

Payment Integrity Round Table Interview: Vision 2024

CERIS Executives Weigh In

In this round table discussion, we explore the perspectives of five top executives from CERIS regarding the future of payment integrity.



About the Participants

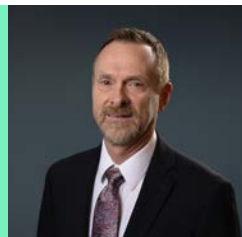
Each of these individuals are bringing their unique insights into what 2024 holds for the critical aspect of payment integrity in the overall changing healthcare landscape.



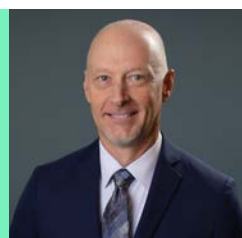
Greg Dorn, President, has been with the organization since 1996, working in various roles until most recently being named President of CERIS in 2022; he previously served as CERIS' Executive Vice President. Greg oversees the day-to-day operations and long-term strategy of CERIS, including nurturing CERIS' long-standing partnerships with large national payers, managed care organizations, state agencies, and third-party administrators. Looking forward, he has plans to hire more expertise, invest in systems, and expand CERIS' product offering, all to continue to be the premier partner in the Payment Integrity market.



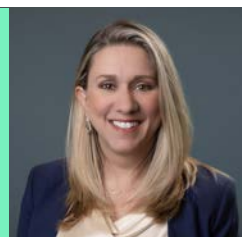
Mark Johnson, SVP, Product Management, has nearly 30 years of industry experience including the development of the payment integrity system for a large national payer, subrogation, third-party liability, healthcare policy, managing offshore payment operations, oversight of claims services, and a background in clinical care. Mark joined CERIS in 2019 as Vice President of Product Management. Mark oversees product management and implementations and provides guidance and direction to strategic partnerships, contracting, pricing, sales support, marketing, and accounting.



James Contos, SVP, Operations, has been with the organization since 2014. James was promoted to SVP of Operations in 2022 after serving as Vice President of Operations. Prior to joining CERIS, James led operations for two large health systems for 9 years. James ensures the strategic direction of operations aligns with continued CERIS growth and exceeds the needs of clients. His vision and direction shapes new document technology, streamlines turnaround times, develops specialty audit types, and improves recovery efforts.



Steve Sutherland SVP, Information Systems, has been with the organization since 1996. Steve has nearly 30 years of industry experience. As the SVP of Information Systems, he coaches and collaborates with his team and others to build and improve technology to support business processes and operations. His focus is on ensuring CERIS is using the latest technology advancements to bring a positive impact to all stakeholders within the healthcare ecosystem and creating a fair and equitable system.



Jhana Spence, VP, Strategy, has been with the organization since 2006, holding various roles within the organization from provider relations to account management and now overseeing strategy. With over 13 years of success and experience in client relationship management, partner revenue growth, and client advocacy, she has the unique ability to identify/implement solutions and resolve/mitigate client escalations in high-touch customer service environments. Jhana's has a well-deserved reputation as a customer advocate with a servant leadership style, a trusted advisor, and a champion of client success.

Round Table Discussion

Q1: How do you see the role of AI and machine learning evolving in payment integrity by 2024?

Greg (President): "AI and machine learning have been at the forefront of transforming payment integrity for the past 5 years. Throughout 2024 these technologies will not just be detecting waste and abuse more efficiently but also predicting and preventing them. As AI continues to move into the development of a proactive approach, we will continue to expand our PI offerings to payer clients allowing them to maximize their resources and enhance the quality of care."

Steve (IT): "Technologically, the integration of AI in our systems will be paramount. We're not just talking about implementing new tools but also about ensuring they seamlessly interact with our existing infrastructure. The challenge will be to keep these systems secure and compliant with evolving regulations. Since 2018, AI and machine learning started to become integral to our solutions. By 2024, I see these technologies offering more personalized, customized, and predictive analytics, enabling us to tailor our payment integrity solutions to specific client needs more effectively. The financial implications are substantial. AI-driven solutions promise a better return on investment by reducing losses further up in the payment process ecosystem. This efficiency will be crucial for payers, especially in a landscape of rising healthcare costs."

AI evolution will advance proactive payment integrity.

