

# **GLENRIDGE HEALTHCARE SOLUTIONS**

## **Network Development and Network Management Services Overview**

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- Privately held Consulting/Professional Services firm established in 1997
  - Senior staff with an average of more than 20 years of experience in healthcare business development and operations
  - Small firm service with large firm experience and an extensive client list including national and regional health plans and health systems.
  - Emphasis on seasoned managed care professionals and proprietary technology tools to enhance engagement efficiencies and scalability
  - Client relationships generally long term and broad scope - spanning wide range of services and engagements.
- For additional information, see website [www.glenridgehealth.com](http://www.glenridgehealth.com)



**Current  
State  
Challenges**



**Future  
State  
Objectives**



## **BRIDGING THE GAP FOR CLIENTS**

- Regulatory Challenges
- Revenue Reductions
- Network Financial Performance
- Quality Program Development
- Provider and Contract Data
- Network Adequacy
- Provider Relations
- Staffing / Resourcing Constraints

**Network  
Staffing  
Solutions**

**Data Systems  
& Analytics  
Tools**

- Data Integrity
- New Segments and Markets
- Loyal Providers
- Competitive, Compliant and Profitable Provider Network
- Evolving Product Portfolio
- P4P and Quality Programs
- Process Efficiency and Accuracy

**Increased Profitability**

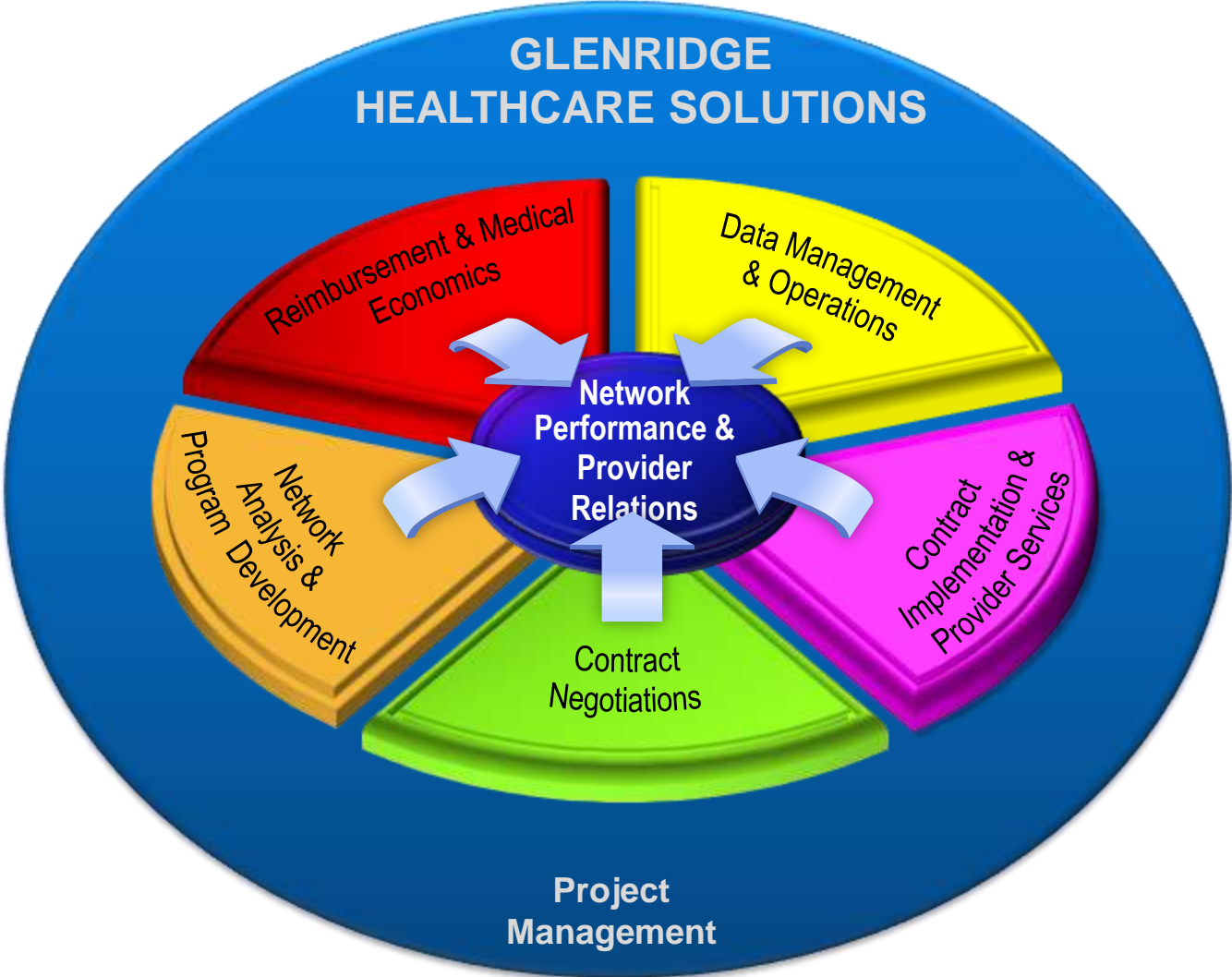
## GLENRIDGE HEALTHCARE SOLUTIONS

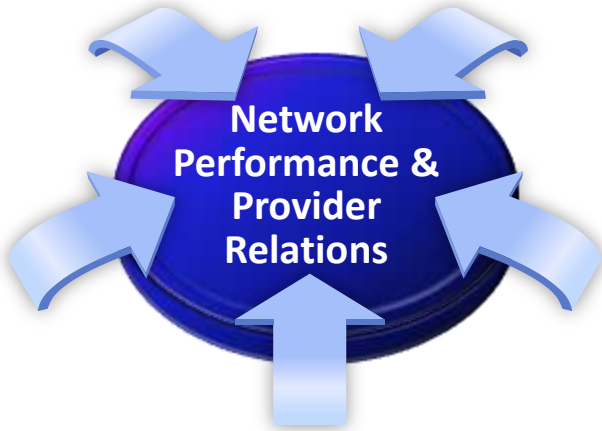
- Managed care contracting and operations expertise
- Medicare & Medicaid program experience
- Technology enabled approach
- Focused project management & quantified deliverables
- Portable and scalable network development solutions
- Standardized project protocols and comprehensive management reporting
- Timely access to project data and documentation
- Positive provider relations

“Current State”  
Challenges

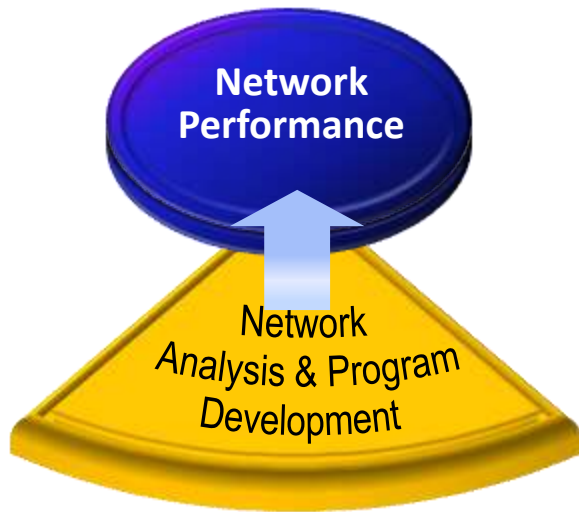
“Future State”  
Objectives



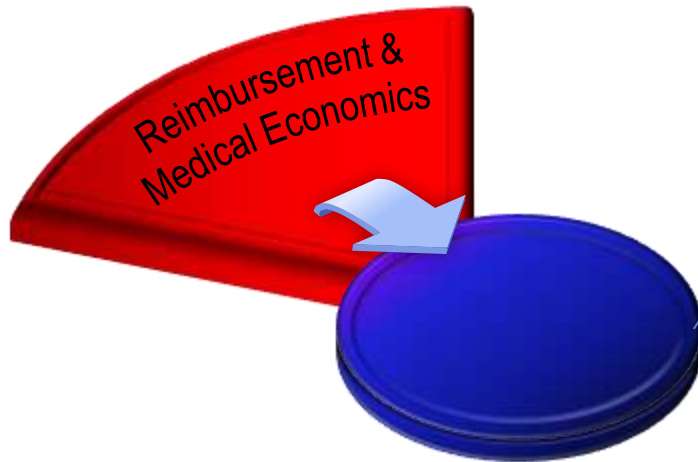




- Sensitivity to Provider and Member Issues
- Expertise related to product offering, program requirements, policies and procedures, regulatory and accreditation requirements
- Scripting and provider materials
- Professionalism, follow through and responsiveness
- Remote and on-the-ground resourcing
- Community and product-specific communications, programs and services
- Familiarity with providers' services and populations

