THE DOCTOR CAN'T SEE YOU NOW: NEW WAYS TO SPEED UP AND IMPROVE PROVIDER ON-BOARDING

Thursday, October 3rd, 2019 11:00am PT / 2:00pm ET

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The HealthCare Executive Group (HCEG), was founded in 1988 by healthcare executives seeking a forum where the open exchange of ideas, opportunities for collaboration and transformational dialogue could freely ensue, especially with respect to the annually identified HCEG Top 10.















- **1. Data & Analytics**: Leveraging data (especially clinical) to manage health and drive individual, provider and payer decisions.
- 2. Total Consumer Health: Improving members' overall medical, social, financial, and environmental well-being.
- **3. Population Health Services:** Operationalizing community-based health strategy, chronic care management, driving clinical integration, and addressing barriers to health such as social determinants.
- **4. Value-based Payments**: Transitioning to and targeting specific medical conditions to manage cost and improve quality of care.
- **5. The Digital Healthcare Organization:** HSAs, portals, patient literacy, cost transparency, digital payments, CRM, wearables and other patient-generated data, health monitoring, and omni-channel access/distribution.
- **6. Rising Pharmacy Costs:** Implementing strategies to address growth of pharma costs along with benefits to quality of care and to total healthcare costs.
- 7. External Market Disruption: New players like Amazon, Chase, Apple, Walmart, and Google.
- **8. Operational Effectiveness**: Implementing lean quality programs, process efficiency (with new core business models), robotics automation, revenue cycle management, real-time/near-time point of sales transactions, etc.
- **9. Opioid Management**: Developing strategies for identifying and supporting individuals and populations struggling with substance abuse/addiction or at risk of addiction.
- **10.Cybersecurity:** Protecting the privacy and security of consumer information to maintain consumer trust in sharing data.

Today's Speakers

Cate McConnell

Global Industry Leader, Healthcare Payers Appian

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Cate McConnell is a healthcare consulting and product executive with 20 years of experience in payer strategy, operations, claim optimization and EDI. Cate earned her MBA from Duke University's Fugua School of Business.



Fritz Haimberger

Global Industry Leader, Healthcare Providers Appian

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Fritz is a healthcare consulting, sales, and management executive with 20 years of HIT, clinical operations, and revenue cycle experience. Fritz holds a B.E. in Biomedical Engineering from Vanderbilt University.



Kirsten Prucha

Global AVP Digital Enterprise
Luxoft, a DXC Technology Company

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Kirsten has more than 30 years of experience working with health plans, third party administrators, dental plans and PPO networks. Kirsten has 6+ years consulting experience related to technology and BPO services designed to improve processes and reduce costs. Kirsten earned a BA at Virginia Tech.



Ryan VanDePutte

Associate Director, Appian Account Bits in Glass (BiG)

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Ryan is an Associate Director at Bits In Glass where

he's responsible for managing and executing the full delivery and implementation of custom Appian solutions for Bits In Glass' clients. Ryan has nearly a decade of experience providing project and portfolio management as well as strategic guidance and advisory services for some of the nation's largest healthcare companies.





Agenda

- Provider Onboarding Introduction
 - Two Views: Payer & Provider
 - Current State
 - Challenges
- Top 5 Considerations in Provider Onboarding Improvement Initiatives
- Tool & Technology Solutions to Provider Onboarding Challenges
- Questions



What is Provider/Clinician Onboarding?

Payer View

- Final step in challenging process of recruiting and credentialing
- Fulfills network strategy and duty to members
- Highly administrative function with low-value added

Provider View

- Last step after challenging process of recruiting and hiring
- Fulfills service strategy and duty to patients
- Highly administrative function with low-value added



