provider Quick Reference Guide, Video: Providers – Get Started with CAQH ProView, Video: How to Log In for the First Time, Video: I Forgot My Username/Password, and Video: How to Attest and Re-Attest. The right section, titled 'SIGN IN', contains a 'Username' field with a 'Forgot Username' link, a 'Password' field with a 'Forgot Password' link, a 'Remember me?' checkbox, and a 'Sign In' button. Below the sign-in fields is a 'FIRST TIME HERE?' section with three numbered steps: 1. Existing CAQH UPD users: Sign in with your old UPD username and password. 2. If you received a welcome email, use the link in your email to begin the sign in process. 3. If you were not registered with CAQH UPD and are new to CAQH ProView: Register Now. At the bottom of the right section are links for 'Practice Manager Sign In' and 'Participating Organization Sign In'. The footer contains 'TERMS OF SERVICE', 'PRIVACY', 'CAQH.ORG', and '© 2015 CAQH. All rights reserved.'

DirectAssure offers a streamlined and centralized experience for providers that reduces the need for plan outreach.



Provider outreach occurs through email and phone calls and meets CMS quarterly outreach requirements for directories.

Dashboard Alert:



A system-generated alert within CAQH ProView appears for providers who need to attest to their information.

Email Outreach:



Providers are emailed quarterly to review and attest their information.

Phone Outreach:



The CAQH staff will contact providers who do not attest.



Providers review and attest to their information within CAQH ProView.

Quarterly

All communication attempts and responses are logged and delivered in a monthly Outreach Compliance Report for audit purposes.

Providers review and update their directory-relevant data in a tailored “Provider Directory Snapshot.”

Directory Information ✕

Scott Everline MD Provider Directory Snapshot

Please review information from your CAQH profile that will be used by health plans to update their provider directories. If information is missing or incorrect, please navigate to Profile Data to update. When information is correct, please complete your attestation. Please note that updates affecting your contractual agreement with a health plan may require additional follow-up.

Authorized health plans requesting confirmation that your directory information is correct:

Health Plan A

PERSONAL INFORMATION

Gender Male	Non-English Languages Spoken French, Spanish
Type 1 NPI 1234567890	<input checked="" type="checkbox"/> Participating in Medicare <input checked="" type="checkbox"/> Participating in Medicaid

EDUCATION

Professional School
Georgetown University
Doctor of Medicine (MD)

Undergraduate
University of Virginia
Bachelor of Health Science (BHS)

SPECIALTIES

Primary Specialty
Pediatric Cardiology
American Board of Family Medicine

Providers review and update their directory-relevant data in a tailored “Directory Snapshot” (continued).

Directory Information ✕

PRACTICE LOCATIONS

Practice Location #1

Cardiovascular Consultants Medical Group 365 Hawthorne Ave , Suite 220 Oakland, CA 94609	Office Hours Monday 8:00 AM - 4:00 PM Tuesday - Wednesday - Thursday 8:00 AM - 4:00 PM Friday 8:00 AM - 12:00 PM Saturday - Sunday -
Group Name Cardiovascular Consultants Medical Group	Non-English Languages Spoken French, Spanish, Portuguese
Phone 510-517-0000	<input checked="" type="checkbox"/> Accepting new patients
Fax	<input checked="" type="checkbox"/> Accepting new patients from a physician referral
Type 2 NPI 1122334455	<input checked="" type="checkbox"/> Accepting new Medicare patients
	<input checked="" type="checkbox"/> Accepting new Medicaid patients
	<input checked="" type="checkbox"/> ADA Accessibility
	<input checked="" type="checkbox"/> Handicap Accessibility

HOSPITAL AFFILIATIONS

Alameda Cnty Medical Center (Oakland, CA)
1411 East 31st Street
Oakland, CA 94602
510-437-4800

Providers then confirm the accuracy of their directory data and re-attest.


Step 1

REVIEW DATA SUMMARY

Click the Review button below to display and review a summary of all of the data you entered in your profile.

[Click here](#) to view the Provider Directory Snapshot that participating organizations will use to update your record in their publicly available provider directories.


If you need to make a change, close the summary window and click on the appropriate section in Profile Data.

 Review

Step 2

VERIFY REVIEW

Click Review Complete to verify that you have reviewed and/or corrected your data. Once you verify that your review is complete, an Attestation button will appear.

 Review Complete

Step 3

ATTESTATION

Click Attest to certify that you have carefully reviewed all information contained within your CAQH ProView Profile and that all information provided by you in the profile is true, correct, and complete to the best of your knowledge.

You also acknowledge that your CAQH ProView Profile will not be considered complete until supporting documentation and properly executed Authorization, Attestation and Release Form is remitted.

I have reviewed the information in my [Provider Directory Snapshot](#).

 Attest

Adoption rates to-date have been significant and continue to grow. More than 600K providers have attested and over 35 health plans are now participating.

Rostered Providers



Over 810k rostered providers (i.e., requests for directory profiles from participating health plans).

Provider Outreach



- Over 3.6M total emails sent.
- Over 500k phone calls made.