Jhana (Strategy): "AI and machine learning are pivotal in reshaping payment integrity, especially in an outsourcing context. Throughout 2024, I anticipate these technologies will not only enhance error and abuse detection but also streamline claim processing and predictive analytics, allowing us to offer our clients more sophisticated services and allowing us to continue to improve efficiencies. Throughout our functional areas, we are working with AI to continually determine what tasks can be automated. As more routine tasks are eliminated for our team, we can focus our human resources on more complex cases. I see AI as a tool that continues to enhance, rather than replace, the human element in payment integrity as we move through 2024."

Q2: What are the biggest challenges you foresee in maintaining payment integrity success in the next year?

Greg (President): "The ever-evolving nature of abuse tactics and points along the claim lifecycle in which errors can occur is a significant challenge. As we enhance our defenses, bad actors find new loopholes and advancing tech and fast-moving regulation can create new points of errors. Staying ahead of these tactics requires our constant vigilance and innovation and partnership discussions with our payer clients. As an outsourcing organization, aligning our solutions with diverse client systems and ensuring data security are ongoing challenges. We put a lot of emphasis on these areas and deliver dedicated resources, so we can solve for these important aspects of the process."

James (Ops): "With approximately 30% of the world's data volume being generated by the healthcare industry, operational challenges include managing data volume and an increased number of transactions. We work closely with IT to ensure our processes are both efficient and compliant and are using the vast amount of data available to our benefit. As regulations and healthcare practices evolve, so must our approaches to payment integrity."

Mark (Products): "The rapid evolution of healthcare services and billing practices, like telehealth and personalized medicine, presents new challenges moving through 2024. Keeping our products up-to-date and relevant in this fast-changing environment is crucial. We must be strategic in our investments to ensure long-term sustainability and meeting the needs of the Payment Integrity Market. Data security and protecting PHI and PII are paramount. Ensuring the security of our systems while harnessing the power of data is a key challenge."



Q3: How do you plan to address the ongoing issue of provider abrasion in your payment integrity strategies?

Greg (President): "Provider relationships are crucial. Our strategies must balance effective fraud prevention with maintaining positive provider interactions. This involves transparent communication and collaborative approaches to resolving disputes. Our focus is on developing more intuitive and transparent products. By providing clearer insights and explanations within our tools, we reduce misunderstandings and friction with providers. It's about creating models that incentivize accurate billing practices without penalizing providers for minor errors. We need a fair system that recognizes the complexities of healthcare billing."

Steve (IT): "Technology can help reduce provider abrasion by offering tools that simplify billing processes and clarify payment policies. We continually look for ways to use the latest in tech to help providers get bills right the first time, reducing the need for contentious interactions. We need to provide clear explanations for payment decisions and offer straightforward processes for providers to address concerns. This reduces friction and builds trust."

Jhana (Strategy): "Our approach focuses on collaboration and transparency. We aim to create solutions that are not only effective in identifying discrepancies, but also facilitate smooth communication in the claims review process, reducing the potential for friction. As stated earlier, we are focusing on AI and advanced tech to assist us in many ways, which includes strengthening provider relations but there is also a human element that we emphasize in this process."



Balancing provider relationships with payment accuracy in an environment of trust, improves outcomes.

Q4: As Hospital at Home programs become more prevalent in 2024, how are you planning to adapt your payment integrity strategies to accommodate this model?

Greg (President): "Hospital at Home introduces unique challenges in billing and service verification, similar to but distinct from traditional inpatient care. We are adapting by creating specific guidelines and monitoring systems tailored to Hospital at Home services, ensuring they align with our payer clients' standards for payment integrity."

James (Ops): "Operationally, we're focusing on training our teams to understand the intricacies of Hospital at Home billing and service delivery. This includes revising our audit and review processes to specifically address the distinct aspects of at-home hospital-level care."

Mark (Products): "We're developing modules and features in our products that cater to the specific needs of Hospital at Home. This involves enhancing our capabilities in auditing these services and detecting any potential fraud, waste, or abuse. Financially, we're evaluating the cost-effectiveness of Hospital at Home in terms of payment integrity, which involves understanding the new risks and potential savings associated with this healthcare delivery model and unique reimbursement model."

