

E-BRIEF

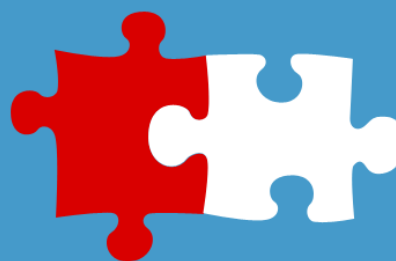
Multiple Dimensions Make Identity Management a Challenge, But It's a Challenge Plans Must Meet

AUGUST 2017

Advanced data management technology has enabled the quantification, digitization and electronic storage of virtually every documentary aspect of a person's existence. Data from county birth and death records, education records, vehicle records, criminal records, medical records, property ownership records, employment and tax records, residence records and marriage and family records has been transferred from paper – in an infinite-seeming variety of formats and with a wide range of detail and accuracy. It resides in separate siloes maintained by each entity that gathers it, each silo in the service of the information owner, not the individuals who are e-represented inside.

That paradigm has begun to shift. Forward-thinking data analytics consultants have developed ways to extract just the data they need from each digital aspect of a patient's identity. Once removed from the siloes, a company armed with cutting-edge linking technology and proven mastery at managing data from thousands of sources can cleanse, synchronize and integrate the person-specific bits into a single data file. An experienced technology specialist can fit the pieces together, in fact, with 99.9% confidence. The result is remarkable. From the fog of data the siloes produce emerges an unexpected image: a complete portrait of a whole person, a complex individual with a multidimensional identity.

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Focusing on Members Requires Detailed Identity Data

The timing of the paradigm shift couldn't be better. Healthcare delivery and finance are evolving in ways that blur the line between payer and provider and shift the focus from facilities and procedures to members – from the beginning of each member's journey through the healthcare system until the end of treatment, recovery and rehabilitation. Long ago, that was a family doctor's focus, but societal changes, advances in medical technology and new approaches to healthcare financing changed that. Now, though, the whole member – and the data identity each one possesses – must be a health plan's focus, no matter how much the data morphs over time.

Member identity is used literally throughout a health plan's operational business continuum. In every aspect of its operations, the more identity dimensions that can be linked for each member, the better a health plan is positioned to function member-centrally – and the better prepared it is for evolving delivery and financing models. Indeed, the criticality of member identity is increasing; it's the focal point of every key issue that keeps health plan executives up at night.

"... identity is also singular, something that we experience as a complete whole. A person's identity is not an assemblage of separate affiliations, nor a kind of loose patchwork; it is like a pattern drawn on a tightly stretched parchment. Touch just one part of it, just one allegiance, and the whole person will react, the whole drum will sound."

– Amin Maalouf, In the Name of Identity: Violence and the Need to Belong

Mismanaged Member Data Doesn't Produce Usable Information

Robust identity data allows health plans to maximize member information throughout the enterprise – and to tackle vexing issues head-on. But that's only possible when the data is maintained by a member identity specialist – a technology partner that knows how to verify who and where individuals are, and how to quantify the characteristics of their daily lives that affect

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\$100,000

their health. Health plans need a partner that can also ensure the quality of the data. The siloes it comes from are still separate, and when it's first extracted, the data isn't always consistent – and it's rarely clean. And once those initial issues have been addressed, and a member's data identity has been assembled, it must be protected and maintained – and updated regularly, as the person's life story advances.

Health plans need assistance, too, in ensuring that poorly linked identity dimensions don't prove catastrophic to ongoing operational effectiveness and efficiency. Tightly integrated delivery and financing and accountable care financial incentives – the hallmarks of today's healthcare system, and tomorrow's – demand a single, accurate picture of each member and an understanding of how each one moves through the health system. Data that defines identity must be current, complete, non-duplicative and organized to enable dimension comparisons from one point in time to another. That's a tall order, and accomplishing it requires a breadth and depth of experience, expertise, cutting-edge technology and advanced analytic capabilities that few health plans possess.

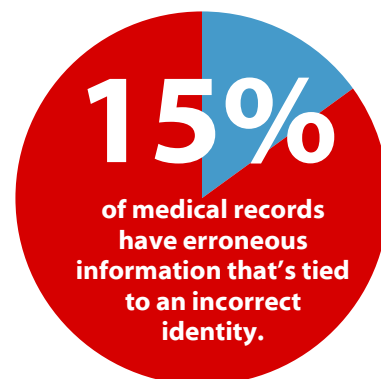
Identity management deserves high-level attention. Poor management of member identities through transitions of care can lead to readmission penalties – among other financial hits. Positive member satisfaction surveys, on the other hand, are often factored into bonus payments. Indeed, the average lifetime value of a "lost" health plan member can top \$100,000.