Participating Plans



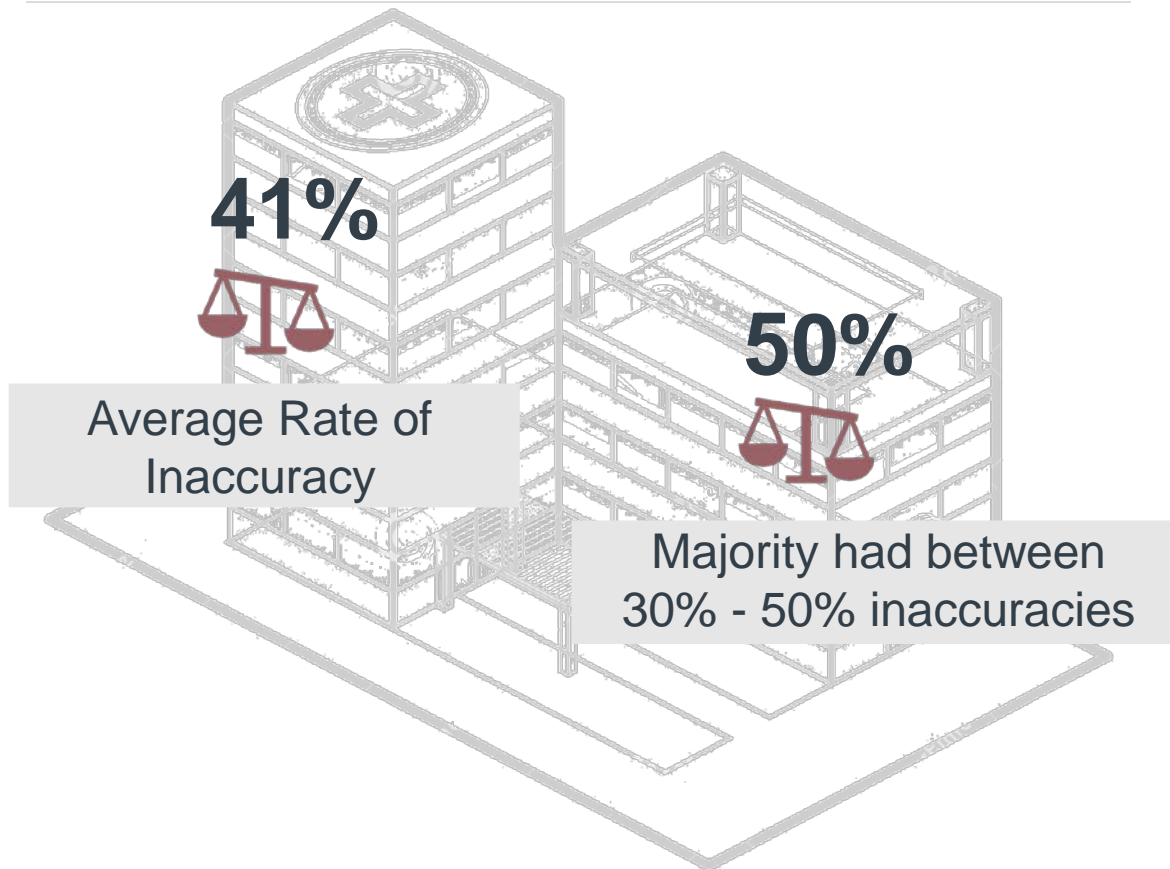
Over 35 participating plans.

Provider Responses

- More than 600k completed and attested DirectAssure directory profiles.
- 72% of providers reviewed and confirmed their information within the past 120 days.
- Over 90% of providers respond after one e-mail.

Provider directory accuracy is an industry-wide challenge.

- In 2016, CMS conducted reviews of practice location accuracy in Medicare Advantage health plan directories.
- Fifty-four organizations were monitored and 5,832 providers at 11,646 locations were contacted.*



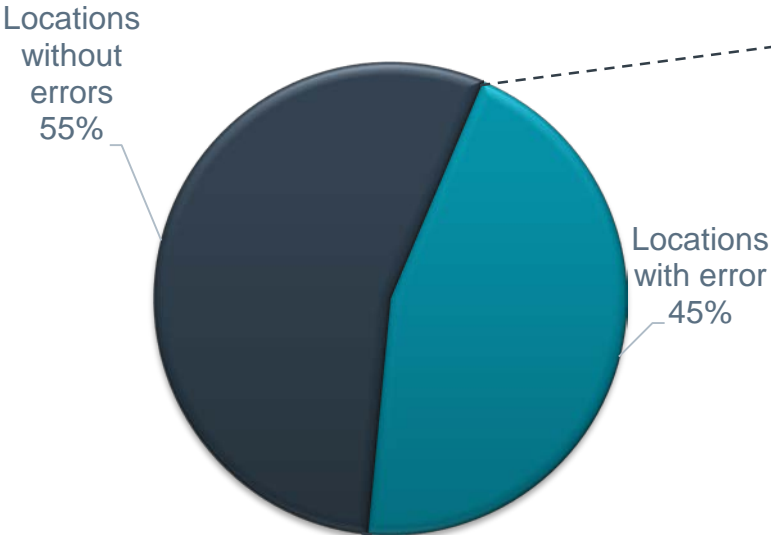
Elements reviewed related to locations:

- Provider name
- Practice name
- Specialty
- Acceptance of plan
- Address, including suite number
- Accepting/not accepting new patients
- Phone number