Steve (IT): "From a technology perspective, we're exploring data analytics tools designed for Hospital at Home services. This includes implementing monitoring platforms that can effectively track service delivery and patient outcomes in a home-based setting."

Jhana (Strategy): "Hospital at Home presents distinct challenges in service verification and billing, compared to traditional hospital care or even telehealth. We're adapting by developing specialized tools and methodologies specifically for Hospital at Home, ensuring our clients can confidently extend their payment integrity processes to this emerging model."

Hospital at Home is on the Rise Requiring PI Adaptation.

Q5: How important is the role of data analytics in shaping payment integrity in 2024?

Greg (President): "Data analytics is and will continue to be backbone of modern payment integrity. It informs our strategies, helps us identify trends, and enables us to make evidence-based decisions. Its importance cannot be overstated. We continue to make investments in people and tech that can build models to illustrate where PI resources should be focused."

James (Ops): "Data analytics provides the insights needed to optimize our investment in payment integrity. The information allows us to be more proactive and targeted in our approach. As the story of data is told, we focus our resources where they are most needed, improving efficiency and effectiveness. It's not just about having data but turning it into actionable insights. Our focus is on developing analytics that are both powerful and accessible to our payer clients. It helps us understand where they can get the best return and where we need to adjust our strategies."

Data Analytics Remains a Core Strategy to PI Success.

Steve (IT): "Technologically, the challenge and opportunity lie in harnessing the vast amounts of data and turning it into actionable intelligence. This requires us to utilize our sophisticated tools and develop robust data governance that builds the foundation of an accurate data picture. It's the foundation upon which we build our strategies and solutions. Advanced analytics allow us to provide deeper insights and more proactive solutions to our clients, enhancing the overall effectiveness of payment integrity efforts."



Q6: What steps are you taking to ensure compliance with evolving healthcare regulations in your payment integrity efforts?

Greg (President): "Staying compliant requires our team to be dynamic. We're constantly monitoring regulatory changes and adapting our policies and practices accordingly. It's about being agile and informed. We allocate resources to ensure compliance, since non-compliance is far more costly in the long run. This includes investing in systems and expertise that keep us on the right side of regulations. We're also leveraging technology to track regulatory changes and assess their impact on our systems."

Mark (Products): "We're constantly updating our products to reflect the latest regulations and 2024 is no different. This involves close collaboration with our legal and compliance teams and our payer client teams to ensure our products not only meet current standards but are also adaptable to future changes. "

Jhana (Strategy): "Compliance is a top priority. We are continuously updating our knowledge base and systems to align with the latest regulations. Our team works diligently to ensure that our solutions not only meet current standards but are also adaptable to future potential regulatory changes in the pipeline. We're investing in continuous training for our staff and updating our processes regularly to align with new regulations. Compliance is an integral part of our operational culture."

Embracing agility and collaboration ensures compliance with evolving regulations.

Q7: How do you balance the need for cost containment with ensuring quality care in your payment integrity strategies?

Greg (President): "Our goal is to create a system where cost containment and quality care go hand in hand. By eliminating waste and abuse, our payer clients can allocate more resources to high-quality care. It's about efficiency. We strive to make our payment integrity processes as streamlined as possible, reducing costs for our payer clients without them having to compromise on the quality of care. By reducing improper payments and administrative costs, give our clients the ability to invest more in quality care initiatives."

Steve (IT): "Technology plays a crucial role in this balance. By providing tools that help our clients identify the most effective treatments and prevent unnecessary or inappropriate care, we can help them foster high standards of quality while controlling costs. Our approach is to develop products that promote efficiency and accuracy in billing and claims processing. By reducing errors and inefficiencies, we help contain costs while supporting high-quality care."

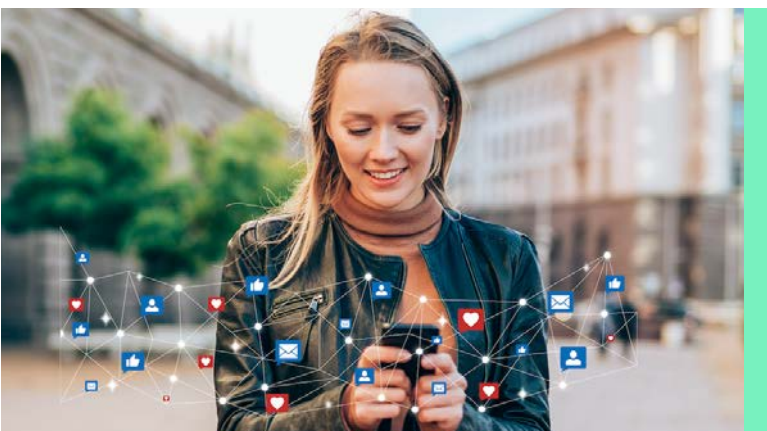
Q8: What role do you see consumer engagement playing in payment integrity in 2024?

