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Aetna

Improving Initial Provider Credentialing Processing: Aetna's CAQH Data Integration

"One of the greatest benefits aside from the cost savings is the improvement to overall data integrity by using an automated approach."

— *Scott D'Amato*
Senior Project Manager, Provider
Data Services/Credentialing, Aetna

Challenge

Reduce time, costs and errors encountered within data entry process during initial provider credentialing.

Best Practice Solution

Develop an automated process that automatically integrates UCD data into new provider credentialing applications. UCD data is extracted and formatted into a master file for data entry processing on a weekly basis.

▶ Automated processing handles about 600 records in two hours.

▶ System automatically reprocesses applications to correct Provider Identification Numbers; staff no longer has to handle these.

▶ Other incorrect or incomplete data is noted on reports, for staff to handle as needed.

Summary

Aetna credentialing staff went into the CAQH UCD Data Access System daily to find data, and then manually entered that information into Aetna's system for each initial credentialing task.

Staff keyed in an average of nine screens with 67 data fields per application. Duplicate provider requests and incorrectly assigned Provider Identification Numbers were commonly discovered during the data entry process. Aetna formed a multi-departmental workgroup to identify automation opportunities for the CAQH data stream and began a project to develop a solution. The result: the Credentialing Automated Data Entry Tool (CADET).

CADET processes UCD data once a week, automatically entering that information into the appropriate fields, using pre-determined business rules which mirror the previous manual data entry process as much as possible. Aetna is now looking at ways to apply the system to re-credentialing.

Results

▶ Data automation has reduced average manual entry to an average of two screens and 21 data fields.

▶ One staff person handles 57.5 data entry transactions daily; formerly one would handle only 25 transactions.

▶ Realized 48 percent cost reduction for initial data entry process – reallocated resources to handle other priorities.

▶ 15 percent of initial credentialing applications require no manual intervention.

▶ 65 percent require only partial data entry.

▶ Improved overall data integrity by reducing manual intervention.

Key Takeaways

▶ Creating a multi-departmental workgroup was a key to success.

▶ Next steps should include expanding the process to automate re-credentialing.