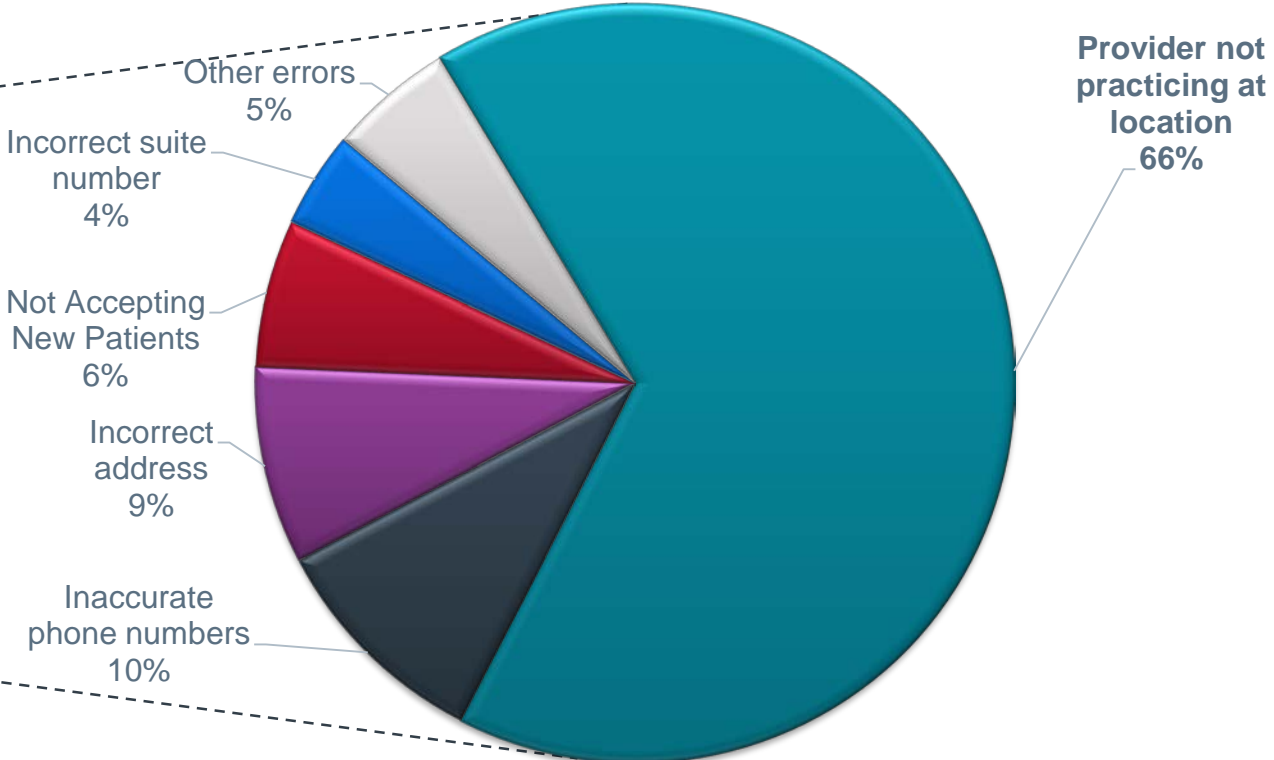
*Online Provider Directory Review Report.
Centers for Medicare and Medicaid Services, January 13, 2017.

Sixty-six percent of location inaccuracies fell into the category “provider is not practicing at location.”

Overall CMS Error Rate



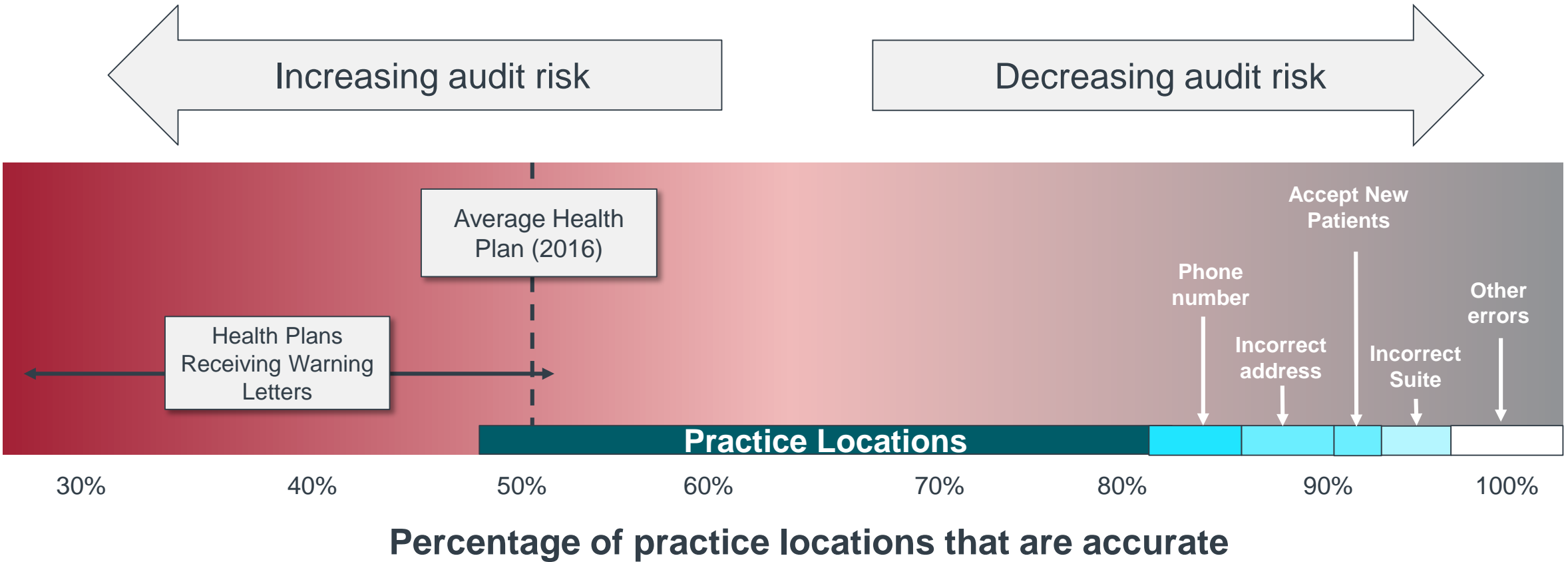
Breakdown of CMS Error Types



* Results reported by CMS Medicare Drug & Health Plan Contract Administration Group on September 8, 2016. N=11,646 practice locations

CAQH has expanded its focus and leveraged strong provider engagement to further address wide-spread directory data quality issues.

Prioritized Errors Based on CMS Data: Prevalence and Weighting



CAQH worked with health plans to identify practice locations scenarios that are currently appearing in directories, but that should be suppressed.

