THE TOP FIVE BENEFITS OF AN INTEGRATED CLAIMS AND MANAGED CARE SOLUTION

Today, managing the cost of a workers’ compensation claim is less about managing the claim and a whole lot more about managing the medical costs. There are two schools of thought on how to do that: utilize separate vendors for claim management and managed care services (and even different managed care vendors for different services) or integrate managed care into the workers’ compensation claim management program.

At York we believe that our integrated managed care solution delivers the best way to understand and manage workers’ compensation claim costs. Here are five reasons why.

1. FAST, CONSISTENT ACCESS TO DATA
Unlike some claims programs that “integrate” a managed care by aggregating services from a number of separate providers, York’s integrated managed care solution draws from our wholly owned, holistic solution, which allows us to access, and share data faster. Data sharing within our own systems also reduces data entry errors. In addition, easy access to a single, central data repository also allows York and our clients to track their claim results to make sure claims and costs are being effectively managed.

2. MORE SOPHISTICATED AND EFFECTIVE DATA ANALYTICS
Integrating managed care and claims management data also enables effective use of predictive analytics that can help adjusters proactively identify and manage “problem” claims, including claims that may incur high costs or have long durations. Integrated data analytics can also be used to evaluate the efficacy of various approaches to treatment to help guide injured workers to the most effective treatment and avoid ineffective treatments that can delay recovery. The same data analytics also enables evaluation of individual providers and the creation of outcomes-based networks that deliver the best overall results for injured workers and their employers.

3. A UNIFIED TEAM CONSISTENTLY FOCUSED ON DELIVERING THE BEST OUTCOME
There are many aspects to a claim, so you need a team of experts looking at and managing the claim... and working as a team. Having one integrated team means everyone shares the same processes and philosophy for a more efficient approach. This approach also allows different members of the team (e.g., adjusters, clinical review nurses, case managers) to work in the same system in real time. That makes the both information sharing and the whole process more efficient - no waiting days for return phone calls, data uploads, reports, or forms. The result of this approach is that that everyone has the information needed to make the best decisions for the injured worker and the employer throughout the claim management and managed care process. In our case, that means getting the injured worker to the right provider at the right time and the right costs in order to return that worker to productive status as quickly as possible.
TRANSPARENCY AND UNSURPASSED SAVINGS
An integrated claims and managed care solution also offers a fully transparent model of services. Risk managers will have insight into and greater oversight of all program-related fees and claims costs. The hidden costs in bundled and unbundled offerings don’t exist. All fees are disclosed and visible, and the efficiencies associated with data and process integration result in reduced friction and costs that are passed on to clients. Through integration and data assimilation in a single data warehouse, analytics and algorithms allow for a 360 degree review of data and enhancements in identifying opportunities for savings that are unsurpassed.

BETTER, EASIER CONTROL FOR BETTER RESULTS
While some proponents of a dis-integrated approach to managed care hold that using a variety of vendors gives the client better control of their choices, allowing them to pick the vendor(s) they want and to change vendors when they like, that process can make claims management more complicated and less efficient for both the adjuster, the vendors and the employer and can even slow down the progress of the claim.

Using separate, unconnected vendors can also make it harder for the employer to gain a true picture of what is happening with the claim because they need to collect and analyze disparate data to manage a host of vendors and costs. Managing multiple vendors takes time, effort and expertise – exactly what you are paying your claims management partner to provide. And remember -- the cost of individual vendors or vendor services is a fraction of the cost of TPA services. With a truly integrated managed care solution, the adjuster has easy access all the information needed to do their job and manage vendors and the claim effectively.

A last thing to consider is that managing vendors separately can also mask the true impact of a single vendor on overall, long-term costs. It is possible – sometimes even easy – to isolate and drive down the costs of one component of a claim. But that approach can sometimes backfire, with the result that the cost of other services and the overall claim are driven higher because something was missed or the adjuster didn’t have all the information needed to manage the claim to the best overall outcome. And that is what truly matters. Not driving down the cost of a single provider visit, treatment, test or piece of equipment, but consistently managing and driving down the total cost of claims.

To learn more about York’s integrated worker’ compensation and managed care solution can simplify the claims and risk management process for you and deliver superior results, please visit www.yorkrsg.com.