IHA Webinar
Introducing the Symphony Provider Directory

Wednesday, October 9, 2019
12pm to 1pm

Access the CAPH Symphony Intro Webinar Recording

Agenda

Time	Topic	Lead(s)
3 min	**Welcome, Logistics & Introductions**	David Lown, MD, Chief Medical Officer, SNI
45 min	**Introducing the Symphony Provider Directory**	Doug Hart, Senior Director of Business Development, IHA Rajan Shah, SVP of Strategic Initiatives, Gaine Healthcare
10 min	**Q&A**	All
2 min	**Wrap-up & Announcements** • CAPH/SNI Annual Conference	Kristina Mody, Sr. Program Associate, SNI

SNI CALIFORNIA HEALTH CARE SAFETY NET INSTITUTE

Logistics

Please mute yourself! (We'll have to mute lines if there is background noise)

Please feel free to chime in for questions, and especially for the discussion

At any time, feel free to chat your question & we will read out

Webinar will be recorded and saved on
SNI Link/Data

Introducing the Symphony Provider Directory

About Integrated Healthcare Association (IHA)

Founded in 1994, the Integrated Healthcare Association (IHA) is guided by a large board of leading groups across the industry. We are committed to advancing high-quality, affordable, integrated, and patient-centered care.

The Role of IHA & Our Technology Partners

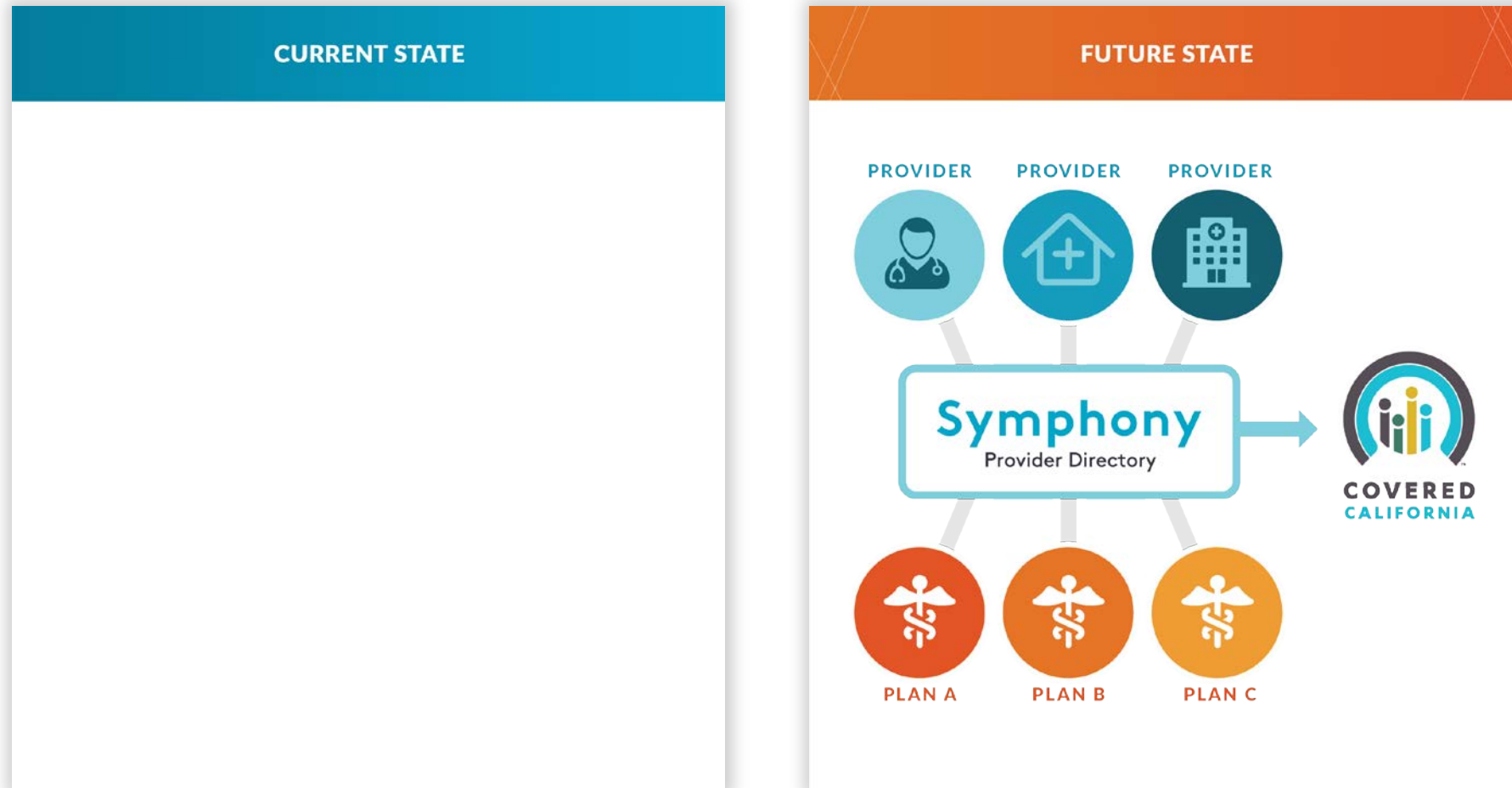|	
Governance	
Business requirements, technical build	
State & federal regulatory compliance	
Communications & business development	

IHA, is leading the development and implementation of a centralized, cloud-based platform that simplifies the provider directory management process for healthcare providers and health plans in California.

Our technology partners:

GAINE   Availity

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The Vision:
Centralize Provider Data Management in California

CURRENT STATE

FUTURE STATE

Our Journey to a Statewide Provider Directory Utility in California

IHA selected by DMHC, Blue Shield and multi-stakeholder committee to lead "PDU" roll-out

Symphony soft launches with select plans, groups and practices

Symphony begins statewide roll-out with plans, provider organizations

Expansion continues with specialty, ancillary providers and other facility types

2023: Targeting to achieve critical mass in CA

2017 **2018** **2019** **2020** **2021**

IHA selects technology vendors after extensive RFP

In Progress: Optimizing portal for small, independent practices

Anticipated SB 137 update by DMHC

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What sets Symphony apart?

COMMUNITY
Driven by Collaboration

- A result of cross-industry collaboration with growing participation across the state including: Blue Shield, Health Net, Anthem Blue Cross, Aetna and over 91 provider organizations

COMPLIANCE
Improved Data Quality

- Symphony's growing network leads to higher quality data reconciliation, operational efficiencies, and improved accuracy of information that consumers depend on

CONFIDENCE
Support at Every Step

- From onboarding to ongoing operations, we partner with you to simply provider data management every step of the way to reduce fatigue and administrative burden