Provider	Health Plan	CAQH	CAQH Practice Status	Publish?
Seth Hollander	123 Main Street	Match in CAQH	Seeing patients at least once per week	✓
Seth Hollander	987 Maple Avenue	No match in CAQH		✗
Julie Nangia	231 Broad Street	Match in CAQH	Stopped Practicing as of 03/15/2017	✗
Julie Nangia	180 Ridge Park Drive	Match in CAQH	Seeing patients at least once per week	✓
Victor Sung	231 Broad Street	Match in CAQH	Seeing patients at last once per week	✓
Victor Sung	882 Gessner Avenue	Match in CAQH	Covering or filling-in for colleagues	✗

If a health plan has a location, but the provider did not report that location to CAQH.

If a health plan has a location, but the provider reported no longer practicing there.

If a health plan has a location, but the provider reported a non-publishable status.

A drop-down menu enables providers to include additional details about the nature of their practice at each location.

*** Do you practice at this location?**
Select Yes if you currently practice at this location or will be practicing there in the near future.

Yes
 No

*** Please describe your affiliation with this location.**

I see patients here at least one day per week on a regular basis.

--Select--

I see patients here at least one day per week on a regular basis.

I see patients here at least one day per month, but less than one day per week on a regular basis.

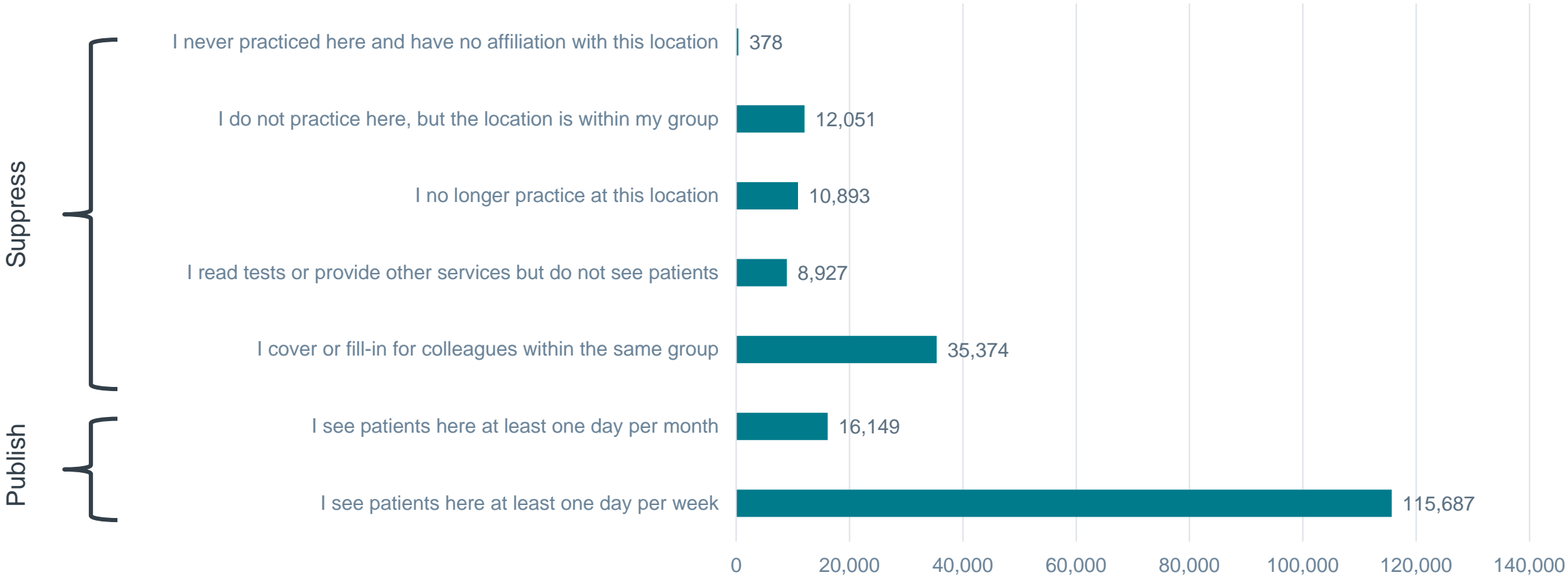
I cover or fill-in for colleagues within the same medical group on an as needed basis.

I read tests or provide other services but I do not see patients at this location.

Other

Responses to “do you practice...” revealed a significant opportunity to use DirectAssure output to suppress inaccurate practice locations in provider directories.

Total practice locations with detailed responses to ‘do you practice?’

