

Physician Enterprise & Ambulatory Services

Prescription for a healthy physician enterprise

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Connecting the Docs: Credentialing, Privileging, and Enrollment Enabling a customer focused, efficient process in the shift from volume to value

Health systems, health plans, and clinicians are adapting to the evolving healthcare environment. To survive and thrive, it is extremely important that they find efficient ways to collaborate, streamline delivery models, effectively use technology and analytics, and most importantly improve patient care.

Market pressures and stakeholder satisfaction demands are forcing our clients to consider integrating their credentialing, privileging, and enrollment processes. These efforts are focused on providing better customer service, supporting quality and patient safety efforts, reducing administrative costs, and minimizing regulatory risk as the Office of the Inspector General (OIG) is reviewing the verification of credentials before privileges are granted in their work plans.¹

In addition, the on-going consolidation of health care organizations and increasing importance of managing narrow networks of high performing clinicians has created an environment where execution of credentialing and enrollment is crucial.

Key Questions Being Asked by Leading Organizations

Organizations are finding, especially after expansion or consolidation efforts, that they have no “one source of truth” in their provider credentialing, privileging, and enrollment data. With multiple points of contact, delayed cycle times, and manual processes, many are experiencing failures throughout these processes.

The following questions are at the forefront:

- What is the difference between credentialing, delegated credentialing, privileging, and enrollment? How does the information needed for each component intersect?
- As the “first face forward” to clinicians entering the system, how can we improve provider satisfaction and decrease the number of touchpoints?
- How are the processes, initial notification, and reporting requirements impacted by value based care arrangements?
- Is our organization prepared for the increased scrutiny by the OIG regarding credentials verification prior to granting privileges?
- Are we leveraging our current technology to provide “one source of truth” and fully utilize the tools available to automate and streamline related approval processes?
- Is there an opportunity to consolidate key aspects of the credentialing and enrollment process to execute privileging, audits, and reappointments more efficiently?
- How can we reduce duplicative processes, decrease denials, and increase transparency in the process?



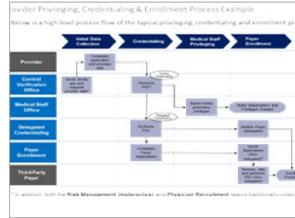
¹Department of Health and Human Services: 2014 OIG Work Plan, pg 7; 2015 OIG Work Plan, pg 20. Available at <http://1.usa.gov/1LIEfk6>

A snapshot of Deloitte's Credentialing, Privileging and Enrollment Service Offering

Leading Practice

Each organization has a unique process from decentralized to centralized. Understanding how your organization "stacks up" against leading practice and future state goals is the first step.

Process Opportunities



A process workflow highlights the multiple touchpoints that exist throughout the process. Each touchpoint provides an opportunity to increase accuracy and efficiency, decrease cost and denials, and improve customer service.

Implementation Road Map



A detailed road map is prepared so that processes are aligned, performance is improved, technology is leveraged, and unnecessary regulatory risk can be avoided.

Approach

We have helped our clients find the right model for managing the changing needs within their credentialing, privileging, and enrollment functions.

1

Assessment

Collect and analyze data related to process cycle times, volumes, staffing ratios, and other areas. Conduct interviews and process observations and review functionality of IT platforms. Prepare a process improvement business case with recommendations and priority areas to address.

2

Planning

Establish steering committee, decision rights, guardrails, and future desired state. Finalize work groups and milestones. Develop a detailed workplan and timeline for the design phase.

3

Design

Design for the future state. Identify modifications and opportunities for improvement regarding operating model. Determine and gain consensus on consistent work flows, policies and procedures, and use of technology. Eliminate unnecessary source document retention and automate approval and notification process.

4

Implementation & monitoring

Provide project management and day to day project leadership of the cross organizational credentialing, privileging, and enrollment performance solution. Implement, test, and go-live with future state design plan. Document the progress and outcomes of each performance initiative.

Bottom-line Benefits

- Increased provider satisfaction
- One source of truth for clinician information
- Improved process/cycle times
- Enhanced transparency and accountability
- Reduced administrative costs
- Decreased denials
- Minimized exposure to regulatory risks
- Accuracy in narrow network information

Contacts

Help your leaders and administrators make smarter decisions and learn about the benefits of using Deloitte's Credentialing, Privileging and Enrollment by contacting any one of us to start the conversation:

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