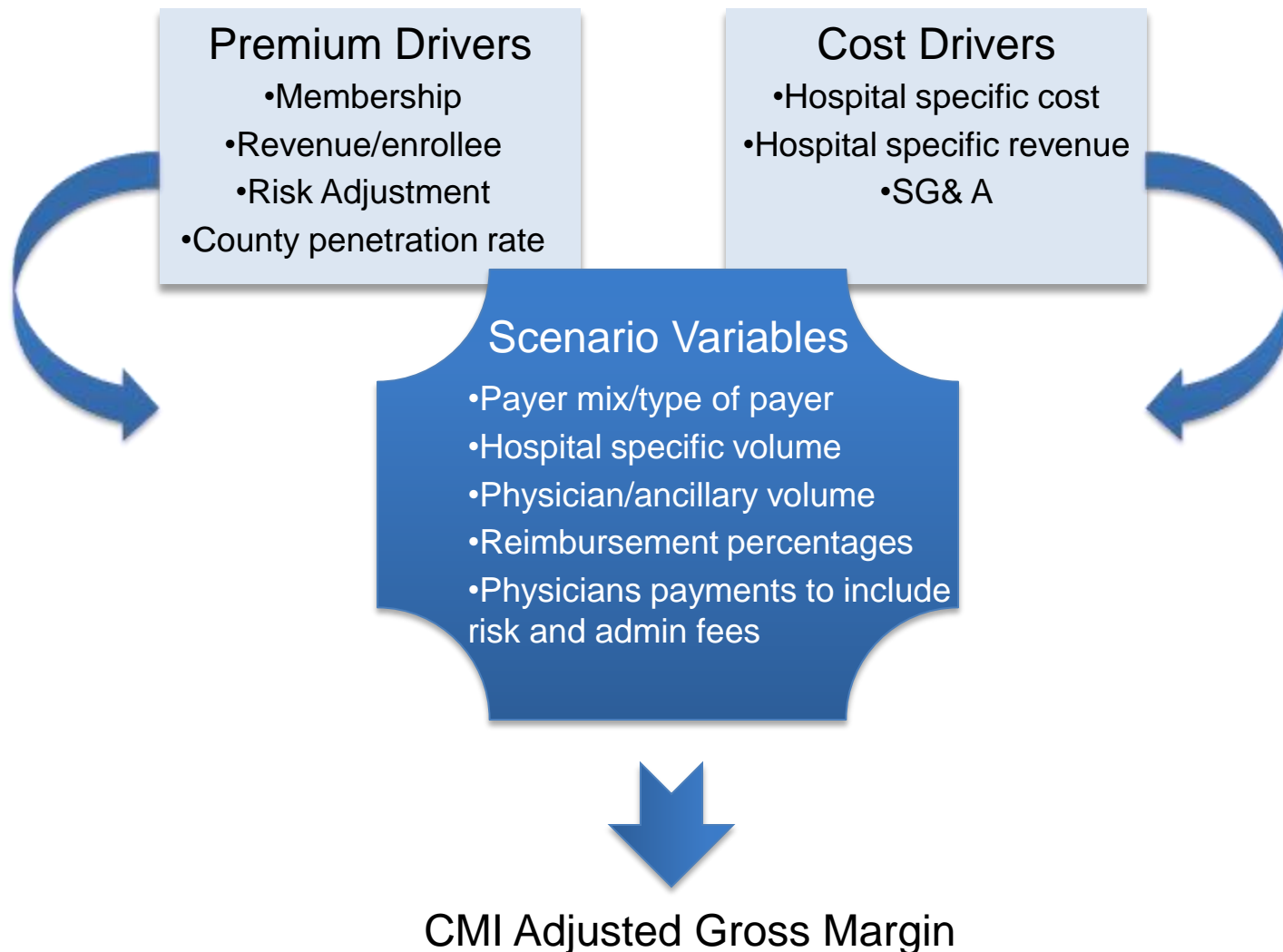


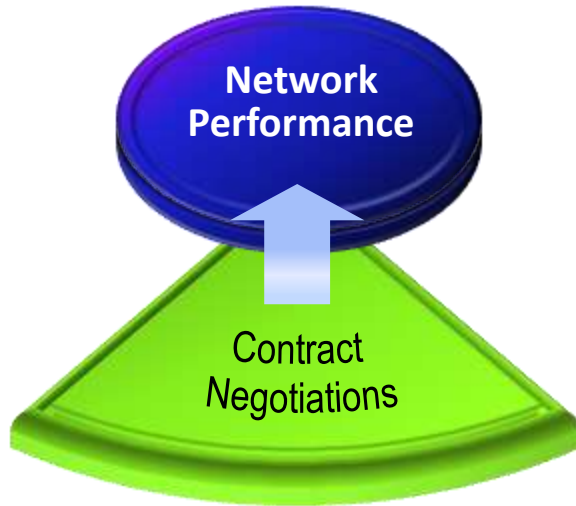
- Integration of Sales & Networks
- Feasibility & planning for all product applications & RFPs – Medicaid, Commercial, Medicare, TRICARE
- Disruption / Gap analyses & geo mapping
- Quality & Pay for Performance program development
- Carve outs & National Vendor Agreements
- Competitor review
- Positioning for Healthcare Reform and industry innovation



