

CASE STUDY

A better source of truth: Accurate provider data for physician recruitment cuts costs and improves outreach

“ We couldn't trust the data when making important planning decisions. Out-of-date information was causing uncertainty and inefficiency. We knew we needed a better source of truth. ”

Director, Market Research at a major multi-hospital health system based in Texas

About the company

A major multi-hospital health system based in Texas is one of the biggest in the United States. It is an \$8 billion company that provides full-range, inpatient, outpatient, rehabilitation and emergency medical services through 48 hospitals and more than 1,000 patient access points.

The organization serves a major metropolitan market, which has over 7 million people and 10,000 doctors. It is one of several health systems in that region competing for physicians and members.

The problem: Physician recruitment challenges related to outdated and inaccurate provider data

For years, the health system had relied on data from the state medical license board to identify physicians, but it had shortcomings. The data was only updated when new physicians got their license and existing physicians renewed their license.

Maintaining the dynamic universe of provider data is a difficult, but critical task for hospitals and health systems. Fifty percent of provider data is outdated after just 18 months. Provider information fuels many functions of everyday business, including provider directories, physician recruitment, claims processing, network management, compliance, fraud detection and communication between healthcare practitioners and the hospital.

When provider data is accurate, these operations proceed smoothly. When they don't work as they should, the impact of errors and missing information can be felt throughout the system.

Without proactive management, thorough attentiveness and the right technology, the quality of an organization's provider information diminishes quickly. The result is operating inefficiencies and sub-optimal networks that cost healthcare providers hundreds of thousands, and potentially millions of dollars each year.

For the health system, that meant, in a market where physicians move often, much of the contact information in the medical license board database was outdated. The data couldn't be trusted, which created multiple problems across the organization such as:



Manpower needs couldn't be assessed

The health system couldn't accurately determine how many physicians and specialists were in a given geographical area. Having that insight was important to operational efficiency and revenue. It's how they assessed whether to recruit more orthopedists and oncologists, for example, or whether the market was saturated for these specialties and patient needs were being adequately met. Creating an over-supply situation could be a costly mistake. Because the provider data wasn't accurate, physician manpower planning became a guessing game.



Promoting CME events was too costly

Continuing Medical Education (CME) events were a revenue source for the health system and an opportunity for exposure to physicians outside their system. The primary means of promotion for the events was direct mail. But the number of mailers returned for wrong address was wasting thousands of dollars each year and resulting in limited attendance at the events.



Promotional announcements weren't getting through

The health system promotes its investments in new technologies and specialized equipment to physicians, which helps in physician recruitment. This type of informational marketing boosts its reputation and positions it as a progressive, technologically advanced organization. Unfortunately, with inaccurate provider data, the health system couldn't be sure its announcements were reaching the intended targets.

The solution: LexisNexis® Provider Data MasterFile™

After researching numerous data companies, the health system selected LexisNexis® Health Care and purchased the rights to its Provider Data MasterFile. A proven solution, it provides a more accurate data coverage solution with over 8.5 million U.S. healthcare practitioners and 1 million organizations.

Provider Data MasterFile enables healthcare organizations to seamlessly integrate comprehensive provider information into their existing workflow and understand provider relationships across IDNs, ACOs, payers and healthcare systems.

The results: Better planning, reduced costs

Using Provider Data MasterFile, the health system was better able to manage physician manpower planning.

“Not only could we see physicians’ addresses, but we could use geocoding to plot them on a map,” explained the Director of Market Research at the major health system.

“We could then look at our market, see the volume of patients and determine which physicians were closest to those populations. We could identify not only our physicians but all physicians in the market. MasterFile gave us the ability to make data-driven decisions with confidence because we could trust the data.”

The health system also saw immediate savings in mailing costs using Provider Data MasterFile. “In promoting CME events and also our public relations announcements, we were no longer getting an enormous number of mailers marked ‘Return to Sender,’” said the Director.

“We had one situation, at a large university, where we’d been using the medical school’s address to reach the student physicians. We’d started getting over 80% return mail. It became clear the university was no longer delivering mail to the medical school. Using the addresses in MasterFile, we were able to get the students’ alternate addresses and reduce the number of returned mailers to just 10%.”

Unexpected savings and benefits

Provider Data MasterFile also made finding healthcare-related service providers easier. “When we had a patient who required follow-up care, we previously relied on Google,” the Director explained. “We were aware that wasn’t the best solution. Now we can find service providers in MasterFile. It gives us the means to better ensure a continuum of care for our patients.”

The Director said another unanticipated benefit has been access to the National Physician Identifier (NPI) in Provider Data MasterFile. NPIs are a unique 10-digit number given to each physician. The state licensing board data that they had been using did not include NPIs, which created confusion when multiple doctors had the same name or were inconsistent in the use of middle names versus middle initials, and suffixes like junior and senior.

“With NPIs we can be 100% sure we’ve identified the right Dr. Smith, and that all of Dr. Smith’s relevant data—specialty, license, facility, practice location, etc.—has been correctly attributed. It saves time and reduces risk,” said the Director.

Going forward

“We’ve had an excellent return on investment from Provider Data MasterFile with many quantifiable as well as intangible benefits,” the Director said. “We’re in a highly competitive market. We need to continually be improving and looking for an edge. LexisNexis Health Care remedied a challenging problem for us. We look forward to working with them on future issues that could potentially have data-driven solutions.”

For more information, call 866.396.7703 or visit risk.lexisnexis.com/healthcare



Health Care

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At LexisNexis Risk Solutions, we believe in the power of data and advanced analytics for better risk management. With over 40 years of expertise, we are the trusted data analytics provider for organizations seeking actionable insights to manage risks and improve results while upholding the highest standards for security and privacy. Headquartered in metro Atlanta USA, LexisNexis Risk Solutions serves customers in more than 100 countries and is part of RELX Group plc, a global provider of information and analytics for professional and business customers across industries. For more information, please visit www.risk.lexisnexis.com.

Our healthcare solutions combine proprietary analytics, science and technology with the industry's leading sources of provider, member, claims and public records information to improve cost savings, health outcomes, data quality, compliance and exposure to fraud, waste and abuse.

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