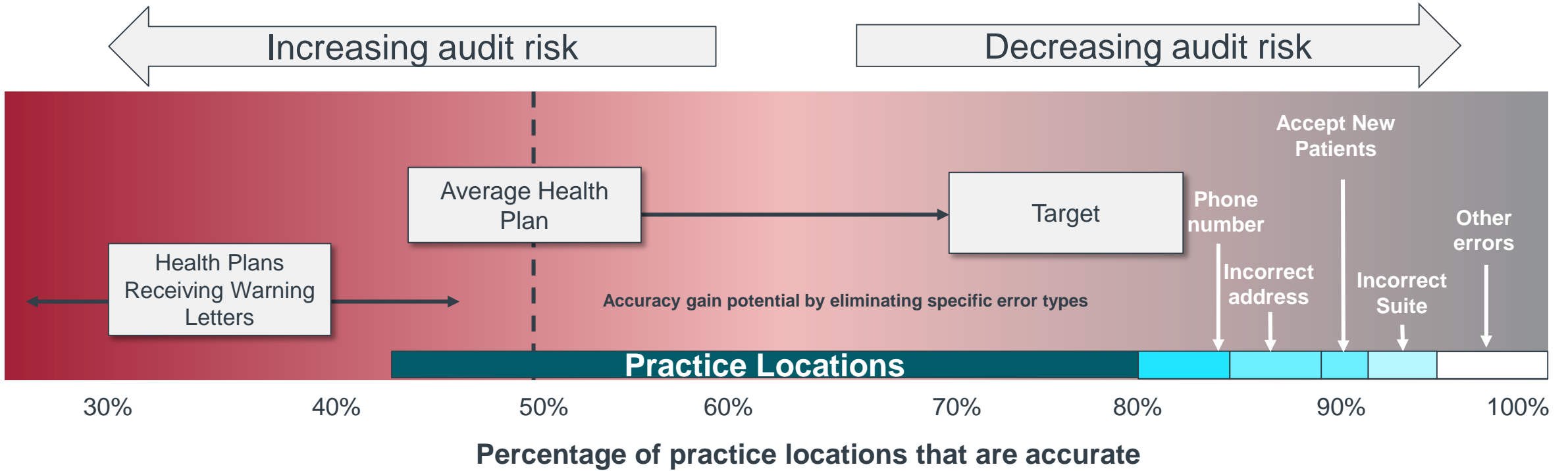


34% of response volume represent locations that should be suppressed within provider directories

UnitedHealthcare (UHC) sought practical approaches to quickly improve accuracy by reducing the most prevalent directory error.

- Business Objective:
 - “**Provider not at location**” is the highest priority inaccuracy and represents a majority of directory errors.
 - Implement a solution that reduces the prevalence of this error to quickly achieve directory accuracy gains.
- CAQH Approach:
 - Define easily detectable scenarios where providers are not taking appointments at practice locations.
 - Implement a scalable process to identify these scenarios and stop publishing these locations.

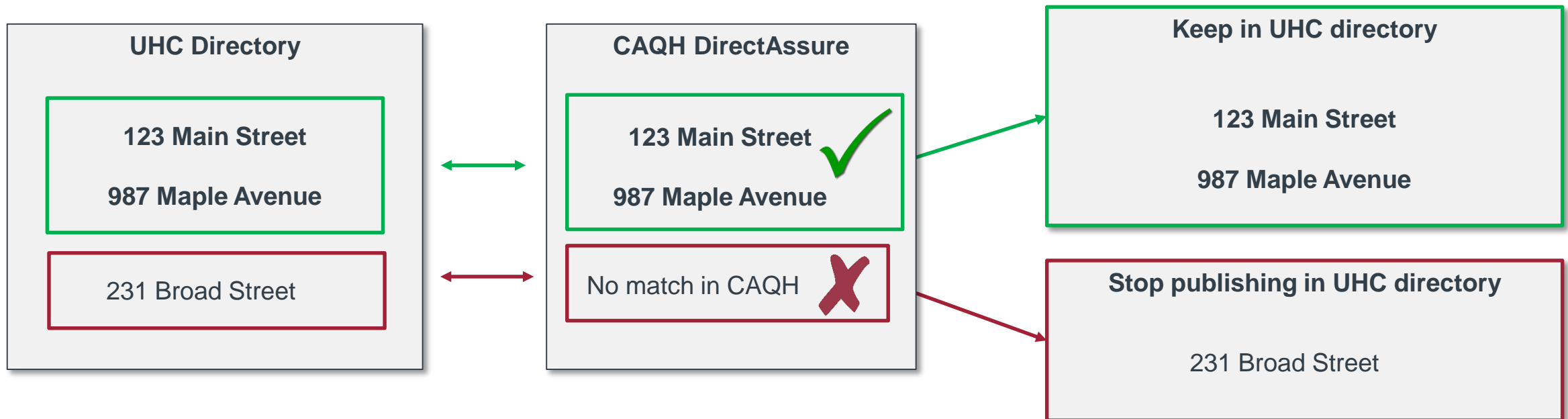
UHC set a target of greater than 85% accuracy to minimize compliance risk



Scenario #1: When a health plan has a location that DirectAssure does not have, there is an 80% probability that the location should not be published.

Approach

- UHC compares a location in its directory against provider data in DirectAssure.
- The absence of a location within DirectAssure is a strong signal to not publish the location within UHC's directory.



In this case, UHC validated the reliability of not displaying locations in this scenario and has now scaled this process to over 200k providers.

Initial Phase:

- 60k practice location sample.
- In cases where the UHC directory had locations not present in CAQH, **80% of these locations should not be published.**
- Validated in phone call audits to 60k locations within the UHC directory.



Production:

- UHC increased its usage of DirectAssure to 200k providers to further suppress locations within UHC's directory.
- Due to initial phase findings, UHC is automating the removal of these locations.
- UHC has used this method to suppress invalid locations for more than 10 months.
- Suppression can be reversed if additional information is identified by UHC.

Three additional health plans have independently validated in their own audits that locations fitting this scenario should be suppressed between 77- 80% of the time.

Scenario #2: UHC leveraged the “...do you practice” status indicators to further identify locations to be removed from its provider directory.

Analysis:

- CAQH identified 3 scenarios that are strong predictors of suppression:
 - Currently practicing = No [83%]
 - Reads tests, no appointments [87%]
 - Covers or fills-in for colleagues [87%]
- UHC is validating these results across a population of 100k providers:
 - Currently practicing = No [87%]
 - Read tests, no appointments [61%]
 - Covers or fills-in for colleagues [60%]



Go-Forward Plan:

- CAQH will provide regular extracts of the “do you practice” status indicators to UHC for consumption and processing.
- UHC will seek opportunities to suppress these locations across an increased provider population in the next three months and report on gains.
- Scenarios with greater than 80% reliability will be targeted for automation.

“Do you practice...” status indicators are expected to contribute to significant directory accuracy gains for UnitedHealthcare.

Practical takeaways from the UnitedHealthcare case study.

