![HighPoint FOR HEALTHCARE]

SIMPLIFYING HEALTHCARE IT

WE TUNE OUT THE NOISE SO YOU CAN FOCUS ON IMPROVING HEALTHCARE.

What's the secret to navigating the ever-changing healthcare environment? Experience and adaptability. HighPoint experts are industry veterans who understand the complete payer lifecycle including new product implementations, business process engineering, and addressing regulatory mandates.

From rapid assessments and market inquiries to complex multi-year projects, our consultants are in the thick of it with you, attaining every goal you set.

PAYER TECHNOLOGY AND OPERATIONS

HighPoint's Payer Technology and Operations Practice navigates the complexities of today's healthcare marketplace with our clients, and strategically forge a path to sustained growth through creatively applied technology, process improvement, and innovative problem solving. What does that look like?

CORE QUALITY

Configuration
- Core Implementation
- New Business
- System Upgrades
- Regulatory Compliance
- Program Management
- Project Management
- Advisory Services

Optimization
- Training Services
- Quality Assurance
- Business Processing
- Operational Assessments
- Ops Dashboard
- Managed Services

Integration
- Data Warehouse
- Care Management Solutions
- Provider Data Management
- PBM
- Data Quality
- Cloud Based Solutions

Extensibility
- Custom Business Requirements
- External Portals
- Custom Development
- SharePoint
- Business Objects
- ETL

CONFIGURATION

Change is the only certainty in Healthcare, and that's only more true for the technology supporting the industry. Healthcare systems are as complex and configurable as the plans the payer market offers, so it's not enough to know the technology platform. Implementors need an integral understanding of the industry's challenges, current regulatory landscape, and specific goals and obligations of the company. Averaging over 15 years industry experience, HighPoint experts are agile and innovative, ensuring we meet today's and tomorrow's challenges.

OPTIMIZATION

HighPoint's team of Senior healthcare professionals all come from industry and are leaders in configurational and operational best practices. We know the technology and, more importantly, we understand the business processes the technology supports, which allows our teams to quickly identify opportunities to improve your plan's efficiency. We listen, we observe, we identify, we analyze, and then together we implement an efficiency-maximizing plan.

INTEGRATION

Today's core system must work in an integrated healthcare ecosystem supporting and communicating with the latest technology to meet the changing landscape of Healthcare delivery. HighPoint's technical teams are leaders in disparate platform integrations to create an automated and fluid transactional system. We've done it all from developing automated enrollment capabilities to integrating CRM and care management systems.

ANY QUESTIONS? LET'S START THE CONVERSATION.

For more information on any of the material you've read here, feel free to reach out to either Kathleen Grabowski or Steve Schneiderman, two of our leading industry experts.

TALK TO KATHLEEN GRABOWSKI.

Senior Director, Payer Technology
Kathleen.Grabowski@highpointsolutions.com

TALK TO STEVE SCHNEIDERMAN.

Vice President, Payer Technology
Steve.Schneiderman@highpointsolutions.com

POPULATION HEALTH.

Get unparalleled thought leadership and expertise essential to solving the problems healthcare payers face. We work with you to ensure your unique medical management challenges are tackled with agile solutions. Our experts partner closely with your team to develop and implement an overall business strategy that conforms to regulatory mandates and aligns with healthcare trends. The result is greater productivity, improved communication, elimination of ineffective systems and processes, and, most importantly, better member relationships and outcomes.

OUR EXPERTS

With an independent, solution-agnostic approach, HighPoint experts are ready to help:

- Define your Population Health Management structure
- Bridge the gap and support transition
- Evaluate and deploy all necessary tools
- Support physician and member adoption
- Enable risk segmentation, consumer analytics, quality reporting, and member/patient engagement
- Align workflows and clinical and claims data integration

OUR EXPERIENCE

- Deep vendor and clinical workflows knowledge and experience across many Blues plans;
- Preferred implementation partner of several top care management solutions;
- Created Population Management capabilities for large Claims and Care Management BPO service provider focused on Medicare Advantage to implement and standardize Care Management Platform, enabling delivery of BPO capabilities;
- Developed population health maturity roadmap and BPO offerings for revenue growth and service lines for Medicare advantage expansion;
- Upgraded Care Management solutions and tools to enable enhanced reporting and workflow standardization across several large regional Blue Cross Plans;
- Developed comprehensive Population Health Management strategy and approach for a large regional provider owned health plan looking to expand in the Medicaid and BPO space;
- Conducted analysis on high member utilization and stratification of population demographics with a focus on behavioral health and disease management;
- Managed requirements definition and RFP vendor selection process for selection and implementation of Care Management solution for several large plans.

We have deep expertise supporting all of the major population health vendors:

OUR PRACTICE EXPERTISE

System Selection

- Business Requirements Development
- Functional Checklists for Individual Program Components
- Structured Demos, Evaluation and Scoring Approach
- Vendor Profiles
- Finalist Due Diligence and RFP Process

System Implementation

- Project Management
- Project Planning and Readiness Assessment
- Clinical, Business and Technical Subject Matter Expertise
- Regulatory, Accreditation, Contractual Compliance Expertise
- Implementation and Configuration Support
- Quality Assurance and Testing
- Business Process Alignment
- Education and Training
- Post Implementation Gap Remediation

Interim Leadership

- Interim Senior Leadership for Population Health Programs

Program Assessment

- Assess People, Process and Technology
- Identify Strengths and Opportunities
- Provide Industry Best Practice Comparison
- Strategic Roadmap and Implementation Plan aligned with corporate vision and objectives, regulatory (Medicare and Medicaid) and accreditation standards and guidelines (NCQA and URAC)

Program Development

- Utilization Management – Inpatient Care Transitions; Outpatient Ambulatory Care Management
- Quality Management and Improvement – CM / CCM / DM / Wellness
- Population Based – Care Gaps; Stratify Risk; Engage; Manage; Measure

Management Consulting

- NCQA and URAC Accreditation Readiness Management
- CMS – Part C Reporting and Audit Readiness

ANY QUESTIONS? LET'S START THE CONVERSATION.
TALK TO CHRIS MCSHANAG.

Vice President of Population Health
Chris.McShanag@highpointsolutions.com