Symphony
Provider Directory

Integrated Healthcare
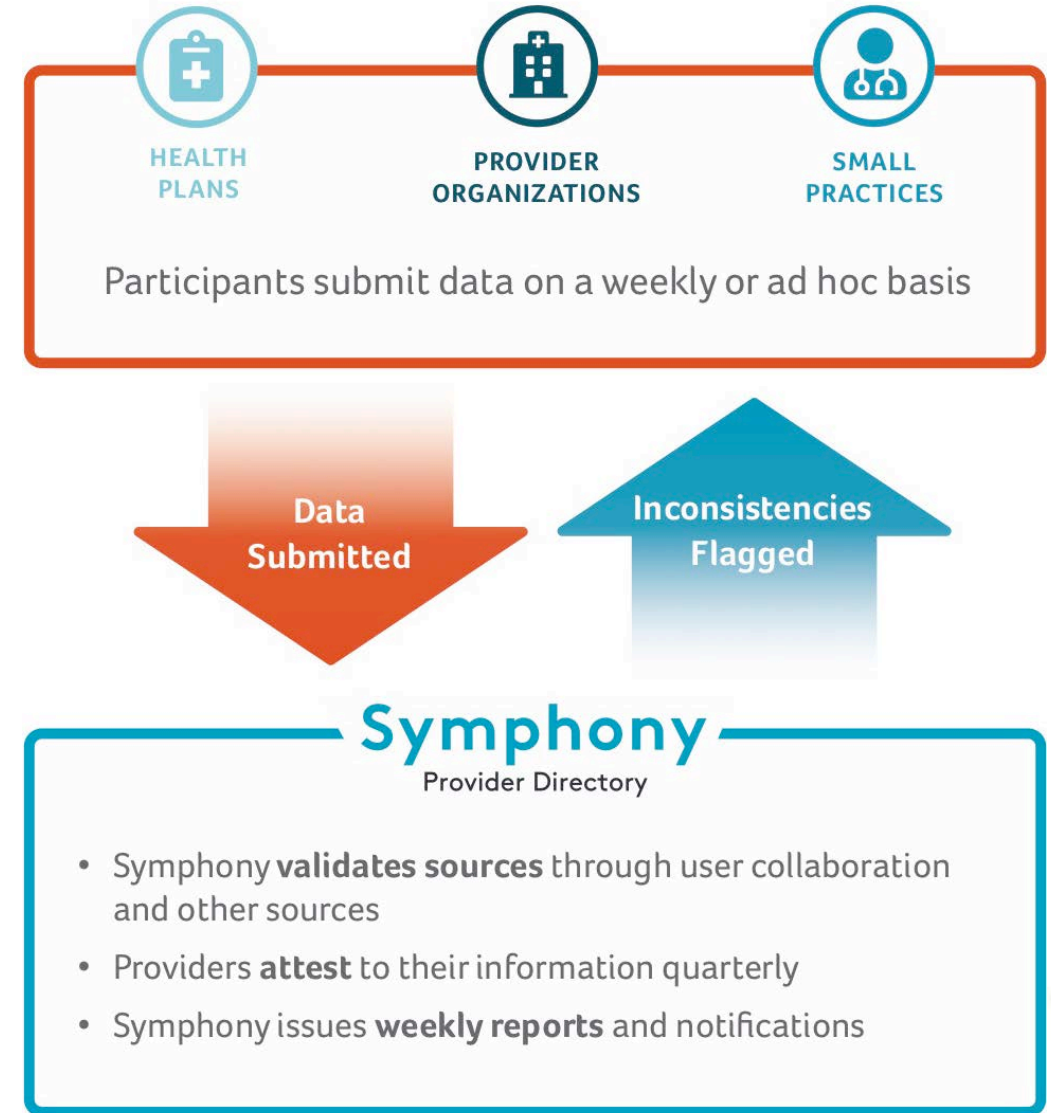ASSOCIATION

How Symphony works

The type of provider information managed in the Symphony Provider Directory includes:

Demographic:
- Provider Name
- License Number
- NPI
- Phone number (service location)

Contract-level:
- Accepting new patients status
- Provider specialty
- Providers who are missing
- Providers who should be terminated

HEALTH PLANS

PROVIDER ORGANIZATIONS

SMALL PRACTICES

Participants submit data on a weekly or ad hoc basis

Data Submitted

Inconsistencies Flagged

Symphony Provider Directory

- Symphony **validates sources** through user collaboration and other sources
- Providers **attest** to their information quarterly
- Symphony issues **weekly reports** and notifications

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On the Path to Industry-wide Participation in California

Plans

aetna

blue of california

Anthem

Health Net

COVERED CALIFORNIA

With several other plans in active discussion

Providers (90+ Groups)

agilon health

AltaMed

CEDARS-SINAI

CHOICE MEDICAL GROUP | CHOICE PHYSICIANS NETWORK

CONIFER HEALTH SOLUTIONS

Dignity Health

EPIC MANAGEMENT, L.P.

Global Care Medical Group IPA

Hill Physicians — Your health. It's our mission.

JOHN MUIR HEALTH

LOMA LINDA UNIVERSITY

MedPOINT MANAGEMENT — Pointing Healthcare In The Right Direction

PIH HEALTH

PIONEER MEDICAL GROUP

Preferred IPA of California — Be a Preferred Provider

PROSPECT MEDICAL

Riverside MEDICAL GROUP — Your family's complete medical home.

sansum CLINIC

SANTÉ HEALTH SYSTEM

SHARP

Stanford HEALTH CARE

And growing...

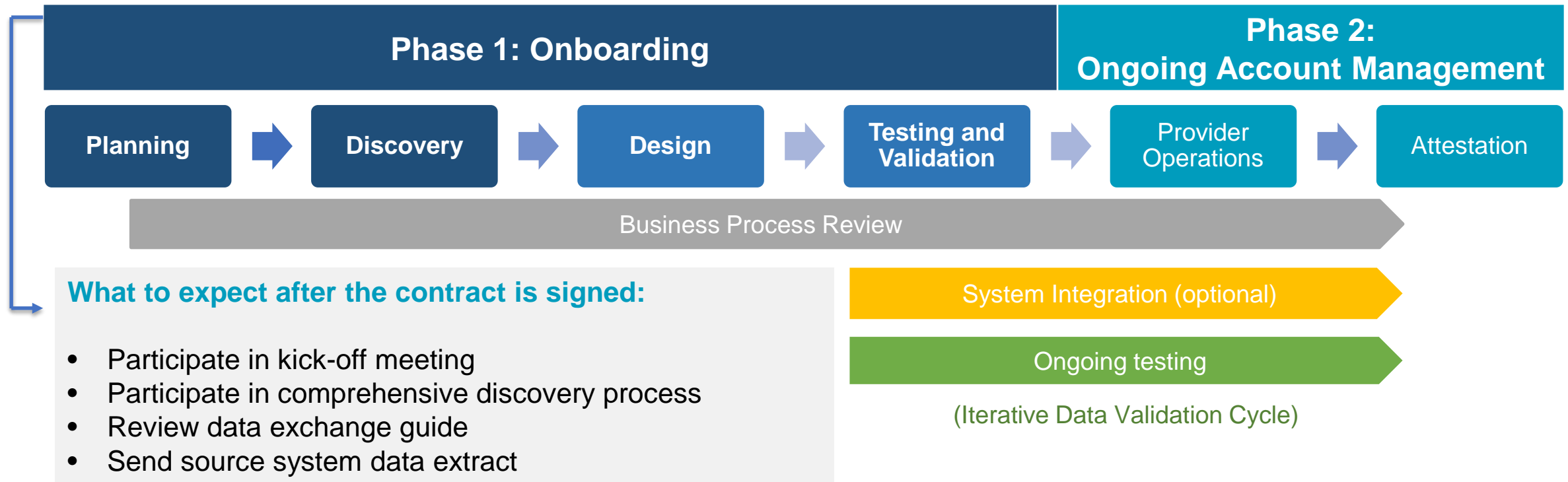Symphony Provider Directory | Integrated Healthcare ASSOCIATION

Providers Have an Important Role in Provider Data Compliance -- Especially in California

Quarterly, bi-annual, or annual health plan outreach to providers is required depending on the regulator

CALIFORNIA		FEDERAL
Department of Managed Healthcare (DMHC)	Department of Healthcare Services (DHCS) (Medi-Cal)	Centers for Medicare & Medicaid (CMS)
Senate Bill 137	California Department of Insurance (CDI)	Department of Health and Human Services (DHHS)

Providers who do not attest within the required timeframe may see a delay of payment and/or removal from health plan member directories.