- Health plans should immediately focus on the most prevalent and highest priority to maximize and accelerate directory accuracy gains and to reduce compliance risk.
- It is important to focus on scenarios that can be easily identified:
 - A health plan has a location (for a specific provider) and the provider did not report it to CAQH.
 - The provider has self-reported status indicators that suggest the location should be suppressed.
- Create a process (supported by technology) to automatically identify and stop publishing these locations at scale.
- Create a baseline of directory accuracy prior to the initiative, and measure it on an ongoing basis.
- Once “low-hanging fruit” accuracy gains have been secured, expand on these processes for other data that will address remaining directory errors: e.g., phone numbers, suite numbers, accepting new patients.

CMS findings on provider directory deficiencies reveal strategic opportunity for health plans to focus on solving for the most prevalent and priority deficiencies

Deficiency	% Of All Deficiencies	Priority Weighting
Provider not practicing at location	66%	Highest
Phone number	10%	Highest
Address	9%	Medium
Address (suite)	4%	Lowest
Accepting new patients	6%	Lowest
Other errors	5%	None or Lowest

CAQH recently introduced phone number confirmation. Providers are asked to confirm that practice location phone numbers are appropriate for appointments.

To meet provider directory requirements, the phone number entered in the Practice Location field "Office Phone Number" must be the number that a patient uses to make an appointment. Please confirm that the phone number that displays in the "Office Phone Number" column is the appointment phone number.

Location	Office Phone Number	Please confirm that this is the appointment phone number
Friendship Pediatrics 92 Park Road Suite B Chevy Chase, MD 20815	301-949-3892	Confirm Edit