Avoiding That Loss is No Small Challenge

Each individual's existence is characterized by extreme volatility; so is the data that represents his or her identity. And people don't use the healthcare system the way the healthcare system wishes they would, using it instead the way that works best for them. Still, in the provision of and payment for care, members must be the focus, not the procedures, not the providers, not the payers. Health plans must take responsibility for crafting a complete identity database, maintaining it meticulously and using it throughout operations – despite the qualitative and logistical roadblocks along the way.

Member Identity Management Demands Unique Competencies

Most health plans are not equipped to manage that task alone: It's estimated as many as 15% of medical records have erroneous information that's tied to an incorrect identity. In most cases, a data management and analytics expert is required to coordinate the member identity information that's so critical to so many areas of a health plan's business operations.



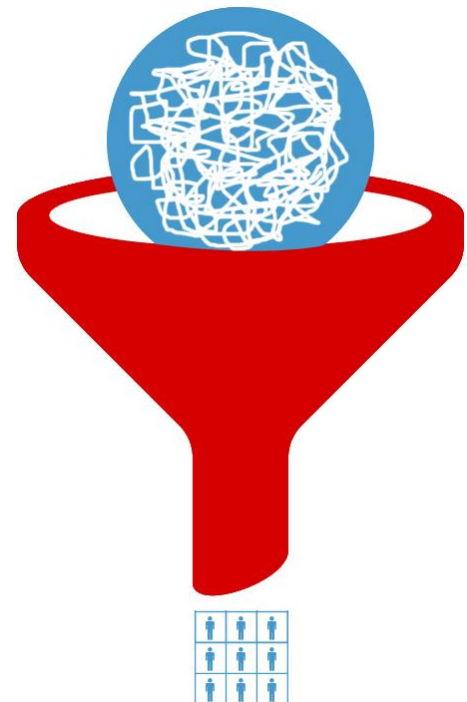
One of those areas is use of data on social determinants of health; it takes a skilled technology partner to see how relationships, life events and behaviors correlate to a member's physical well-being. It takes considerable experience and expertise as well to use member data to understand what, when and how to communicate with them; pushing down member marketing costs is another area impacted by identity information.

"Some health plan executives feel data points they haven't been trained to consider – details about patients that don't come from claims and medical records – can't be useful because they don't know what to do with them. But identity data has been part of a patient's documentary existence all along – in hospital notes, put there by the social workers and behavioral health therapists who talk to patients when they're admitted, asking about economic status, degree of isolation and other issues necessary to detail a member's identity. [As one social worker explains it], 'core responsibilities include completing an interview and a full psychosocial assessment as needed' and developing strategies to assist patients with 'social, emotional, financial and environmental' challenges. That 'biopsychosocial information' has been in medical records, and public records; now advanced data management companies are surfacing the information from every available source, analyzing it and making it available as a useful component of members' digital identity."

A Call To Action: Turn Messy Data Into Manageable Member Information

Member information has too many moving parts and too much value to too many areas of health plan operations to trust identity data management to anyone but the best. Many providers and payers have addressed patient and member data management – everyone's heard of "Big Data" – but few retrieve data from sources outside claims and medical records, so they don't have the breadth and depth of information that more robust data sources would provide, and few are experienced at maximizing the information throughout the enterprise after they find it, and few have the tools required to constantly update the data. LexisNexis® Health Care:

- *has been managing data integrity across multiple industries for more than 40 years.*
- *can access 65 billion records from over 10,000 consumer and public record sources.*
- *has developed specific solutions to the specific challenges of managing member identity data – including clinically validated health attributes that enable accurate health risk scoring.*
- *offers an unmatched suite of identity management tools and services.*
- *pioneered the path to clinically validating social determinants of health to improve member health outcomes.*



The downsides of mismanaged member information are many, and they're expensive to fix. Maintaining identity data is a conversation every health plan C-suite should be having. Smart plans include LexisNexis® Health Care in that conversation.

**For More Information: Call 866.396.7703
or visit www.lexisnexis.com/risk/health-care**

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