



Community Health Choice Boosts Member Trust with 33% Faster Claims Processing

"We're all data nerds at heart, but our real goal is to do right by our healthcare providers and members. By getting the data right, Informatica helps us position ourselves to keep delivering the coverage and services Texans expect."

Nikola Renaud, Senior Manager of Information Systems, Community Health Choice



Goals

Provide better experiences while meeting regulatory requirements with a single view of providers and members

Bring speed and reliability to claims processes, particularly for complex cases that require input from multiple stakeholders

Deliver fast and accurate payments to improve relationships with individual members and over 50,000 healthcare providers

Solution

Break down siloes between teams and data sources to gain a single view of healthcare provider information with Informatica Multidomain MDM

Create better data quality and trust rules to simplify claims approval process by utilizing Informatica Data Quality

Cleansed healthcare provider data, ensuring faster claim adjudication rates and timely claims processing across Medicaid and Marketplace product lines

Results

59% improvement in accuracy of healthcare provider contact data, strengthening member relationships

Accelerated claims approvals by 33% for over 50K healthcare providers in Community Health Choice's provider network

Improved trust in data across the organization, positioning member-facing teams to get closer to their contacts and build new relationships



About Community Health Choice

Community Health Choice is a local, nonprofit, managed care organization committed to helping improve the health and well-being of Texas residents.

Founded in 1997, the company began by offering STAR Medicaid coverage to low-income children. Today, Community Health Choice proudly offers an array of affordable and no-cost health insurance plans to one of the largest provider networks in southeast Texas.

Informatica Success Story: Community Health Choice

Community Health Choice has dedicated itself to ensuring that every Texas resident has access to health insurance. From its early days providing STAR Medicaid coverage to low-income youth to launching one of the first virtual primary care plans in Texas, the non-profit continues to find new ways to serve the healthcare providers and residents within the state.

As it modernizes its services, Community Health Choice (CHC) also needs to improve the way it collects, manages, and processes claims and payment data. Nikola Renaud, Senior Manager of Information Systems, and her team play a key role in helping to ensure that CHC can maximize the value of its data. “We’re all data nerds at heart, but our real goal is to do right by our healthcare providers and members,” Renaud says.

Renaud’s team partnered with Informatica to transform and bring structure to its data processes. “By getting the data right, Informatica helps us position ourselves to keep delivering the coverage and services Texans expect,” explains Renaud. With [Informatica Data Quality](#) and [Informatica MDM](#), CHC now has a more accurate and reliable claims process, and is extending these new claims practices to its broader member community. The organization is well-positioned to strengthen relationships with its network of over 20,000 healthcare providers.

Removing the Reliance on Siloed Data

CHC wanted to not only improve claims and payment processes, but also needed to comply with a new state regulation mandating that insurance companies store addresses in a more granular format. Additionally, siloed systems and processes at CHC led to data management challenges that eventually threatened to compromise the organization’s relationships with healthcare providers. For instance, when the company’s address data was inaccurate, it could delay claims approvals and payments—causing friction between CHC and its provider network.

“We had payments that could go to the wrong place or be delayed because we didn’t always have the right contact information on file for some of our providers. In short, it was time to get our systems in order,” says Doug Vicere, Senior Solutions Architect.

This approach fell short in terms of data structure, accuracy, and governance. “When you feed data from different teams into the same clinical application, your goal is to look at all that information holistically. But because of our siloes, we had issues just trying to merge those datasets together,” says Renaud.





"With Informatica, we now have a single source of truth for our data and can deliver the right information to the right teams, at the right time. That translates to a smoother claims process, stronger relationships with our healthcare providers, and new opportunities to grow in the future."

Doug Vicere

Senior Solutions Architect
Community Health Choice



In addition to untangling its processes, Renaud's team wanted to integrate CHC's provider and member data with Salesforce, the CRM application fueling its claims approval and resolution processes. This integration was especially important for complex Medicaid claims, such as those involving cancer treatments, which require multiple layers of approval. Additionally, the integration with Salesforce increases accuracy, efficiency, decreases call time, and makes for a better experience when dealing with claims resolutions. When reaching out to providers, provider representatives are now working in a single system. Previously they had to manage and update up to 4 systems, and frequently work with the business owners of those systems.

Access to Shared Data Means Better Access to Care

Vicere knew it would be critical for CHC teams to have confidence in the company's data, which would help them to better serve members, ultimately boosting members' satisfaction. "When a company like ours has a data challenge, that creates an access to care issue," says Vicere. "For example, if a member's file doesn't load properly when they try to fill a prescription at the pharmacy, that's not just a breakdown in our data. It's a breakdown in their standard of care."

With quality and accuracy as their top priorities, the team at CHC selected Informatica MDM to give them a single master record for every person, place, and claim across the organization.

"Our teams need access to accurate, timely information," says Renaud. "If a healthcare provider or member has an issue with their claim or payment, that erodes their confidence in our organization. Informatica helped us to tackle these issues and maintain our reputation as a leader in Texas's health insurance sector."

Claims Processes Get a Clean Bill of Health

With Informatica MDM, CHC now has a single source of truth for its data and sees the benefits of pulling member, claims, and payments data into their master database. CHC's representatives no longer work with inconsistent information from these data systems and don't have to make judgment calls about which data is accurate while serving members and providers over the phone.

"With a single, clean source of data, our representatives can speak to healthcare providers with confidence, knowing they have the latest, most accurate data to inform their conversations," says Prakash Yarlagadda, Application Architect at CHC.

Using Informatica Data Quality and its Address Verification service, CHC has changed how it manages address data for healthcare providers—cleaning up its addresses for a 59% improvement in the accuracy of



Inside The Solution:

- Informatica Multidomain MDM
- Informatica Data Quality
- Informatica Address Verification
- Salesforce

the data—helping to ensure that claims and payment go through smoothly. “Informatica solutions helped us meet our goals. We never would have been able to clean all of that data manually, especially not under a tight regulatory deadline,” says Vicere.

Today, CHC uses its suite of Informatica solutions to improve data governance. Visibility into data across the business will help the company to stay one-step ahead of regulations. Internally, a more structured and accurate data operation will lead to better reporting, better decision-making, and of course, better relationships with CHC’s network of healthcare providers and members.

For Renaud, the goal is to reach a point where every CHC team has 100% trust in the data the team provides. “This will also put the business in a position to confidently grow its network”, adds Vicere. “With Informatica, we now have a single source of truth for our data and can deliver the right information to the right teams, at the right time,” he says. “That translates to a smoother claims process, stronger relationships with our healthcare providers, and new opportunities to grow in the future.”

In the future, they plan to enhance product offerings as healthcare is ever evolving. If the pandemic has taught them anything, it’s that you need to have a diversified portfolio to maintain business solvency. CHC is focused on profitable growth, adding new products and services for members, as well as continually expanding their provider network.

Digital transformation is changing our world. As the leader in enterprise cloud data management, we’re prepared to help you intelligently lead the way. To provide you with the foresight to become more agile, realize new growth opportunities or even invent new things. We invite you to explore all that Informatica has to offer—and unleash the power of data to drive your next intelligent disruption. Not just once, but again and again.

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