

TPL Strategy Drives Savings and Improved Enrollee Experience for a Medicaid Program

November 30, 2023

Today's presenters



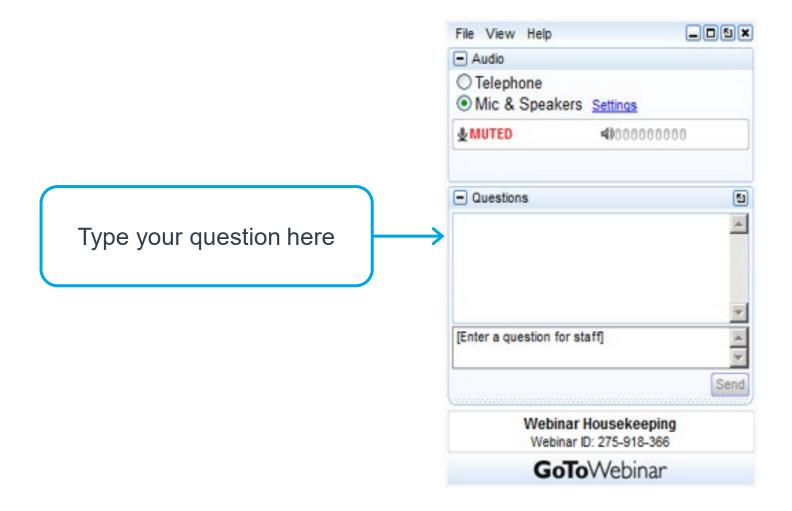
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Housekeeping and logistics



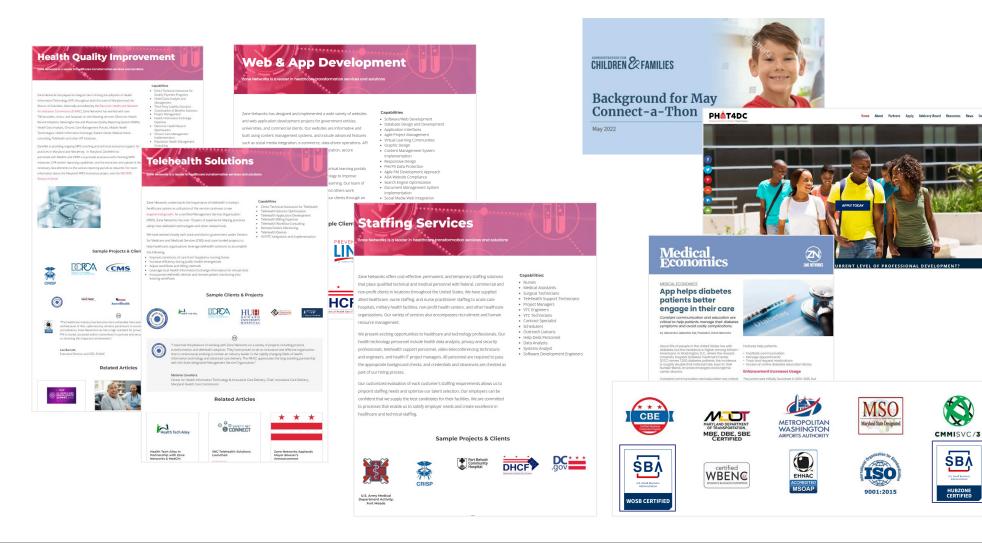


Zane Networks, LLC - A leader in healthcare transformation services



Mission

Applying innovation so organizations can better help all people enjoy the highest attainable quality of life and optimal health





CAQH – Leading data solutions for nearly 1K+ health plans and government entities and 2M+ providers









Providers

Health plans, government, employers, and administrators







































Introducing the District of Columbia's Department of Healthcare Finance (DHCF)



Mission: The Department of Health Care Finance works to **improve health outcomes** by providing access to **comprehensive**, **cost-effective**, **and quality healthcare services** for residents of the District of Columbia.

The Department of Health Care Finance (DHCF), is the department within the District of Columbia responsible for administering all Medicaid services under Title XIX (Medicaid) for eligible beneficiaries.

- In addition to Medicaid, DHCF administers insurance programs for immigrant children, the State Child Health Insurance Program (S-CHIP or CHIP), and Medical Charities (a locally funded program).
- DHCF has three priorities for the programs they administer:
 - 1. Building a health system that provides whole-person care
 - 2. Ensuring value and accountability
 - 3. Strengthening internal operational infrastructure

DC Population¹ 679,031 residents

Medicaid Enrollees²

~305,000 DC residents are enrolled in Medicaid -- a 25%+ increase in total enrollment since 2013

Annual Budget³

~\$3.7B operating budget for FY2023

- 1. DC Health Matters, March 2023
- 2. HealthInsurance.org, April 2023
- 3. CFO.DC.gov



DHCF's TPL strategy seeks to improve financial outcomes and experiences

Identifying and updating Medicaid beneficiaries' TPL resource information is the foundation of DHCF's cost avoidance efforts

National Association of State
Medicaid Directors conducted a
study that found states could **save**an average of 10% on Medicaid
expenditures by effectively
leveraging Third Party Liability
(TPL) coverage.¹

Over 5+ years, Medicaid programs across the nation have reported an average **annual savings of \$2.4 billion** through TPL identification and coordination.²

- DHCF defined a unique approach to the Medicaid recovery process
 - Rather than rely upon one vendor to identify TPL coverage and recovery services, DHCF chose to contract separately with solutions for TPL verification and TPL recovery services to maximize the District's opportunity
- Working with Zane Networks, this approach is intended to
 - Maximize TPL identifications to increase cost avoidance
 - Cleanse the TPL database ensuring coverage information is up-todate
 - Improve care coordination and reduce out-of-pocket costs for beneficiaries



^{1.} NASMD Report, 2021 "Leveraging Third Party Liability to Improve Medicaid Reimbursement".