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Onboarding with Symphony: Our Approach

Phase 1: Onboarding	Phase 2: Ongoing Account Management

Planning → Discovery → Design → Testing and Validation → Provider Operations → Attestation

Business Process Review

What to expect after the contract is signed:

- Participate in kick-off meeting
- Participate in comprehensive discovery process
- Review data exchange guide
- Send source system data extract

System Integration (optional)

Ongoing testing

(Iterative Data Validation Cycle)

Important to note: We know that each organization is different. The time to onboard is variable and can depend on the complexity of systems and data, resource availability and your organization's needs.

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The Challenge

Regulatory Compliance Challenges

State & Federal Guidelines

With oversight from both state and federal regulators, health plan compliance is a multi-front effort that requires understanding of all the various regulations to remain compliant. With additional oversight growing at both levels, upkeep to remain compliant becomes an ever growing part of an organizations operations.
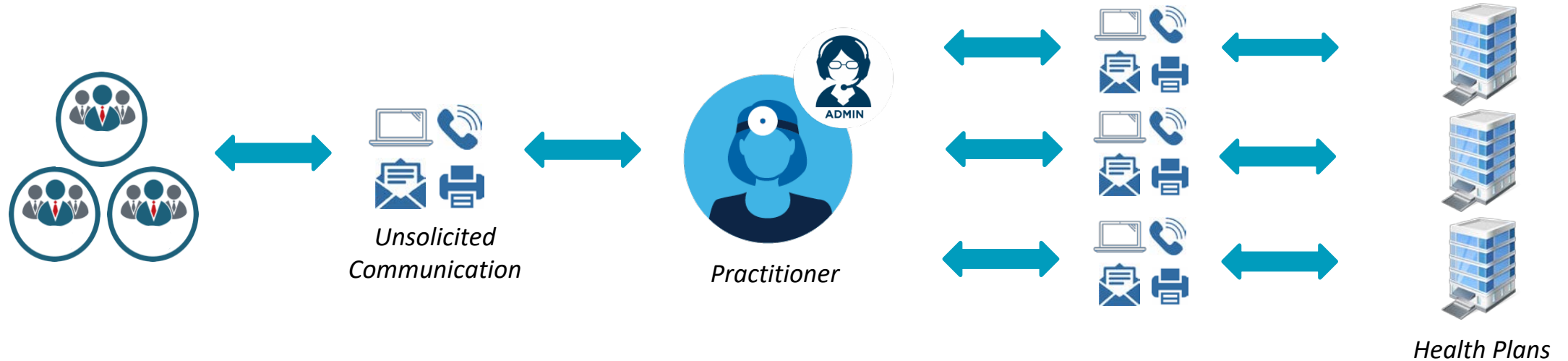
Data Standards

With certain aspects of the data having varying standards between state and federal guidelines, maintaining those policies becomes an increased and challenging effort. Coupled with the fact that many data elements still have no standard means uniformity becomes almost impossible across the industry for the consumer.
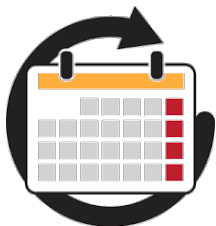
Reconciliation Frequency

With various regulations calling for different frequencies by which information needs to be reconciled between a health plan and its contracted provider network, getting provider engagement in the process is impacted and the health plans face the task of coordinating multiple outreach efforts.

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Data Collection Overload

*Unsolicited Communication*

Practitioner

Health Plans

Current state workflows have created an environment in which there are multi outreach attempts, individually conducted by health plans and unsolicited parties to collect data through multiple strategies (i.e. Fax, email, phone, web portal).

This has lead to disruption at provider offices and confusion on what is regulatory compliant and necessary to maintain online provider directories for the consumer.

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The Contracting Reality

- Value based care has driven many marketplaces to a more delegated provider organization model

- These relationships increase the complexity of where information exists

- Traditional thinking on who we ask for a piece of information needs to be reconsidered

- All invested parties who deal with a practitioner need to be aware of changes in information

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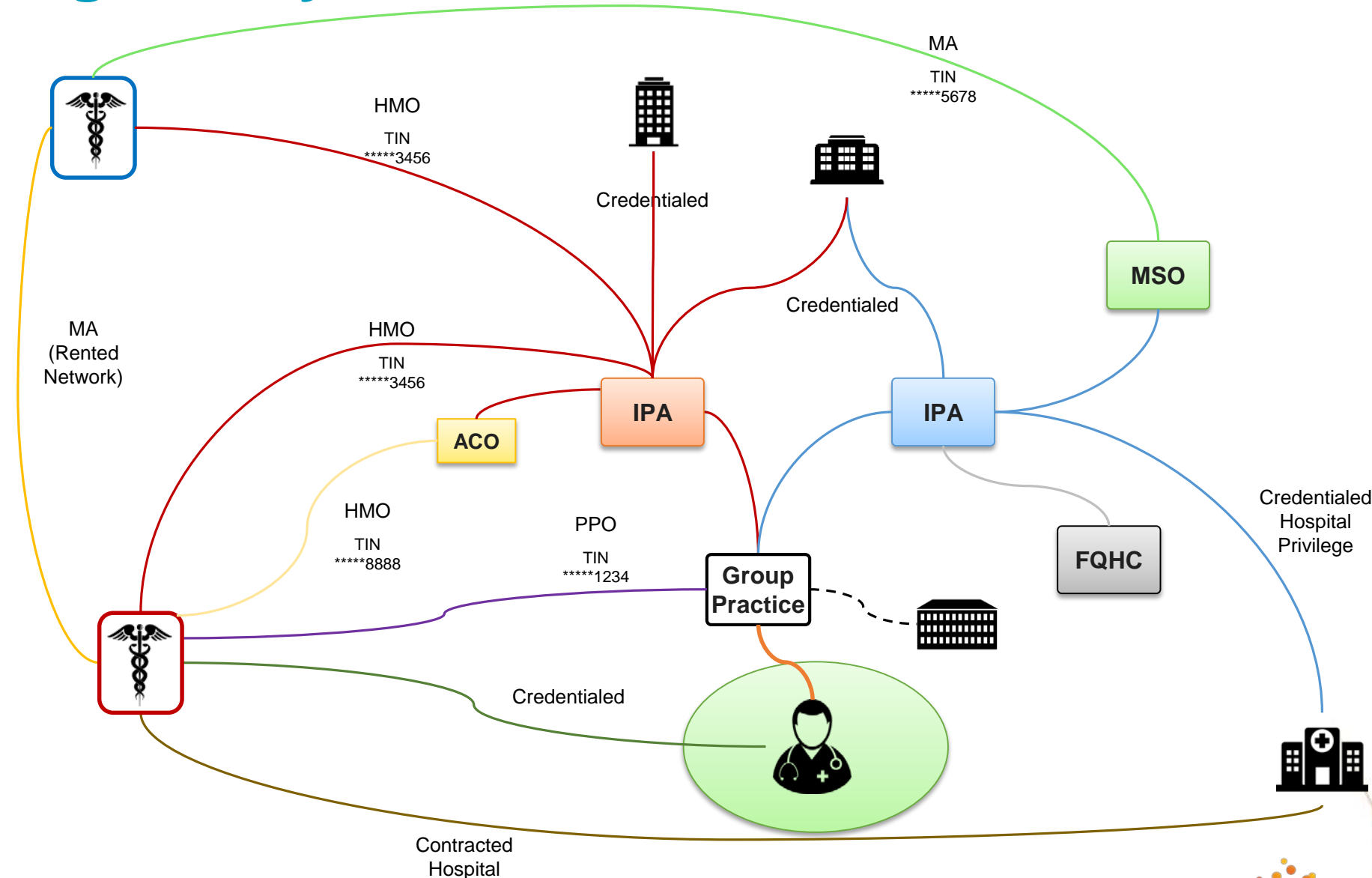
Information Complexity

