

Health plans have long struggled with inaccurate provider data, which is a root cause of other problems such as obsolete provider directories, undeliverable provider mail, and network adequacy complaints. One reason is that health plans lack a good way to contact providers to obtain updates. They rely on mail and phone calls, which don't always reach the right people and often lead to provider abrasion.

Availity's Provider Information Management solution, available within the Provider Engagement Portal, offers a multi-payer approach to capturing provider data by putting the notification and data entry tools directly in the providers' workflow.

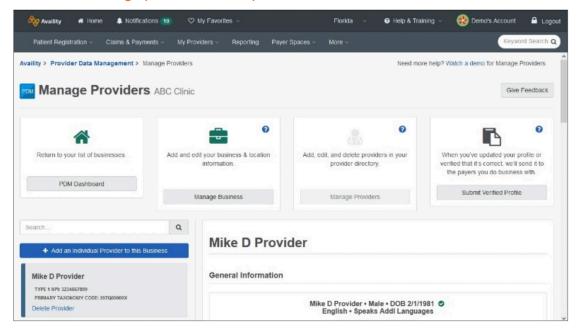
Provider Data Management

The Provider Data Management application detects changes in provider demographic information and uses the Portal to notify providers and ask them to attest to the information's accuracy. The process is as follows:

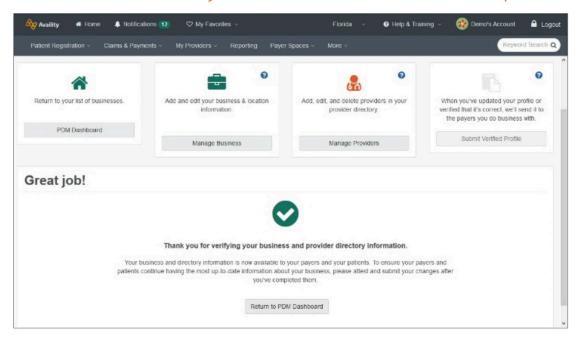
- Analysis: Availity receives data from the health
 plan and determines if there are changes that affect
 the provider's golden record. Availity also looks for
 anomalies in healthcare transactions, such as an address
 on a claim that's different from the address on record.
- User attestation: When discrepancies are found,
 Availity uses emails and messaging in the Portal
 to notify providers of the need to update or
 confirm information. Because Availity delivers
 only information providers need to correct the
 information, attestation rates tend to be higher.
 The provider can also choose to send the corrected
 information to multiple plans.
- Data exchange: Availity returns all data to the health plan using a data format that can be ingested into back-end systems.



Providers have a single place to view and update their information.



Providers can attest to the accuracy of their information and share it with select health plans.



Credentialing

Availity works with health plans and their Credentials Verification Organization (CVO) to give providers a single tool where they can complete the credentialing application process. Leveraging Provider Data Management's functionality, the credentialing tool includes pre-populated information, where available, and a dashboard that gives health plans and providers visibility into the data and workflow.

By streamlining the process and improving transparency, health plans can reduce calls from providers with questions about where they are in the workflow and what information is still outstanding.