James (Ops): "Consumer engagement is critical. Educated consumers can be allies in preventing errors and abuse and controlling costs. We're investing in tools and resources to help consumers understand and engage with their healthcare billing. We are focusing on more transparency and communication. By making billing processes more understandable and accessible, we can empower our payer clients to empower consumers to be more involved in their healthcare decisions."

Mark (Products): "We are not a consumer facing company however our audits and reviews have a direct impact on the providers. The defensibility of our reviews directly impacts the relationship between our clients, the payers and the providers. If this relationship is healthy the consumer experiences this through better interactions with the provider."

Jhana (Strategy): "Consumer engagement is increasingly becoming a key component. Educating consumers and involving them in the payment integrity process can be a powerful tool in preventing errors and abuse and ensuring accurate billing. Our team is constantly researching and investing in tools that can enhance understanding, engagement, and healthcare spending."

**Advancing provider relations
and transparency improves
consumer experiences.**



Q9: How are you preparing for potential cybersecurity threats related to payment integrity?

Steve (IT): "Cybersecurity is a top priority. We're investing in state-of-the-art security systems and protocols to protect our data and systems from threats. It's an ongoing effort that requires constant vigilance. The cost of a breach, both in financial terms and in terms of consumer trust, is far greater than the cost of prevention. "We're implementing advanced security measures, including regular audits, penetration testing, and advanced threat detection systems. We're also focusing on building a robust cybersecurity culture within the organization."

James (Ops): "We recognize that investing in cybersecurity is essential. we're conducting regular training and drills to ensure our staff is prepared to respond to cybersecurity incidents. We're also working closely with our IT department to ensure our processes are secure and new threats coming down the road in 2024 are included in our training."

Jhana (Strategy): "Cybersecurity is integral to our industry and our strategy. We are investing in advanced security technologies and protocols, and continuously training our staff to be vigilant against emerging cyber threats, ensuring the integrity and security of our clients' data. We incorporate advanced security features to ensure our products comply with the highest standards of data protection."

A Vigilant Defense Process in Non-Negotiable to Ensure Data Safety.



Q10: Finally, what do you believe will be the key drivers of success in payment integrity in 2024?

Greg (President): "As in previous years innovation, agility, and collaboration will continue to be the key drivers. We need to stay ahead of emerging trends, adapt quickly to changes, and work closely with our payer clients, providers, consumers, and regulators to build the best solutions. As an organization solely focused on PI, we have an advantage in the market on adaptation and efficiency."

James (Ops): "The need for greater transparency is important in our operational goals, and as things are quickly evolving, we must look at where new efficiencies can drive success. Our team is focused on quickly adapting our processes to changing needs and expectations."

Mark (Products): "Innovation, user-centric design, and adaptability will be a key to our product success in 2024. Products that can quickly adapt to changing healthcare landscapes while remaining easy to use and understand will drive success in payment integrity. Financial sustainability, strategic investment, and data-driven decision-making will be crucial. We need to ensure that our payment integrity products contribute positively to our payer clients overall financial health."

Steve (IT): "Technological advancement, data security, and integration will be the cornerstones in 2024. Leveraging the latest technologies in a secure and integrated manner with our payer clients will be key to our success."

Jhana (Strategy): "Innovation, adaptability, and partnership will be the key drivers. Staying ahead of technological advancements, being able to quickly adapt to the changing healthcare landscape, and building strong partnerships with clients and technology providers will be crucial for success in payment integrity."



This round table discussion highlights the multifaceted approach required to navigate the complex landscape of payment integrity. As we move towards 2024, these insights from top executives provide a valuable roadmap for the industry.

CERIS has partnered with payers across the nation to support their payment integrity programs and help them advance where they are in their journey.

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