Let's look at a single question on whether or not a practitioner is accepting new patients

1 Individual Practitioner
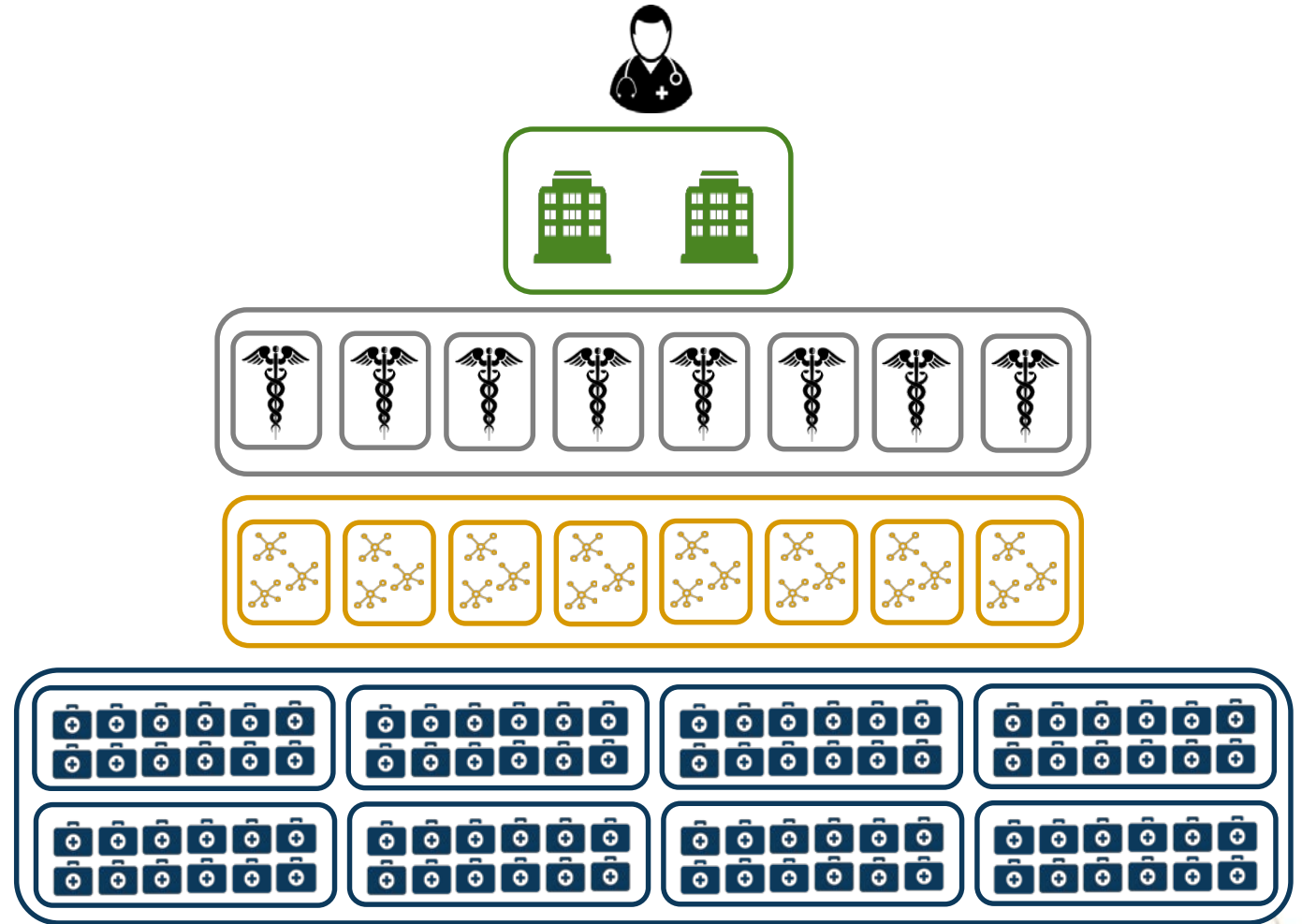
X

2 Service Locations
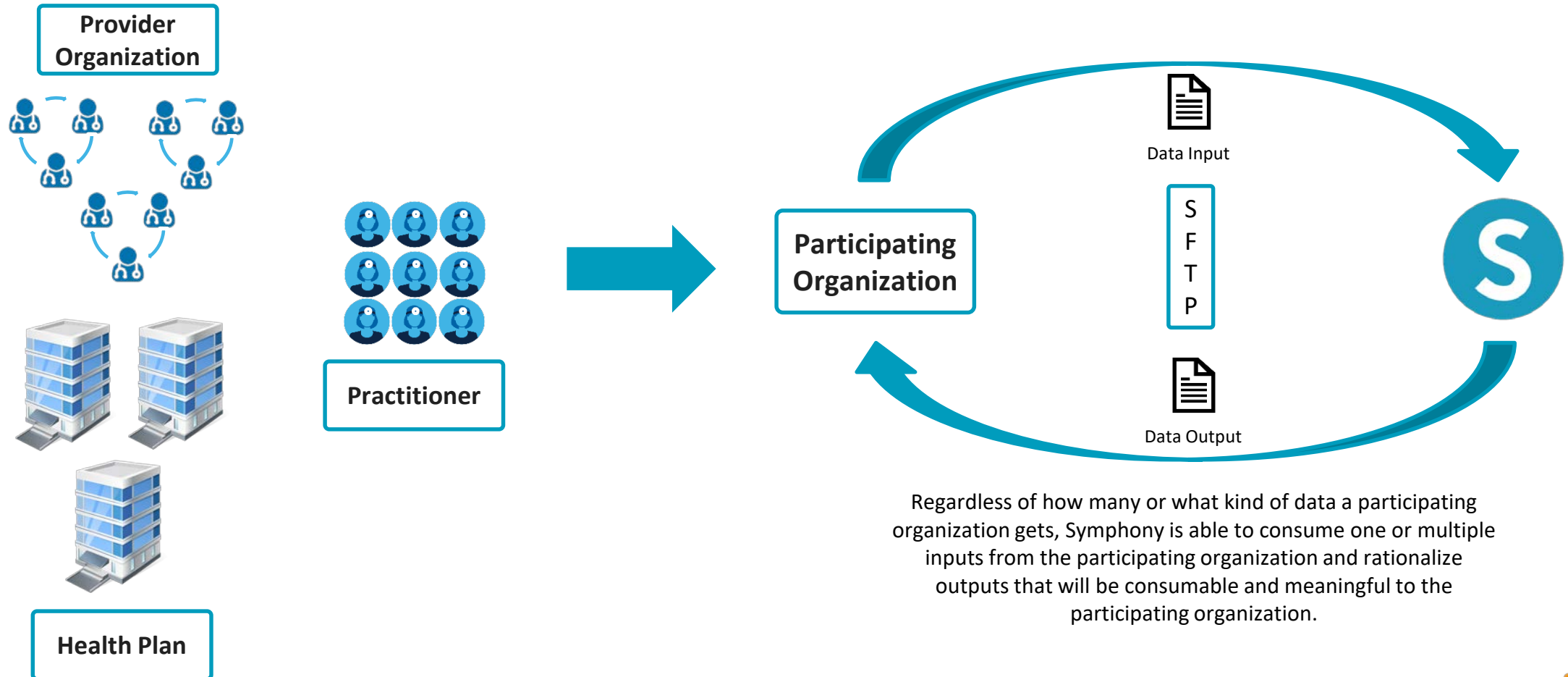
X

8 Contracted Health Plans

X

3 Affiliated Networks

X

4 Health Plan Products Per Affiliated Network

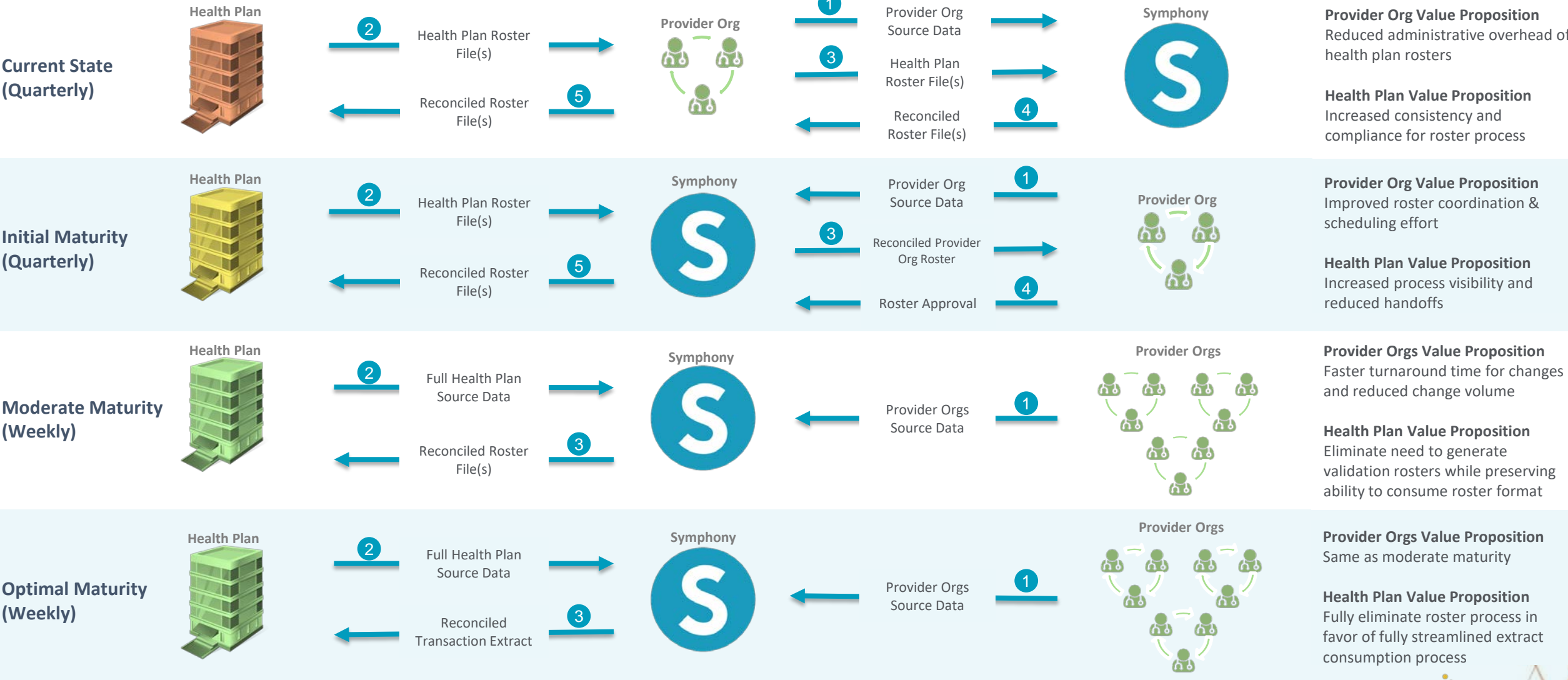Over **192** possible answers to a single question!

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The Platform Solution

Data Exchange Process

Provider Organization

Practitioner

Health Plan

Participating Organization

Data Input

S
F
T
P

Data Output

S

Regardless of how many or what kind of data a participating organization gets, Symphony is able to consume one or multiple inputs from the participating organization and rationalize outputs that will be consumable and meaningful to the participating organization.

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Data Exchange Process

Current State (Quarterly)

Health Plan

2 → Health Plan Roster File(s) → Provider Org

5 ← Reconciled Roster File(s)

1 → Provider Org Source Data → Symphony

3 → Health Plan Roster File(s)

4 ← Reconciled Roster File(s)

Provider Org Value Proposition
Reduced administrative overhead of health plan rosters

Health Plan Value Proposition
Increased consistency and compliance for roster process

Initial Maturity (Quarterly)

Health Plan

2 → Health Plan Roster File(s) → Symphony

5 ← Reconciled Roster File(s)

1 ← Provider Org Source Data → Provider Org

3 → Reconciled Provider Org Roster

4 ← Roster Approval

Provider Org Value Proposition
Improved roster coordination & scheduling effort

Health Plan Value Proposition
Increased process visibility and reduced handoffs

Moderate Maturity (Weekly)

Health Plan

2 → Full Health Plan Source Data → Symphony

3 ← Reconciled Roster File(s)

1 ← Provider Orgs Source Data → Provider Orgs

Provider Orgs Value Proposition
Faster turnaround time for changes and reduced change volume

Health Plan Value Proposition
Eliminate need to generate validation rosters while preserving ability to consume roster format

Optimal Maturity (Weekly)

Health Plan

2 → Full Health Plan Source Data → Symphony

3 ← Reconciled Transaction Extract

1 ← Provider Orgs Source Data → Provider Orgs

Provider Orgs Value Proposition
Same as moderate maturity

Health Plan Value Proposition
Fully eliminate roster process in favor of fully streamlined extract consumption process

