



SME SERIES

Hear from Vālenz® Health and
Certus Management Group
Subject Matter Experts in this deep dive
series on transparency in healthcare.



Meet our next group of SMEs:



**John Paolacci, MBA,
Chief Claims Officer**

John leads Validation, Integrity and Accuracy (VIA) for Payers, implementing tech-enabled payment and claims solutions that support a robust infrastructure for accelerated, streamlined claims operations.



**Randy Dorshorst,
Vice President, Bill Review Solutions**

Randy positions clients for long-term success through his leadership in strategy, engagement, and optimization of bill review solutions.



**Eric Hanna,
Vice President, Claim and Access
Solutions**

Eric plays numerous key roles in driving cost containment, ranging from claims analysis to implementation management and network contracting.



**Dayna Zabrzenski-Hunter, Director,
Bill Review Services**

In directing the bill review process, Dayna develops and implements strategic planning initiatives that maximize the bill review and growth potential.

Welcome back to the Vālenz® Health SME Series!

Today's series addresses the importance of transparency in healthcare and the role it plays at every step of the claims process. With insights into transparent data across the entire Claim Cost ArcSM, we provide a prospective, concurrent and retrospective view through the life of a claim for all parties involved – driving full alignment that ultimately results in improved savings, efficiency and outcomes.

Yes, and... at 11:30 a.m. ET on Wednesday, July 12, please join us for our SME Series live conversation with CEO Rob Gelb as he continues to challenge the way we think about transparency and encourages taking action now for greater value in the future. Mark your calendars for a lively discussion and a Q&A with the audience. You'll join here:

bit.ly/ValenzSME-Live

Transparency legislation included requirements for providers to share more information about services and pricing. What does transparency mean from a payer standpoint?

Eric Hanna: Transparency to the claims and payer side of this business is ensuring our clients are not paying more than is reasonable for services rendered. Our goal every day is to make sure that we are repricing claims fairly and equitably for the member, provider and payer. Transparency with healthcare data empowers us to do that across every claim because we have line of sight into the right price anywhere in the country.

Transparency also helps us ensure that a member isn't being penalized because of the plan they're enrolled in, and that they're not being charged more for a service than someone else seeing the same provider with a different plan. Many of the claims we reprice are high-dollar, so members feel the positive impact of correctly repriced claims.

“

“Transparency with healthcare data empowers us to reprice fairly across every claim, because we have a line of sight into the right price anywhere in the country.”

- Eric

How does this increased data visibility support members, providers and payers in claims pricing?

Randy Dorshorst: We are committed to providing data to members and providers in a consumable way. For example, we use data to show why we are taking a reduction on a particular facility bill; we give members and providers access to the revised guidelines to further explain why we have taken different reductions and demonstrate how we have been able to reprice the bill. So again, from a transparency standpoint, we go well beyond services and pricing to unveil the data and documents we use in our bill review and pricing process.

John Paolacci: More information from transparent data gives us greater ability to make lives easier for members, providers and payers. By leveraging a continuous loop of data across the Claim Cost ArcSM, we give everyone involved in the life of a claim a prospective, concurrent and retrospective view. At the preclaim loss stage, we have insight into network design, pre-service contracting, negotiations using our VMS® repricing methodology, and identification of high-risk members. Concurrently, during treatment, we have additional insight into cost, quality and utilization

of care. During post-claim resolution, we support bill review and appeals, model future plans, and contract with providers going forward. Ultimately, transparency empowers us to simplify the complexities of healthcare and guide better decision making for everyone involved.

Dayna Zabrzenski-Hunter: The volume of data is the most important piece for enabling the right actions. We're able to investigate more than just discrepant charges. We can investigate other providers' services and pricing and make sure our clients have access to as much of that information as possible. We're able to see implant charges, room and board charges, the prices of high-cost drugs, and what other payers have paid for these services in the past. With our platform, we're able to compare all of that with historical and trended data in the ecosystem, and follow up on the reasoning for charges and any discrepancies we see. From there, we're able to support the best decisions for our clients moving forward. In short, we are engaging early and often across the entire claims process to drive greater value for all parties.

“

“We are committed to providing data to members and providers in a consumable way.”

- Randy

How do you see the future of healthcare changing because of increased transparency?

Eric Hanna: Transparency will be a huge part of the future of healthcare. Thanks to new and expanding legislation and emerging standardization, data is becoming more and more available to us. As additional clients and members take action on that information, and as they get more integrated into our solutions including claims and clinical review processes, we will see greater savings and efficiency for all.

John Paolacci: By taking full advantage of the new levels of transparency, we can get everyone on the same page from the very start regarding fair, accurate and defensible costs. That means we will have fewer surprises and better results in the future as we drive reduced expenses, improved outcomes, and a more positive member experience from start to finish.

“

“By taking full advantage of the new levels of transparency, we can get everyone on the same page from the very start regarding fair, accurate and defensible costs.”

- John



Join us for the first SME Series live conversation
with CEO Rob Gelb on July 12, 2023 at 11:30 a.m ET.

bit.ly/ValenzSME-Live

2023 Välentz® Health All Rights Reserved.