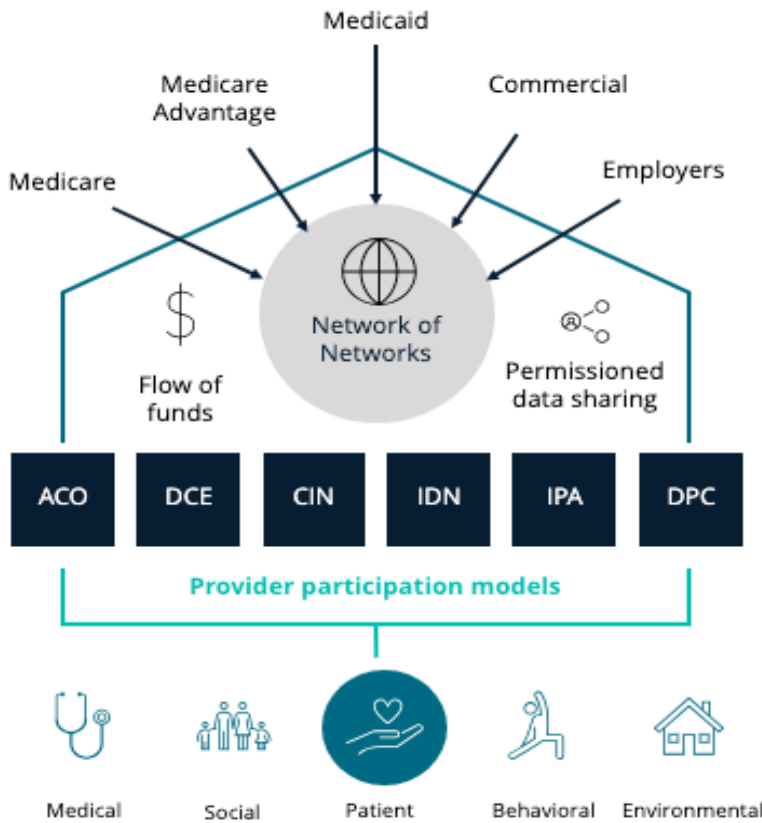




Facilitate sustainable performance and payment alignment

CMS has set a goal for all Medicare beneficiaries (and most Medicaid) to be in value-based relationships by 2030, but most healthcare organizations do not have the data infrastructure necessary to support these arrangements at scale. Existing claims and workflow technologies are not keeping pace with the demands of value-based care. They fail to effectively manage complex contracts, match payments to performance, and support the many-to-many hierarchies that comprise the value-based network.

Value-Based Care Administration combines powerful analytics with contract and payment management capabilities to enhance value-based outcomes through data-driven insights, performance optimization and seamless fund transfers.



Why you need Value-Based Care Administration

Successful administration of value-based care requires the alignment of medical, social, behavioral and environmental components of value-based care and management of high-performance networks that confidently deliver on whole-health patient outcomes.

With agnostic data ingestion and seamless integration, MedeAnalytics provides the infrastructure you need to establish and maintain many-to-many relationships between value-based care stakeholders and their counterparts. This hierarchical approach to partner onboarding, scaling of contract operationalization, and permissioned data sharing is critical to a sustainable transition to whole-person care.

The Value-Based Care Administration platform enables end-to-end management of:

- Attribution and stakeholders
- Contract modeling and execution
- Analytics and performance reporting
- Communication and engagement
- Financial payments and cash flows



Operationalize
incentive payments



Analyze contract
performance



Identify gaps
in care



Streamline
payments

With Value-Based Care Administration, you can:

- Implement hierarchical relationships with newly onboarded stakeholders and users
- Track and visualize performance of care programs at a detailed patient level
- Pull from our contract library and easily model new contracts
- Execute real-time, same-day and batch payment processing
- Support multiple payment methods and instantly detect fraud
- Streamline fund transfers to NPI and non-NPI entities alike
- Communicate easily across stakeholders with custom branding and configurable message templates

Enhanced care quality

With in-depth analytics and insights, health plans and provider organizations can identify high-performing partners, optimize networks, and create specialized quality metrics—ultimately improving care quality for patients.

Cost reduction

By tracking and improving performance with robust dashboards and deep-dive capabilities, providers and payers can reduce costs while maintaining high-quality care. Accurate payment management powered by HSBlox also ensures financial efficiency.

Data-driven decision-making

Using analytics tools and performance insights, providers and payers can make well-informed choices for better patient care and financial management.

Streamlined fund transfers

Payment management capabilities powered by HSBlox facilitate secure and efficient fund transfers. Timely and accurate payments to providers reduce administrative burdens and enhance financial performance.



MedeAnalytics x HSBlox

To bring you the first end-to-end platform to power value-based care success in a single solution, MedeAnalytics partnered with HSBlox—a technology company that empowers healthcare organizations with contract and payment management expertise. Combined with the best-in-class, outcomes-based analytics of MedeAnalytics, payers and providers have access to the insights they need to enhance care quality, reduce costs, make data-driven decisions, and streamline financial processes. Together, this solution represents the industry's most complete value-based care management solution.



Learn more about MedeAnalytics Solutions at
www.MedeAnalytics.com