Improve provider network performance, costs and value

As value-based care models gain momentum, maintaining a solid network is key to improving outcomes, quality of care, and satisfaction. This is possible only by understanding where there are opportunities to impact performance and engaging providers as partners to drive change.

MedeAnalytics Network Insights helps payers review network coverage and evaluate provider performance against defined targets to develop high-performing network strategies and value-based payment arrangements.

With MedeAnalytics Network Insights, you can:

- Reduce time spent on manual network analysis
- Improve network performance and contractual rates
- Get an integrated view of cost and utilization of care across the network, including medical and pharmacy services
- Identify potential provider partners for value-based arrangements
- Compare performance, costs and outcomes of providers to their peers



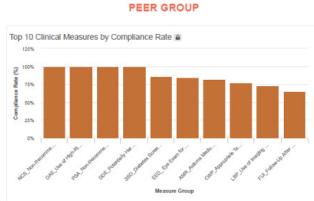
Why you need Network Insights

Health plans need an efficient way to monitor provider network performance, decrease costs and stay competitive in the market. Having insight across the network allows payers to steer care to select providers, establish tiered-value networks, and improve negotiations and value-based contracting.

Potential results

- 70% reduction in provider network analysis times
- **0.5%** improvement in rates and reduced expenses
- 25% increase in value-based contracting





Scorecards compare performance of providers to their peer groups



Reduce spending on underperforming providers



Engage providers through real-time scorecards



Mitigate network risk using risk scoring data



Improve provider contracted fee schedules

Investigate network and individual provider performance

With cost and utilization data consolidated into one view across the network, payers can investigate areas of leakage and identify opportunities for improving the efficiency and quality of care. Payers can analyze network structure to establish and validate tiered-value networks and steer care toward high-value providers.

Drive provider performance with powerful scorecards

Placing comparative data in the hands of providers helps to engage them in performance improvement and collaborative relationships with payers. Easy visualization of individual provider performance towards defined targets alongside provider incentives drives positive changes in costs and outcomes. Provider-level detail shines a light on education and credentialing needs to help build centers of excellence.

Assess risk of your members

Utilizing ETG Symmetry groupers, health plans can assess the risk of their members and have insight into the possible medical and pharmacy costs associated with those risks. Assessing risk will help payers set payment rates and annual premiums. Risk markers can be used for comparisons of provider and health plan performance and physician profiling.

Improve negotiated rates with providers

Payers can design and manage value-based payment arrangements utilizing empirical data. Understanding how providers are performing compared to their peers helps payers better define competitive, cost-effective network reimbursement levels. Analyzing performance can help payers recapture out-of-network services and increase negotiations and contractual rates.

Top applications

- Use the Provider Cost Efficiency Dashboard to compare clinicians for similar episodes of care
- Use the PCP Utilization Dashboard to review patterns in professional office visits
- Use Geo-Mapping to perform a geospatial analysis of clinicians and member care
- Use Provider Scorecards to compare clinicians across cost, quality and utilization metrics