Phone Numbers

* Office Phone Number

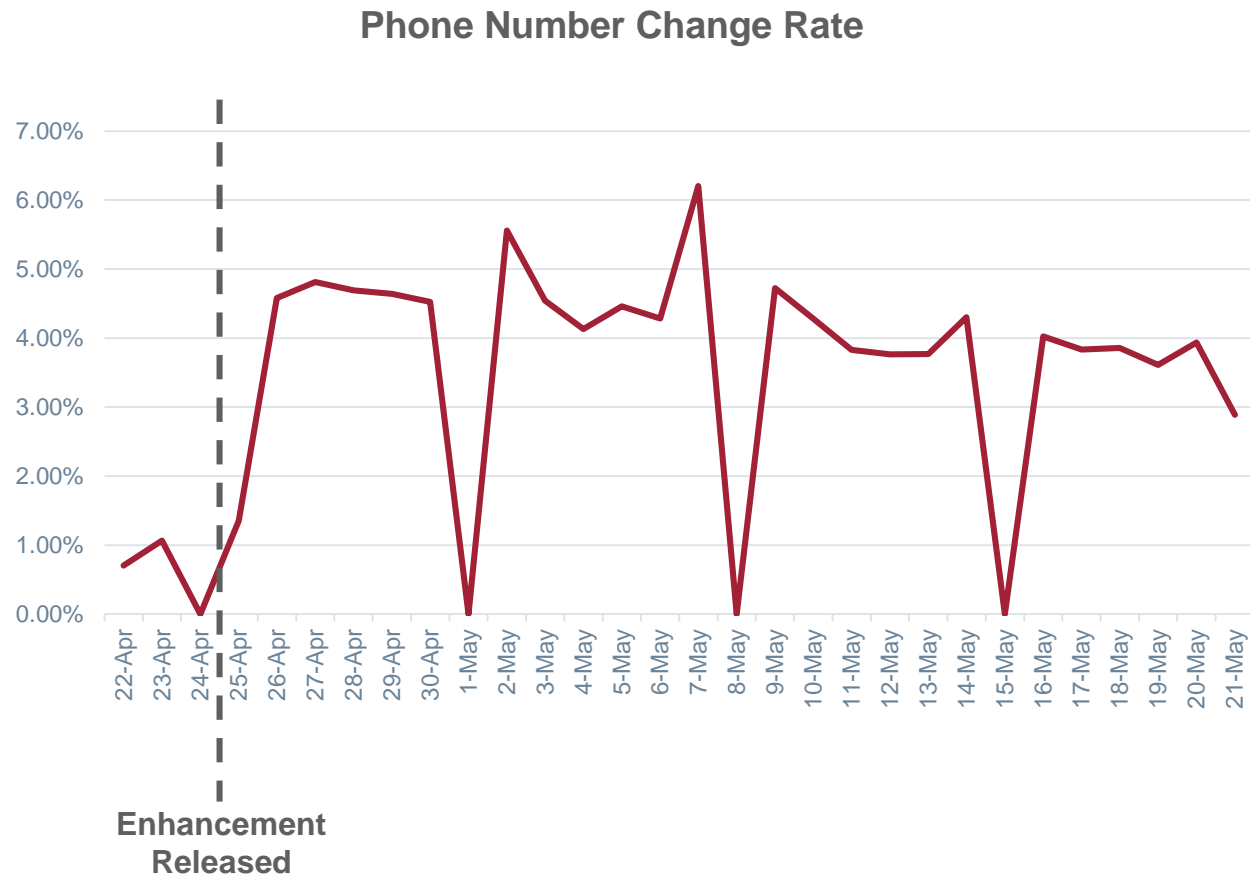
301-949-3892

Phone Extention

Fax Number

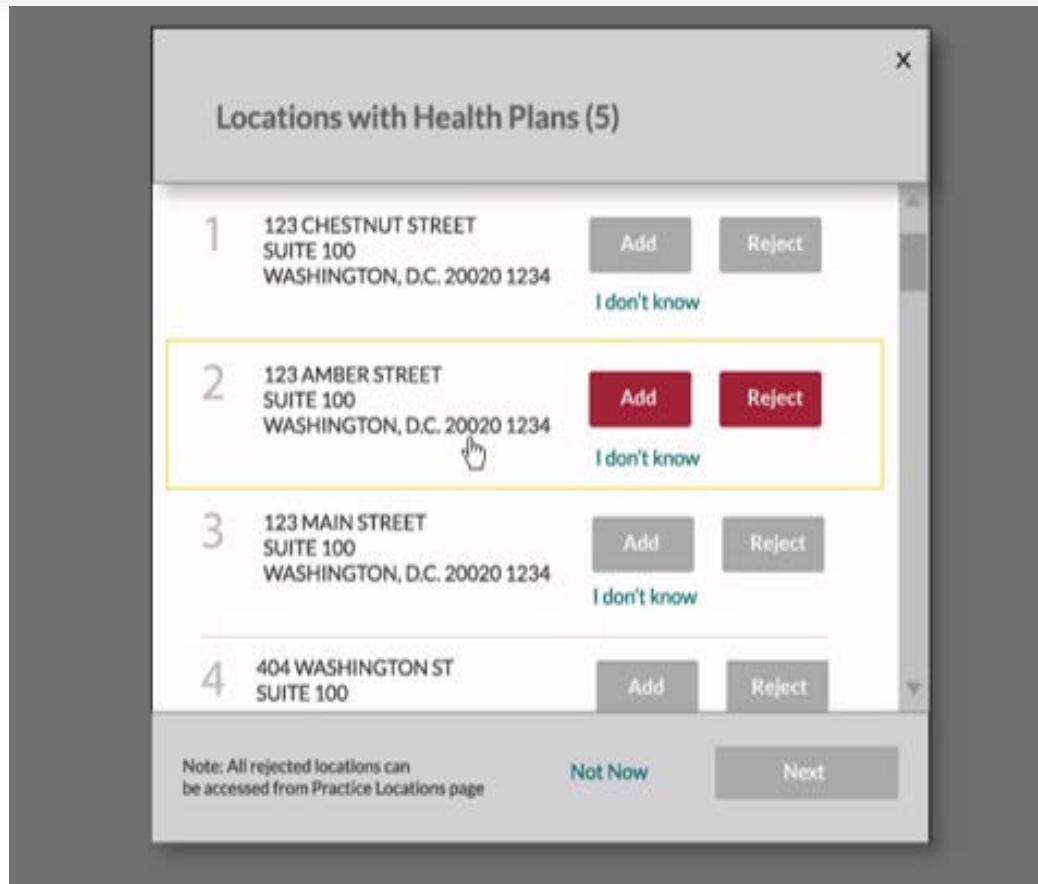
- All providers will be required to confirm phone numbers for all of their practice locations.
- If the phone number is correct, the provider clicks **Confirm** and the confirmation message disappears.
- If the phone number needs to be updated, the provider clicks **Edit** to return to the Practice Location General Information screen.

Preliminary results show the rate of phone number changes has increased 300% since release of the Direct Assure phone number confirmation enhancement in April.

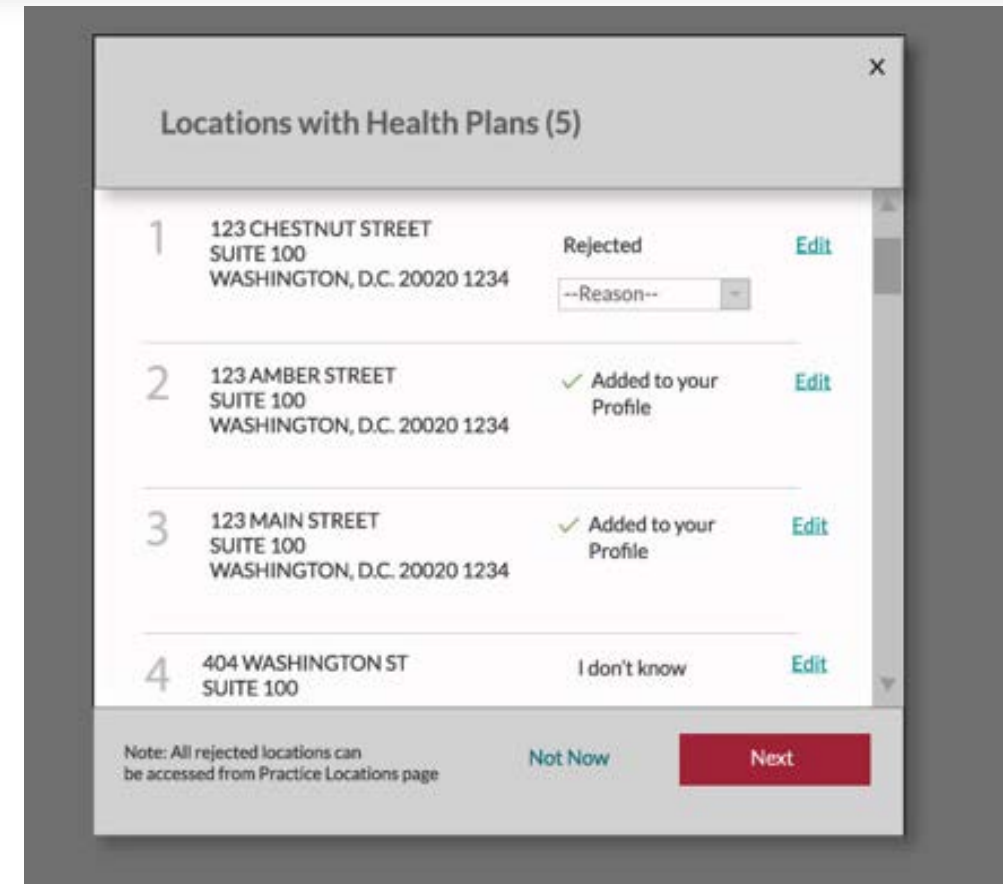


- Average change rate for phone number throughout 2016 was approximately 1% of providers per attestation.
- The increase in the rate of change demonstrates positive provider engagement and responsiveness.
- As more phone number updates are collected, CAQH will audit the data to determine if changes are resulting in an expected increase in accuracy.

