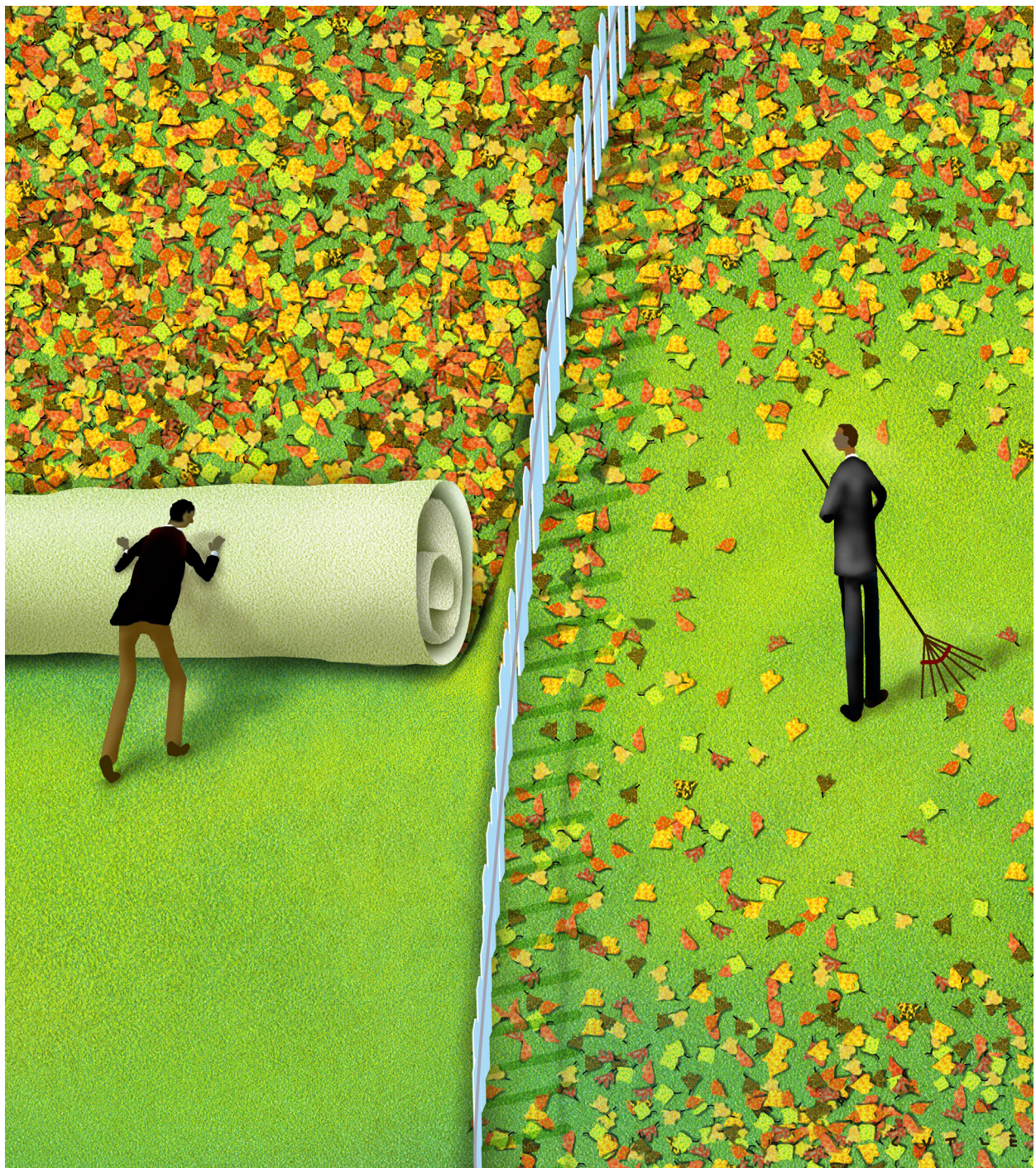# CAQH Solutions

DirectAssure:
Proven Strategies for Improving Directory Accuracy

CAQH Solutions

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Proven Strategies for Improving
Directory Accuracy**

CONTENTS

About CAQH

CAQH, a non-profit alliance, is the leader in creating shared initiatives to streamline the business of healthcare. Through collaboration and innovation, CAQH accelerates the transformation of business processes, delivering value to providers, patients and health plans. Visit www.caqh.org and follow us on Twitter: @caqh.

