

Adva-Net: Streamlined Primary Source Verification Credentialing Process

Executive Summary

Adva-Net is the nation's first and largest specialty network for comprehensive pain management, post-acute care and addiction recovery within the worker' compensation industry. Their network includes more than 55,000 healthcare providers at locations across the country. Working with so many providers, the organization needed more accurate, timely primary source verification (PSV) as part of their credentialing process.

The Challenge

To meet the forecasted credentialing demand, and to ensure that the organization was meeting NCQA standards for primary source verification (PSV), Adva-Net determine that they would need to hire two additional associates to oversee their PSV process. Unfortunately, the cost of onboarding new personnel and building a fully automated PSV solution was impractical, so they decided to outsource their data verification needs.

Adva-Net was also concerned that key data elements were being overlooked, and the omission would severely impact their ability to fully evaluate provider applications, while increasing their susceptibility to audit risks.

The Results

Since Adva-Net was already using CAQH ProView® for their provider data gathering process, they decided to choose CAQH to meet their PSV needs. The network had a strong and positive relationship with the CAQH team and were pleased to learn that the PSV solution utilized the provider data within CAQH ProView.

Since deploying CAQH Primary Source Verification, the team has witnessed:



A 20-minute per provider time savings in data gather due to increased automation of processes.



Timely collection of key elements such as employment gaps, Medicare sanctions and board certifications.



A significant reduction in its audit vulnerability.



Proper staff and resource allocation.



A reduction in the pass-through fees associated with verification data collection.



Scalable pricing according to volume.



CAQH, a NCQA-certified Credentials Verification Organization, partnered with health plans to develop CAQH Primary Source Verification, an industry-wide solution that authenticates the accuracy and completeness of healthcare provider information to support credentialing decisions while reducing the burden for plans and providers.

The Process

Reduced audit vulnerability

As an NCQA-Certified Credentials Verification Organization (CVO), CAQH offered Adva-Net the assurance they needed that all regulatory requirements for verified data elements were met, thus reducing their audit vulnerability.







Meeting Regulatory Requirements



Reduced Audit Vulnerability

Increased automation and proper staffing and resource allocation

PSV automatically imports provider data from CAQH ProView to populate the initial file. Previously, the Adva-Net team spent an estimated 20 minutes per provider simply to access this data manually. Their team was also spending considerable time making outbound calls to providers to address data questions and discrepancies. While much of the PSV process is automated with primary data sources, the U.S.-based provider outreach team at CAQH will contact providers as needed to clarify data and finalize files.



Improved Staff Resourcing



Automation



Reduced Provider Outreach

No data pass-through fees

Adva-Net was pleased that the flat-rate pricing combines data extraction fees for primary source monitoring and licensing databases, as well as CAQH ProView. Other CVOs charge for access to the data sources required for PSV, but Adva-Net did not want to pay for overlapping service and data charges.



Packaged Services



Flat-Rate Pricing



Elimination of Overlapping
Data Charges

Pricing Options

With tiered pricing Adva-Net can realize greater savings as their provider network grows, and both on- and offshore pricing options are available for even greater savings. The organization is also pleased that they are receiving a pricing rebate for any "failed files" (those few in which data could not be confirmed).