CAQH is continuing to address the directory practice location challenge through a significant enhancement to DirectAssure in Q4 2017.



Provider can accept or reject additional locations



Provider must indicate a reason for rejection

DirectAssure 2.0 will present additional locations that a health plan has (beyond those already entered by provider) and enable the provider to confirm or reject the location.

Providers will also be asked to confirm insurer participation and “...accepting new patients” for each location within the provider profile.

PRACTICE LOCATIONS [Back to List](#)

GENERAL INFORMATION **PARTICIPATION** HOURS PRACTICE LIMITATIONS ACCESSIBILITY SERVICES COVERAGE & CONTACT

HEALTH PLAN PARTICIPATION

Please indicate if you are in the contracting process or currently contacted with each of the Participating Organizations listed below. If you are, please indicate your panel status for new patients.

PARTICIPATION		
Plan	Participation	Actions
Aetna	* Do you participate with Aetna at this location?	<input checked="" type="radio"/> Yes <input type="radio"/> No
	* Are you accepting NEW patients with Aetna at this location?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Cigna	* Do you participate with Cigna at this location?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Horizon	* Do you participate with Horizon at this location?	<input type="radio"/> Yes <input type="radio"/> No

- DirectAssure enhancements coming in Q4:
 - All health plans that have rostered the provider for directory information will be presented for confirmation.
 - Insurer-level confirmation and “accepting new patients” will be captured and made available to health plans via an API output.
 - Health plans are able to use this data to update directories and identify misalignment in contract terms and provider responses.

In Summary: DirectAssure offers considerable benefits to health plans and providers.

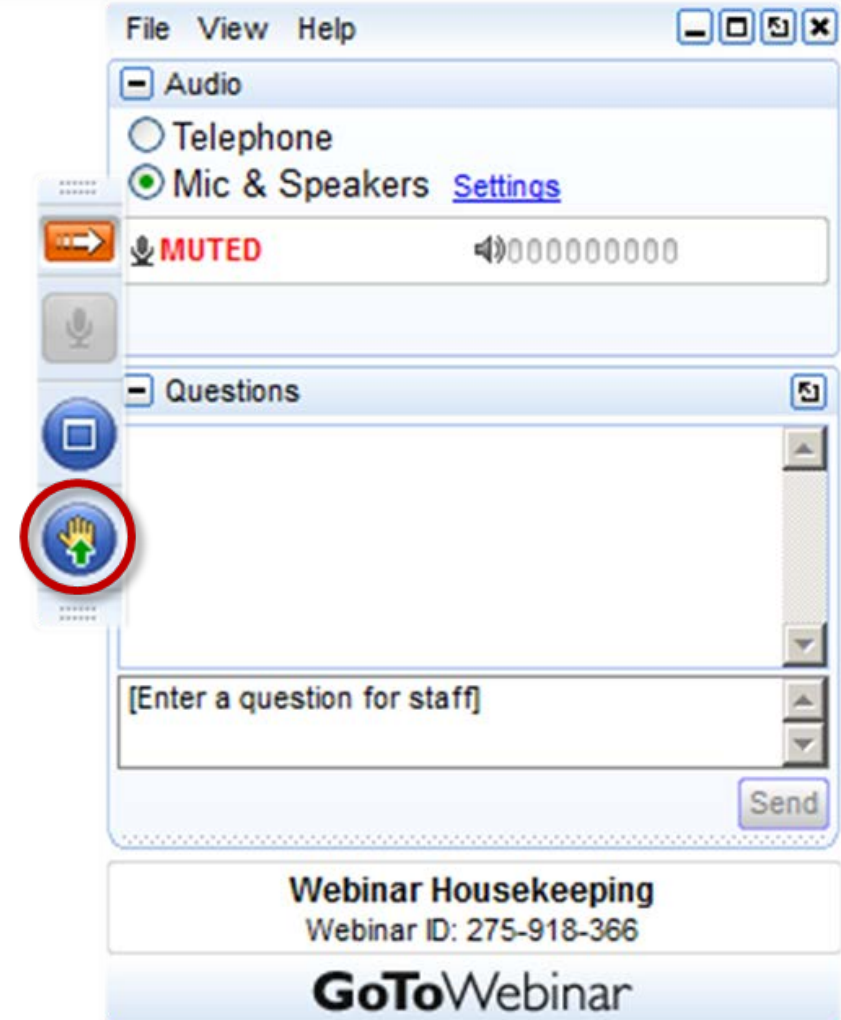
- **Proven** – Mature solution adopted by leading health plans, resulting in measurable data improvement.
- **Time-saving** – Eliminates the need for each health plan to contact every provider in their network to obtain timely, correct information.
- **Compliant** – Helps health plans meet federal and state requirements, and avoid costly penalties for noncompliance.
- **Cost-effective** – Reduces administrative costs and inconvenience for health plans and providers.
- **Friction-reducing** – Provider offices need no longer respond to multiple plan requests for the same information.
- **Robust** – Enables the more than 1.4 million providers participating in CAQH ProView to easily review and update their self-reported professional data for use in provider directories.

Questions?

Audience Questions and Answers

Please submit your questions

Via the Web – Enter your question into the “Questions” pane in the lower right hand corner of your screen.



Thank You for Joining Us



Ann Brisk
Director, Business Development
CAQH
ABrisk@CAQH.org



Ron Urwongse
Senior Product Manager
CAQH
RUrwongse@CAQH.org

www.directassurance.org



CATALYST