

DATA MANAGEMENT VALUE PROPOSITION VALUE TO CLAIMS

Data Management provides value to the claims organization of an enterprise in the following ways:

Value: Profitability

- Works with Operations Management to use data to identify best practices, with emphasis on:
 - Identification of potential fraud situations
 - Meeting or exceeding requirements for reporting, check issuance, and other tasks
 - Vendor management and cost containment
 - Litigation management and cost containment
 - Healthcare management and cost containment
- Mines the organization's claim-related data to perform benchmarking studies to:
 - Identify units within the organization which produce better results at a lower cost, for best practices development and incentive compensation.
 - Compare the organization to industry data, for best practices studies and marketing.
- Evaluates data from external sources for claims-in-process to be assumed by the organization; assists in tasks required to load it into the organization's claim system.
 - Eliminates costly manual input of a prior adjudicator's data.
 - Accelerates adjuster access to financial detail and check issuance capabilities, for timely payment processing to avoid penalties and fines.
- Monitors industry development of data standards; determines their impact on how the claim organization conducts business, and the potential that adoption of standards might have on:
 - Cost containment (by reducing multiple points of data translation and improving data quality), and
 - Market share improvement in a TPA environment.

Value: Product Development

- Participates in preparing responses to RFPs (requests for proposal) by evaluating the potential customer's data interface and reporting requirements, and by recommending approaches for satisfying any requirements which are new to the organization.
- Defines claim data reports and data files for standard and customized data output products such as loss runs, data interface files and audit files.
- Uses industry knowledge to suggest ways to turn data into revenue-generating products.
- In a TPA environment, assists in converting data into the formats required by external clients in order to gain approval as an "unbundled" claims handling organization.

Value: Efficiency and Utility

- Applies industry data standards to claim systems, for both data file formats and metadata, (data field definitions and values) to facilitate system communication throughout the organization, and externally with other organizations.
- Assures maximum ease of interface with internal and external systems, including the ability to insert "plug and play" modules with minimal adverse impact on claims personnel.

- Develops systems specifications for end users and IT support areas for new systems and enhancements to legacy systems which support claim processing.
- Serves as the organization's data quality champion for all data related to the claims process.
- Serves as the contact point for external trading partners' questions related to claim data products, data quality, data loads, and similar issues.
- Writes and maintains data dictionaries, data field code tables/descriptions, and data file layout formats for all claim-data related products, both internal and external.
- Supports call centers on questions from internal claim personnel and external clients on inquiries concerning any aspect of claim data.
- Oversees resolution of data quality issues raised by end-users of claim organization data.
- Assists personnel responsible for managing the organization's processes by defining and producing (via IT) reports measuring compliance with internal and client standards.

Value: **Strategic Planning**

- Works with senior management to define and produce (via IT) reports containing the decision support data required for both strategic and tactical planning.
- Provides information concerning industry trends related to the management of claim adjudication systems and related data, and their potential impact on the strategic direction to be taken by the claims organization and/or the areas of IT supporting that organization.

Value: **Compliance**

- Ensures that the claim system captures all data elements and values required for regulatory and rate agency reporting.
- Works with IT to define and produce regulatory and rate agency claim data reports.
- Supports the organization's Office of Compliance in meeting data reporting and system requirements for complying with legislative mandates such as HIPAA and the Patriot Act.
- Supports licensure and bonding requirements by defining and producing (via IT) the requisite data files and/or reports as required.
- Responds to customer and client inquiries about the relationship of the claim data to specific regulatory and rate-agency reporting requirements.