How to build high-performing provider networks with next-generation analytics

Mede/Analytics®

Managing and growing provider networks does not have to be the manual, resource-intensive process it once was. When network decisions are grounded in comprehensive data and analysis, payers can steer care to the right providers, establish tiered networks, and improve the quality and cost of member care.

What can network optimization tools do for you?

1 **Evaluate the adequacy of provider networks** based on factors such as geographic coverage, specialty services and patient access. Identify gaps in the network and prioritize recruitment efforts to fill those gaps.

2 **Analyze claims data** to identify patterns of network leakage and investigate the reasons (e.g., network adequacy or member satisfaction) why members are seeking care outside of the network.

3 **Compare providers to peers** using normalized metrics such as cost efficiency, quality of care, patient satisfaction, and compliance with clinical guidelines to identify high performers and zero in on best practices.

4 **Assess provider utilization patterns** within the network to understand overutilization and underutilization of services. Optimize network utilization by steering patients to high-quality, cost-effective providers and services.

5 **Use geospatial analysis** to understand if there are specific areas where network expansion or contraction might be necessary to better serve members.

6 **Negotiate favorable provider contracts** based on performance metrics, patient volume and market benchmarks. Monitor contract compliance and assess the financial impact of different contracting arrangements.

7 **Analyze referral patterns** among network providers to identify opportunities for care coordination and collaboration. Optimize referrals to minimize leakage and ensure patients receive appropriate care within the network.

8 **Implement risk adjustment models** to stratify providers based on the complexity and severity of the patients they serve. Use this information to allocate resources effectively and support providers in managing high-risk patients.

9 **Monitor patient outcomes and healthcare utilization patterns** to assess the effectiveness of the provider network. Identify areas where outcomes could be improved through provider interventions or network enhancements.

10 **Evaluate the performance of providers** participating in value-based care arrangements. Measure outcomes, cost savings and adherence to quality metrics to incentivize high-value care delivery.

Learn more about Network Optimization at
www.MedeAnalytics.com