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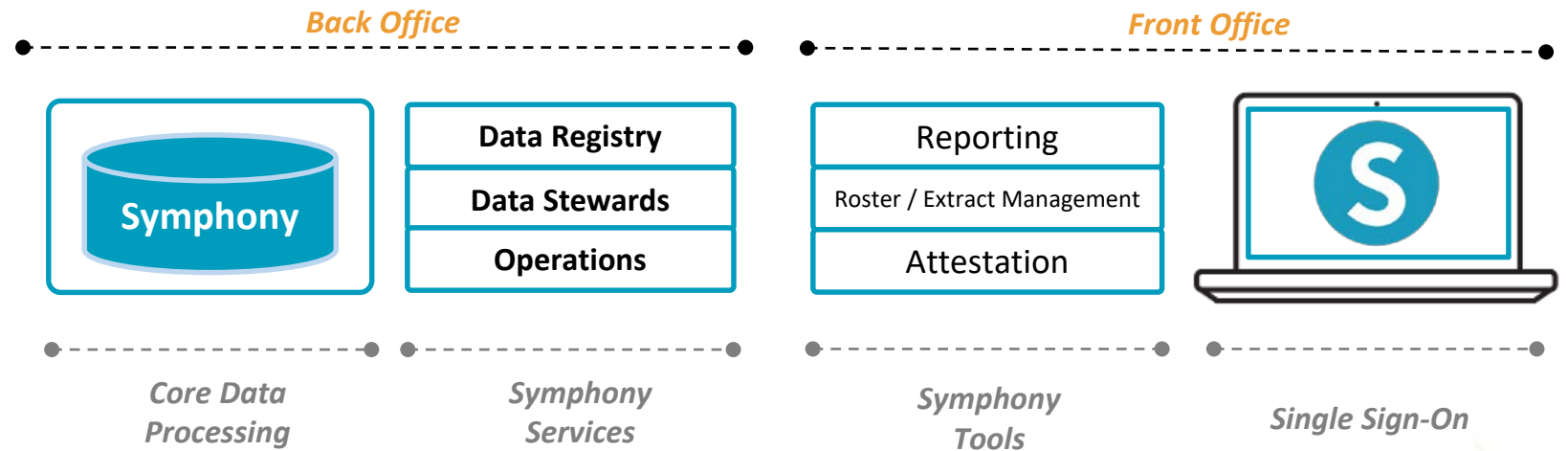
Non-Symphony Participant (No Source Data)

Symphony Participant (No Source Data)

Symphony Participant (With Source Data)

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Platform Model & Data Exchange Process

The Symphony data exchange process is a multi-layered approach that consumes inputs from a variety of sources. The process includes validations rules and data policies through the registry and factors in steward intervention with operational staff to facilitate presenting that information back through a variety of Symphony tools depending on need and purpose.

Back Office

Front Office

Symphony	Data Registry	Reporting	S
	Data Stewards	Roster / Extract Management	
	Operations	Attestation	

Core Data Processing *Symphony Services* *Symphony Tools* *Single Sign-On*

We bring the **framework** to deploy around your <u>processes</u> and <u>workflows</u>…

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Symphony Value Across Constituents

Group Practice / Individual Doctor

✓ **Trusted** online portal

✓ Distribution to multiple plans

✓ Common platform with IPA's

Provider Organizations (IPA's, MSO's, CHC's)

✓ Assisted online attestation

✓ Roster reconciliation to multiple plans

✓ Network management and analysis

✓ Link internal systems

✓ Collect additional information in a single interface

✓ Distribution of daily changes to health plans

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Provider Directory
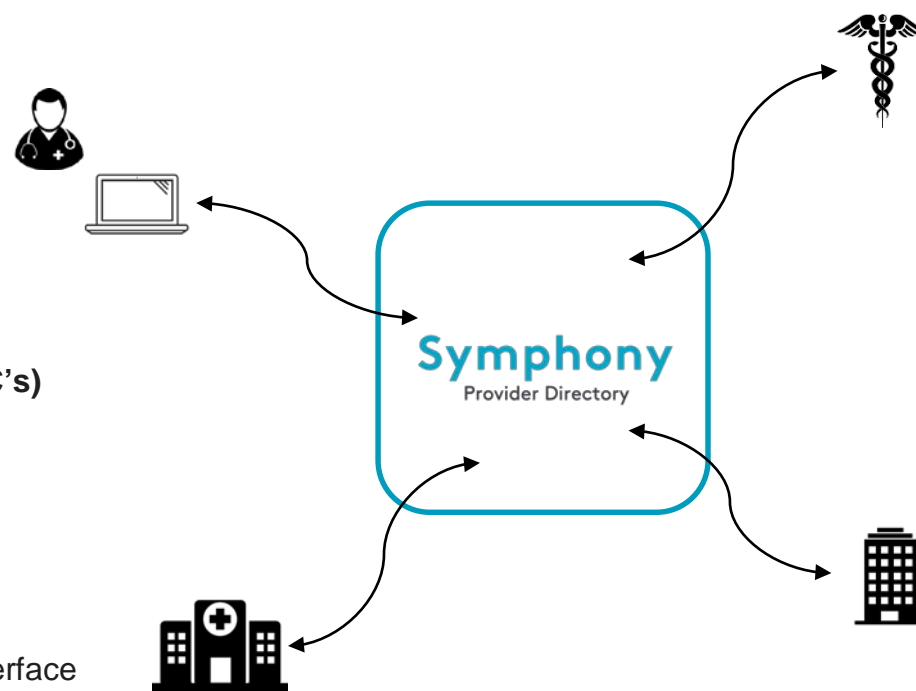
Health Plans

✓ Assisted online attestation

✓ Inbound file transformation

✓ Regulatory reporting

✓ Link internal systems

✓ Understand provider behaviours

✓ Daily updates of provider profile changes

Associations

✓ Protect members data privacy

✓ Trusted online portal for members

✓ Advocacy and member education

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Data Quality

Data Quality Challenges

Definitions & Granularity Of Information

Interactions between health plans and providers inevitably leads to fundamental challenges of how information is understood. This means there can be disconnects in how information is interpreted and/or represented. As Symphony continues to grow as a centralized, collaborative model, better standards and common terminology will help drive towards the right level of detail for all participants.

Data Consumption

The internalizing of information within an organization only highlights how critical this part is to the overall successful management of data. Understanding each organizations business and technical processes is a key cornerstone to Symphony and cannot be made "cookie cutter".

Process modernization

There is a big task at hand to try and move the marketplace to new processes & technologies while maintaining legacy methods (i.e. excel based rosters). Symphony allows for this to evolve over a series of maturity iterations tailored to each organization.

Data Quality Perception & The "TRUST" issue

Years of bad data and processes have led to a trust issue amongst the marketplace about the source of truth of data and what it means to have quality information. Symphony is proceeding with a data quality methodology that its participants can all align and contribute to, leaving no ambiguity in the goal of the utility.

Data Quality Approach

Definition	Evaluation	Improvement	Implementation	Control

Symphony Process

Data Policies	Analysis & Reporting	Business Process	Integration	Operational Maintenance
• Identify key metrics and severity based on consumer impact	• Apply defined metrics against client data	• Understand client business processes for consuming provider information	• Deploy and review outputs for client integration	• Create the routine flow of the data quality approach
• Define how to measure metrics against the various data sets	• Produce KPI reporting summary and details for client review	• Define an improvement process that utilizes Symphony outputs	• Run through cycles of output consumption by the client to ensure the process is working as expected	• Continue to monitor progress of key metrics over time to ensure quality improvement

Data Quality Maturity

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Data Quality Segmentation within Symphony model

Data quality metrics are measured by quality metrics based on consumer impact

HIGH IMPACT *Significant consumer impact, should be addressed immediately*	MEDIUM IMPACT *Causes consumer confusion, therefore should be addressed*	LOW IMPACT No direct impact to the consumer, should still be addressed for data quality
• Providers that are not actively practicing for a variety of reasons (e.g. death, retired, sanctioned) • Providers that are not properly classified in their specialty and therefore are not practicing as specified • Misalignment between provider organizations and health plans about the universe of providers within their contracted network • Providers who are incorrectly identified for their accepting new patients status • Service locations that are incorrectly identified	• Mislabeled information about the provider including identity or practicing information • Specialization information about specialty or hospital privileges that cannot be verified • Service location information that cannot be confirmed (i.e. phone/fax details)	• Identification information that has been misclassed • Specialization information about specialty or hospital privileges that can be inferred but are not completely aligned with data policies • Facility information that cannot be confirmed with the state planning department

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Marketplace Analytics

5 health plans and 1 provider organization are contributing a total of 9 records of data for Jane Doe and where she is currently practicing out of.