Introduction

Provider directories are an essential lifeline for health plan members who need to quickly and accurately identify and contact in-network providers. However, directories can be a time consuming source of frustration for those responsible for maintaining them. As a consequence, too often they contain inaccuracies or incomplete information that can lead to delays for patients seeking treatment.

Recent audits of online Medicare Advantage plan directories by the Centers for Medicare and Medicaid (CMS) discovered that nearly half of the information was outdated or incorrect. Inaccuracies ranged from changed addresses and phone numbers to errors regarding whether physicians were available to take on new patients.

The frustration stems from the burden that provider practices face in trying to keep up with the volume of requests for updated directory information. A 2019 survey conducted by CAQH found that most practices spend nearly $1,000 per month responding to requests from on average between 20 and 30 plans. This costs the healthcare industry $2.76 billion annually.

The requests come by email, regular mail, fax and telephone, often in different formats and with different deadlines. The result is a nearly constant stream of work for practices — straining resources and leading to errors.

Inaccurate directories can impact member satisfaction. But for insurers, there's another price to pay: The federal government may issue fines of up to $25,000 per day, per member for inaccurate provider information.

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The Solution

DirectAssure®, a CAQH Solution, improves the quality of provider data in health plan directories in part by simplifying the data collection and evaluation process. DirectAssure provides an intuitive, easy to use platform which enables providers to submit or review existing practice, program and plan affiliation information from CAQH ProView. Then, using DirectAssure, that data is compared to a health plan's directory data. Based in machine learning, DirectAssure algorithms automatically identify inconsistencies within the records and flags them for further review.

Any discrepancies are then presented to the provider for reconciliation. And, once the necessary corrections have been made within the base CAQH ProView profile, an updated record is made available to all health plans. Payers are then able to leverage this data to update directories and identify misalignment between contract terms and provider responses.

The Approach

A recent review of one plan's approach to managing its directory revealed that provider locations were the most likely data elements to be incorrect. Addressing these errors became a priority for the organization, with a target goal of no less than 85% accuracy to minimize compliance risk.

The staff's second step was to define specific scenarios in which providers would not take appointments at practice locations, and implement a scalable process to identify those practices and stop publishing their locations.

Scenarios

To identify incorrect practice locations, the team compared 60 thousand locations in the provider directory with those submitted by providers in CAQH ProView. If the two data points did not match, there was an 80% probability that the location in the directory was outdated.

To determine if providers were not taking appointments at a given location, the team compared data on whether the provider was currently practicing, available to read tests but not take appointments and if they covered or filled in for colleagues. Inconsistencies were further indicators of location errors.

Through efforts like these, health plan providers can implement an organized, ongoing process to improve the accuracy of provider data in their directories.

Lessons Learned

These scenarios demonstrate that health plans should have a defined set of priority targets to test in order to maximize and accelerate directory accuracy improvements and to reduce compliance risk.

They should also focus on scenarios that can be easily identified. This includes instances where a health plan has a location (for a specific provider) and the provider did not report it to CAQH ProView. Similarly, it includes whether the provider has self-reported status indicators that suggest the location should be suppressed. Plans should create a process, supported by technology, to automatically identify and stop publishing these locations at scale.

Finally, plans should create a baseline of directory accuracy prior to launching the initiative, and measure it on an ongoing basis. What's a reasonable goal for compliance and accuracy? Once "low-hanging-fruit" accuracy gains have been secured, then expand on these processes for other data that will address remaining directory errors: e.g. phone numbers, suite numbers, and whether or not the physician is accepting new patients.

The result will be a more accurate tool that better serves patients, providers and payers and lowers frustrations for all.

To learn more about how DirectAssure can help your organization improve provider directory accuracy, visit DirectAssure.org or contact DirectAssure@caqh.org.

CAQH®

www.caqh.org