Key Onboarding Activities

Provider Network
Management

Strategy & Recruitment

New Contracts/ Contract Amendments

Data Updates and Corrections

Terminations

Credentialing & Contracting

New Credentialing

Re-Credentialing

Attestation

New Contracts /
Contract
Administration

Provider Data Management

Enrollment

Data Updates & Corrections

Provider Monitoring

Terminations

Clinician Onboarding

Recruiting

Licensure Validation

Education Verification

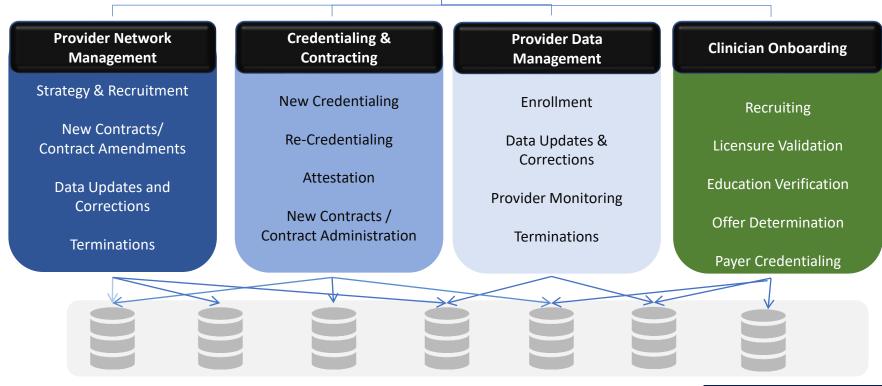
Offer Determination

Payer Credentialing



Often Run on Siloed Applications with Manual Process Interventions

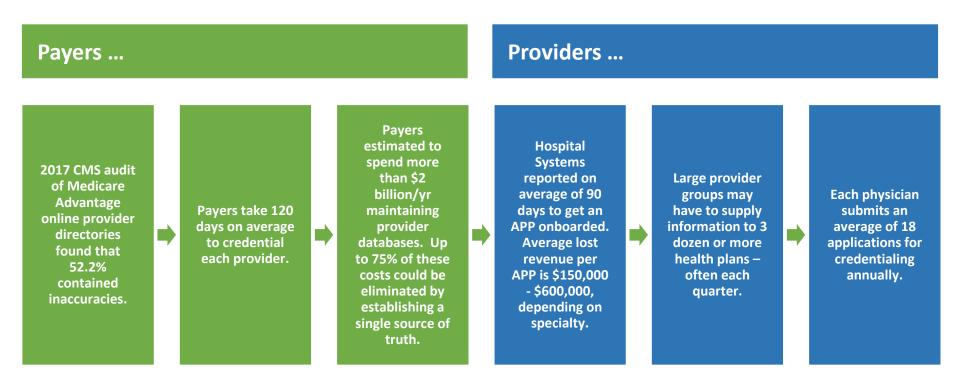
Siloed Business Functions & Applications



Systems of Record



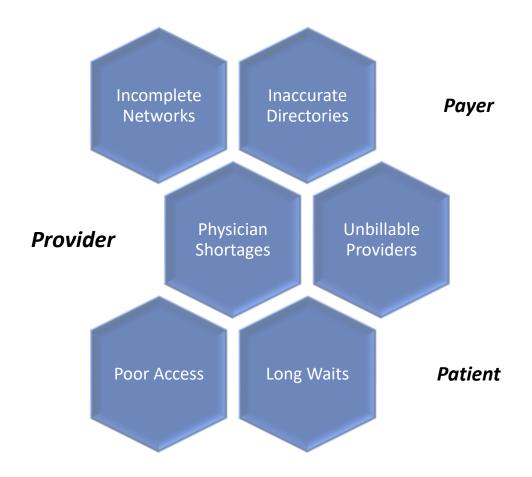
What Can Go Wrong?





Current State in Provider Onboarding

Payers, Providers and Patients all experience frustration when providers are not onboarded quickly and efficiently.





Change Drivers in Provider Onboarding



INCREASING NUMBER OF "PAY-VIDERS"



GROWING TREND OF EMPLOYED PHYSICIANS



INCREASINGLY
COMPLEX NETWORK
STRATEGIES



DESIRE FOR UNIVERSAL
CREDENTIALING
STANDARDS



MOVE TOWARD CLOUD ADOPTION



PRESSURE FOR GREATER VISIBILITY & REPORTING



Solving the Challenge with Technology



Payers have invested in numerous solutions for each step of the Provider Lifecycle Management process.

Providers know that onboarding clinicians is different and more complex than onboarding other types of employees.

They both lack a single common view of the entire process.



Increasingly viable option: create a custom solution for your organization rather than reconfigure COTS software.

Low-code development makes it possible to do this using Agile delivery in short time windows.



About Appian

Appian is a low-code platform for building enterprise software applications. Build an Appian app once and run it on any device.





About Luxoft and DXC Technology

As of June 2019, Luxoft became part of the DXC Technology Family

Market leader in clinical and business transformation, population health management, claims management, regulatory transformation and national healthcare programs.

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|----------------------------|---|-----------------------|---|--------------------------------------|--|
| 50+ YEARS OF SERVICE | Delivering healthcare and life sciences software and services | 1.3B ANNUAL CLAIMS | Healthcare claims processed annually | 630M MEDICAID CLAIMS | Processed annually |
| 15K IT PROFESSIONALS | Dedicated to supporting health and life sciences clients worldwide | >100 MILLION RECORDS | Electronic medical records maintained | #1 PROVIDER | Of Medicaid process management services, touching 48M lives |
| 1M+ SOFTWARE USERS | Of software and integrated systems | 15K PHARMA PRODUCTS | Pharma product approvals supported | 84%+ TOP 50 GLOIBAL PHARMA COMPANIES | Use regulatory transformation solutions |
| 6 of 10 TOP 10 FORTUNE 500 | Top 10 Global Fortune 500 healthcare companies are | 650% INCREASE | In clinician case load capacity with Health360 and Public Health solutions | 100% U.S. FORTUNE 500 | Top 250 U.S. Fortune 500 Pharma companies are clients |



About Bits in Glass (BiG)