^{2.} Medicaid.gov. Annual Reports 2020

Zane Networks' TPL Solution – A critical component of success



Zane Networks' streamlined solution focuses on data quality and increased TPL coverage

Offer a high volume of TPL opportunities

- Interface with data partners who
 - Have access to a large number of unique commercial carriers from across the nation
 - Refresh / update information at least weekly
 - Provide high-quality, accurate TPL data

Ensure the most current and accurate data is identified

- Perform verifications with a high rate of proficiency and quality control by
 - Verifying results with a combination of automation and manual review
 - Cross-checking data sources with an automated review
 - Validating results directly with carriers using randomized data samples



CAQH's Coordination of Benefits provides unique, scaled verification information





National Coverage Registry

National database of coverage files of 245M+ patients, sourced directly from benefits carriers across the US.

Used by health plans, TPAs, employers, state/local sponsors to manage COB and payment integrity.

Performs matching logic, uncovers and validates plan overlaps, and makes primacy determinations for medical and some pharmacy coverage.

100%

Participation by national carriers; 55+ total plans, TPAs, and governments

Weekly

Data updated directly from participating plans including validations

245M+

Member lives included in CAQH database

>99%

Validation of coverage overlaps (patients with >1 source of coverage)

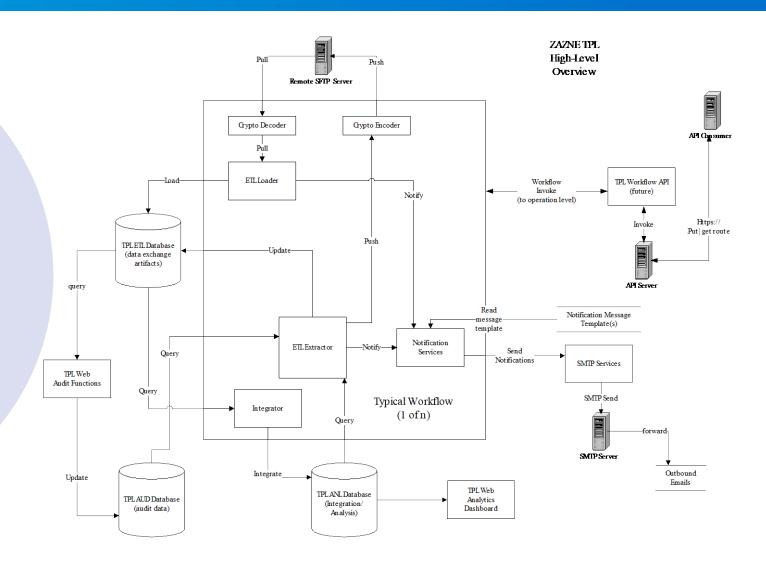
Primary Source

Data submitted directly from health plans, multiple coverages validated by carrier EDI responses in real-time



Zane Networks TPL architecture was purpose-built to support multiple integrations

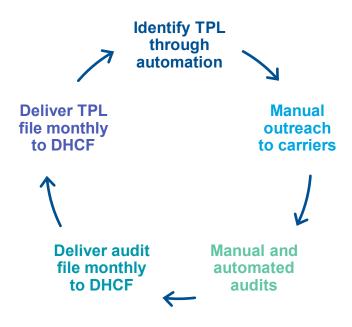
- Advanced architecture with the capability to support both realtime and batch interactions
- Five current connections with the flexibility to easily add more
- Ability to expose APIs to automate, launch, and interface with third-party applications and/or MMIS systems



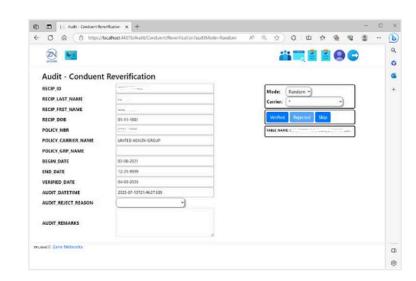


Robust reporting and operational capabilities support accountability

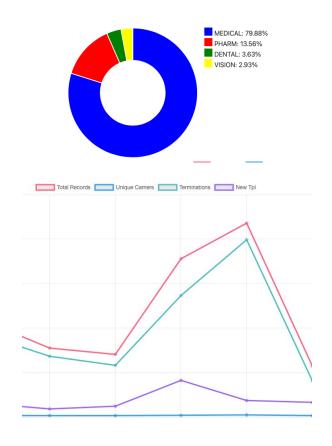
Monthly Process



Auditing Tools



Dashboard for Monitoring Trends





Improved results through collaboration

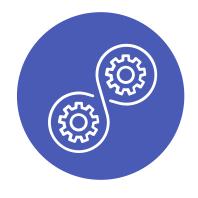


Zane Networks
and DHCF have
worked
collaboratively to
make this initiative
a success

- Maximize Cost Avoidance increased identified TPL with a growing number of commercial carriers
- Identification of Terminated TPL helped cleanse the database and improved data accuracy
- Accountable Vendor Financial Model –
 Zane Networks is paid only on verified TPL



Learnings for others



Focus on data quality and distinction between verification vs recovery has been a success



Transparency (enabled through reporting, dashboards) has provided accountability and trust



Third-party, objective parties supporting the work (avoid competitive vendor issues)



Thank you for joining us!



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Thank You!