2 of the 5 health plans list a San Diego service location while the others, including the provider organization, list a single location in San Francisco.

Additionally, health plan 4 has both a San Diego and a San Francisco location for the provider.

Within Symphony, we can start to put together insights into this type of suspect information to understand where potential quality problems exist and who is involved with that information so we know who to notify.

Layering in additional factors such as when was the information last updated, reference data, and other data policy checks into the process enhances Symphony's ability to score suspect data.

Adding in directly attested information from Jane Doe allows for an added layer to identify the correct answer to the question **"Where is Jane Doe actually practicing out of?"** and, more specifically, which one of the contributors needs to be notified about an issue.

Contributing Source	Address Line 1	Address Line 2	City	State	Zip Code
Health Plan 1	3544 30th St		San Diego	CA	92104
Health Plan 1	3705 Mission Blvd		San Diego	CA	92109
Health Plan 1	5454 El Cajon Blvd		San Diego	CA	92115
Health Plan 2	185 Berry St	Ste 130	San Francisco	CA	94107
Health Plan 3	185 Berry St	Ste 130	San Francisco	CA	94107
Health Plan 4	1809 National Ave		San Diego	CA	92113
Health Plan 4	185 Berry St	Ste 130	San Francisco	CA	94107
Health Plan 5	185 Berry St	Ste 130	San Francisco	CA	94107
Provider Organization 1	185 Berry St	Ste 130	San Francisco	CA	94107

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Understanding Reconciliation Challenges

Find a Doctor from **Acme Medical Group's** website revealed that a practitioner was part of that organizations contracted provider network

Dr. Smith
123 Main St.
(888) 888-8888
Acme Medical Group
Accepting New Patients: Yes

Find a Doctor from a health plan's website revealed that the same practitioner was listed but affiliated to the **Wellness Group**

Dr. Smith
123 Main St.
(888) 888-8888
Wellness Group
Accepting New Patients: Yes

Find a Doctor from **Wellness Group's** website revealed that the practitioner was part of that FQHC organization, which actually contracts through **Acme Medical Group**

Dr. Smith
123 Main St.
(888) 888-8888
Wellness Group FQHC
Accepting New Patients: Yes
Partners: Acme Medical Group

Knowing how a health plan needs to reconcile data with a provider organization through it's contracted relationships to entities like an FQHC is a fundamental challenge that any provider directory platform needs to be able to handle.

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Data Quality Metrics (based on ~160k provider records)

INSIGHT	IMPACT
6.1% of those providers had some kind of major provider identification issue (some potentially having multiple hits).	This means consumers are potentially trying to access providers that are not identifiable as a truly practicing provider either because of sanctions, retirement, being deceased, or a number of other critical reasons.
As high as 3% of providers were being listed with a specialty taxonomy not in line with their medical degree/training.	Consumers thinking a provider has the right medical training for the specialty listed or that the directory may be listing providers incorrectly can cause major issues.
In a smaller sampling between a handful of provider organizations and health plans, nearly 5.3% of accepting new patients status' were incorrect.	Consumers thinking a provider is accepting new patients only to find they are not causes abrasion and limits the access to care that consumer has.
A few hundred service locations are actually PO boxes.	Needless to say, trying to go see your doctor at a PO box is likely a problem…

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Data Quality Metrics (based on ~160k provider records)

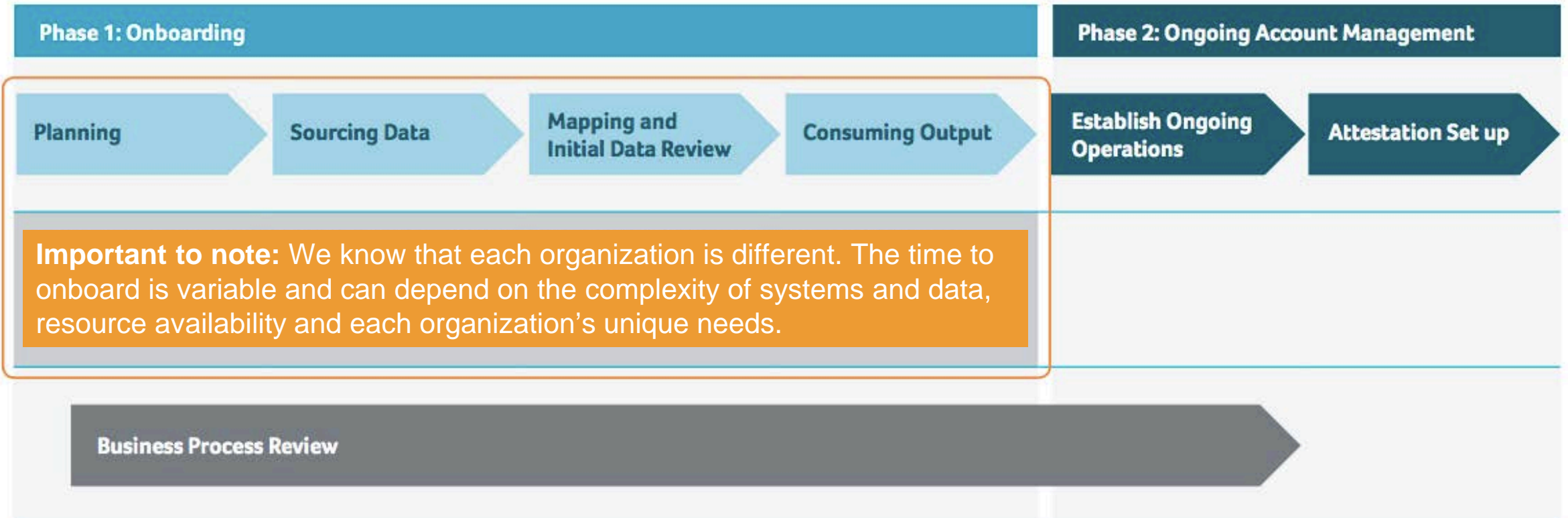| INSIGHT	IMPACT
4.1% of those providers had some kind of provider identification confusion (some potentially having multiple hits)	This means consumers are accessing information about a provider that may be misleading as to who they are.
Close to 20% of providers have either specialty or hospital affiliation information that cannot be reconciled with common standardization	Consumers not able to fully understand a provider's specialty or are not clear on what hospitals that provider has affiliations to can cause the consumer to look elsewhere for care when it may be available through that provider.
10.8% of service locations have some issue being reconciled with the USPS or reflect a location not suited for the geographic region	An ability to locate a service location or the possibility it's not in network can cause consumers to have to research further or potentially have reimbursement issues later on.