- An award-winning software consulting firm helping companies outpace the competition, drive rapid growth, and deliver superior customer value through technology
- North American coverage
 - Denver (US head office), Dallas, and New York
 - Edmonton (CAN head office), Calgary, Toronto, and Montreal





Top 5 Considerations for Provider Onboarding Transformation



Tailor your solution for best user and customer experience 2

Design for future changes and technologies (RPA, blockchain) 3

Reduce need to rewrite existing systems as your business changes

4

Build in auditability and reporting from the start



Assign higher value work to employees

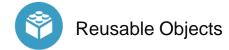


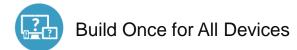
Low-Code: Draw a Picture, Build a Program















Making a Business Case for Low-Code Build



Process Breakdown & Optimization

- Engage knowledgeable resources across teams
- Uncover bottlenecks and redundancies



Tailored Applications

- Connect disparate systems
- Flexibility enables organizations to adapt quickly



Scalability

- Expand on features and functionality
- Customize behaviors and make data actionable



Blockchain



Blockchain is a secure, verifiable, distributed transaction ledger where everyone who participates has an identical copy.



Smart contracts are computerized transaction protocols that validate and execute contract terms.



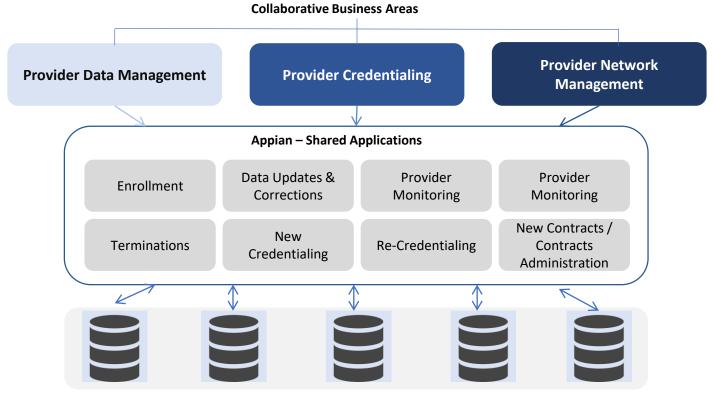
Payers and providers could use these tools for frictionless credentialing, contracting and onboarding.

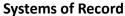


Providers would maintain control of their credentialing information in asset registries



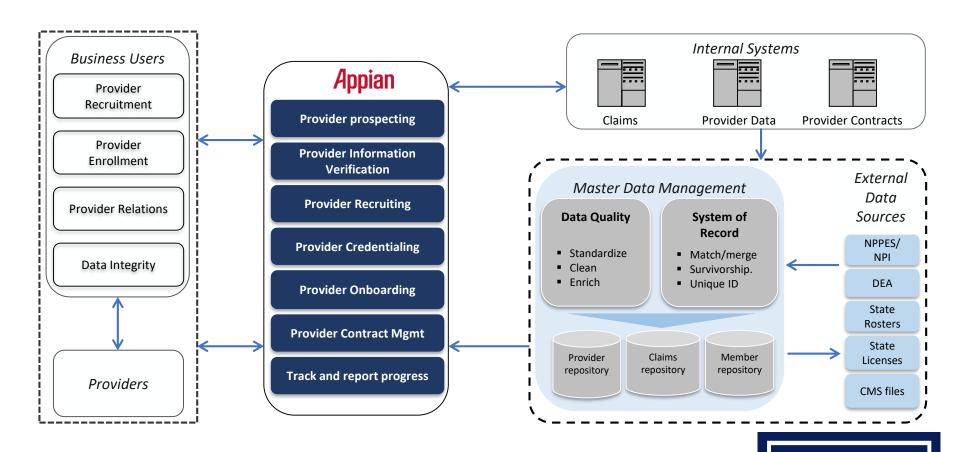
Integrated Platform for Provider Onboarding and Related Activities







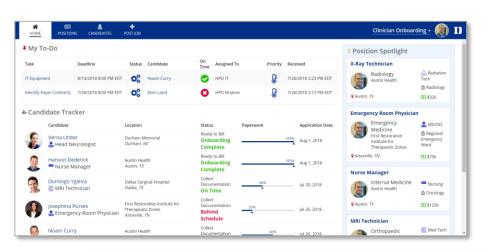
Provider Lifecycle Management Platform View

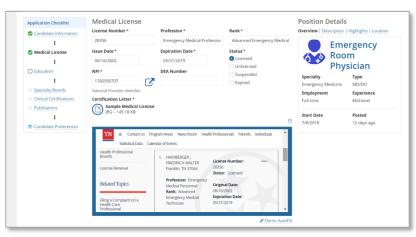


HOEG

VEBINAR Series

Clinician Onboarding Solution









Questions





Wednesday, October 30th, 2019 12:00PM to 3:00PM PT

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Developed by Change Healthcare in partnership with the HealthCare Executive Group (HCEG) over the past nine years, the Industry Pulse Research Survey is based on the HCEG Top 10 challenges, issues, and opportunities, as voted on by HCEG membership during the HCEG's Annual Forum.

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