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Client Success

Symphony Provider Directory Roles & Responsibilities

	IHA	Gaine Solutions
Role	**Project Leadership, Sales, Customer Success, and Product Strategy**	**Technology Solution Provider**
Responsibilities	- Overall governance, direction and oversight - Management of external and internal expectations - Quality assurance - Program and product management - Sales, Marketing and communications - Business plan development - Product Roadmap Development - Onsite engagement and implementation support for provider and plan participants - Customer Readiness planning - Change management process development - User experience, usability, and workflow improvement recommendations - Symphony product support, including help desk	- Symphony technology planning and platform - Symphony technology integration with plans and providers - Symphony technology development - Product training materials - Technology compliance with requirements - Symphony testing

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Supporting Plans and Provider Organizations:
Taking a High Touch Approach to Ensure Success

Phase 1: Onboarding

Planning → Sourcing Data → Mapping and Initial Data Review → Consuming Output

Phase 2: Ongoing Account Management

Establish Ongoing Operations → Attestation Set up

Important to note: We know that each organization is different. The time to onboard is variable and can depend on the complexity of systems and data, resource availability and each organization's unique needs.

Business Process Review

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Methodology steps in detail

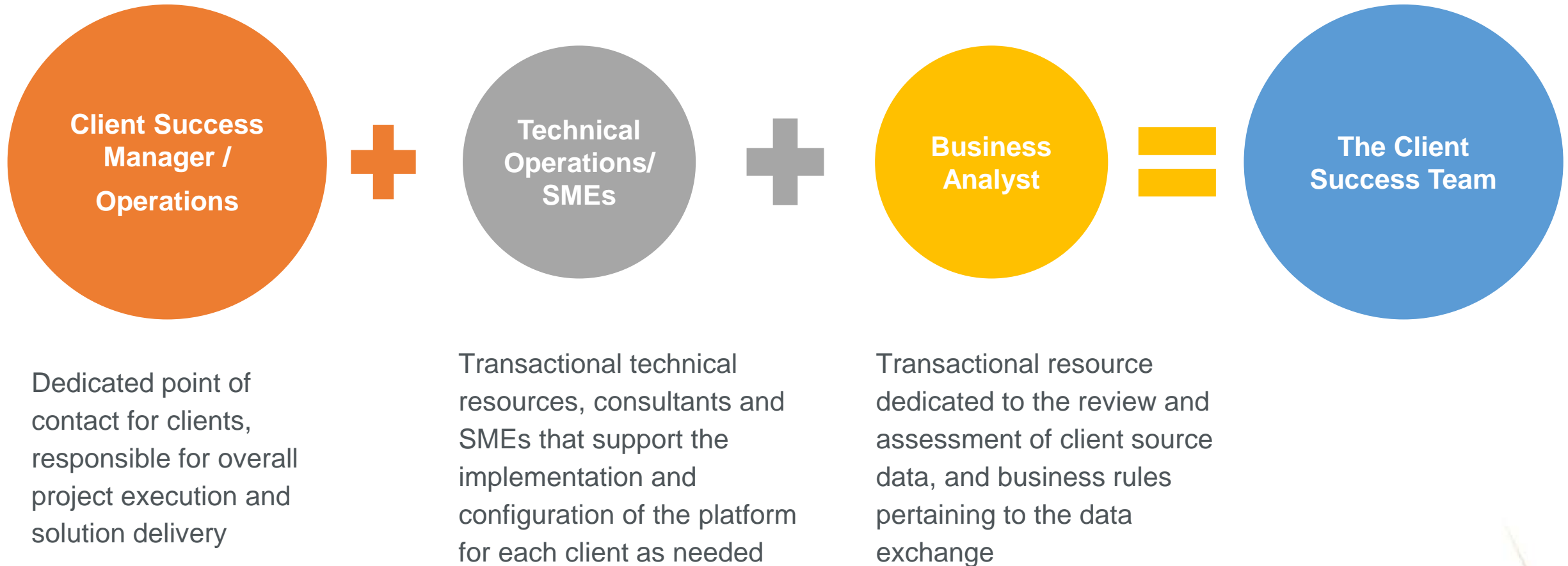| Planning	Discovery	Design	Business Process	Testing and Validation	Systems Integration	Ongoing Operations	Attestation
• Gathering information about the customer with a focus on business model, provider data, workflows and contracting relationship structures	• Clarifying inbound and outbound data exchange req's, procedures, and approach	• Detailed review of customer inbound source data files to analyze how the structure and content of the files align to the standard Symphony data model.	• Review of customer's existing business processes to evaluate potential impacts related to adoption of the Symphony platform.	• Helping the customer understand the structure and content of the results generated from Symphony so they can ingest the updates	• Identifying technical req's that must be met to understand the customer's technology integration capabilities.	• Routine inbound and outbound extracts have been established and the updates from Symphony are being applied.	• Set up is applicable to health plans only. Providers participate in attestation; however, there are no setup activities required

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Resource model

Client Success Manager / Operations

+

Technical Operations/ SMEs

+

Business Analyst

=

The Client Success Team

Dedicated point of contact for clients, responsible for overall project execution and solution delivery

Transactional technical resources, consultants and SMEs that support the implementation and configuration of the platform for each client as needed

Transactional resource dedicated to the review and assessment of client source data, and business rules pertaining to the data exchange

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Client Success Team: Roles and Responsibilities

Technical Operations

- Responsible for supporting data operations within Symphony Provider Directory

- Provides technical guidance pertaining to data – typically internally

- Performs data mapping and configuration

Subject Matter Experts

- Data Architecture

- Development Operations

- Data Stewards

Business Analyst

- Works collaborative with CSM and client to facilitate data requirement clarifications

- Reviews and analyzes customer source data and resolves data cleansing

- Reviews and analyzes customer master data and resolves issues

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Client Roles and Responsibilities

Executive Sponsor

Visible champion of the project with the management team and the ultimate decision-maker

- 1 hour/month (or as needed)

Business Process Owner

Manages daily operations of Symphony functions and data exchange, and works closely with Client Success Manager (CSM)

- 4 hours/week for the first 8 weeks, 2 hours thereafter

Project Manager/Project Lead

Assists Business Process Owner with overall project and resource coordination, and serves as liaison between internal business and technical resources

- 4 hours/week for the first 8 weeks, 2 hours thereafter

Data Steward, Analyst, or Programmer

Has thorough understanding of data content and structure to support mapping, set up, testing and maintenance of the data exchange process

- 4 hours/week for the first 8 weeks, 2 hours thereafter

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How To Engage

- Via your Client Success Manager

- Customers can obtain support through the following channels:

- Phone: **1-888-848-4805**

- Fax: **1-888-848-4806**

- Email: symphonysupport@iha.org

- Online form via Symphony application: https://symphony.providerregistry.com/help-requests/create

- Support hours will be **8AM-5PM PST, excluding national holidays**

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Q&A

WRAP UP

Register Now!

CAPH SNI

DESIGNING THE FUTURE
Annual Conference 2019

SAVE THE DATE!
December 4-6 | Paradise Point Resort, San Diego, California

Registration open now!

https://caph.org/aboutcaph/annualconference-2/registration/

Len Nichols
Policy professor, George Mason University

Ai-Jen Poo
ED, National Domestic Workers Alliance

Celinda Lake
Pollster & political strategist

Stacey Chang
Founder & ED, Design Institute of Health

Robin Wittenstein
CEO, Denver Health

John Ohanian
President & CEO, 211 San Diego

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