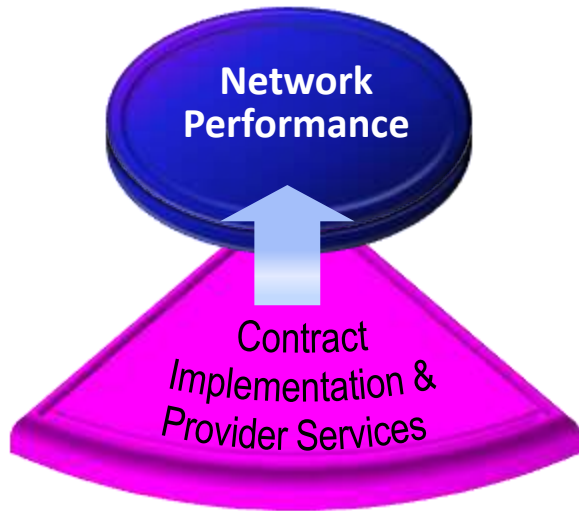
- Financial modeling and network analysis
- Medical budgets and pro forma development
- Reimbursement modeling
- Cost and utilization benchmarks
- Incentive model development
- Network scorecards & profitability assessment tools
- Drill down analysis on network and provider performance

- Robust modeling tool designed pre-populated with market specific data
- Can be customized for any network project and/or line of business (Commercial, M'care, TRICARE, M'caid)
- Flexibility to model bottom-line impact of all key variables

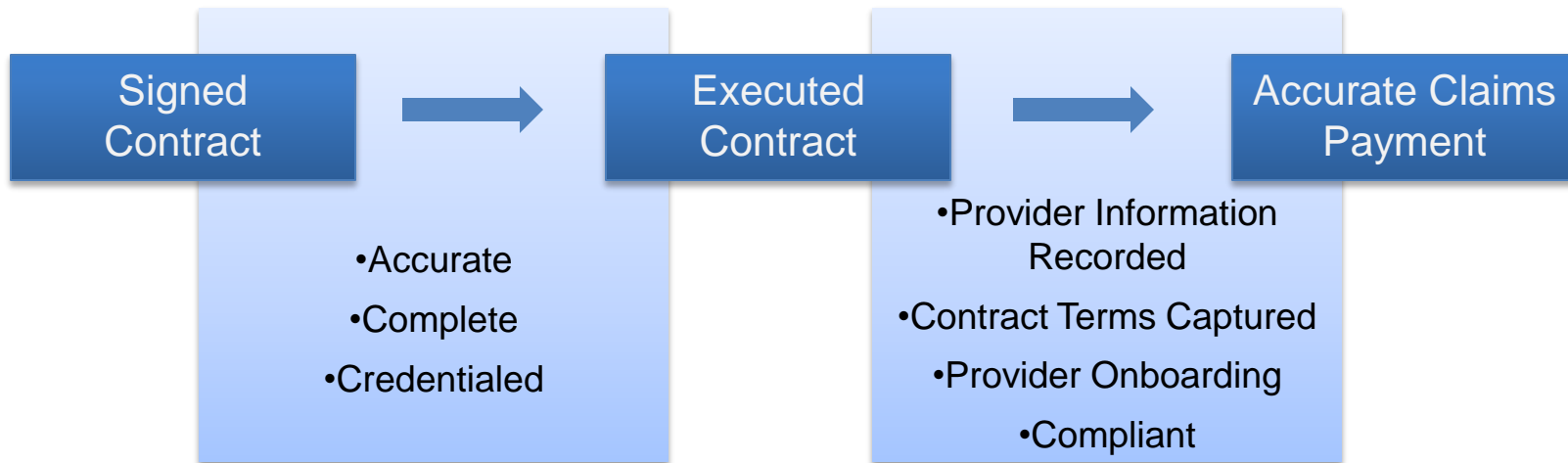




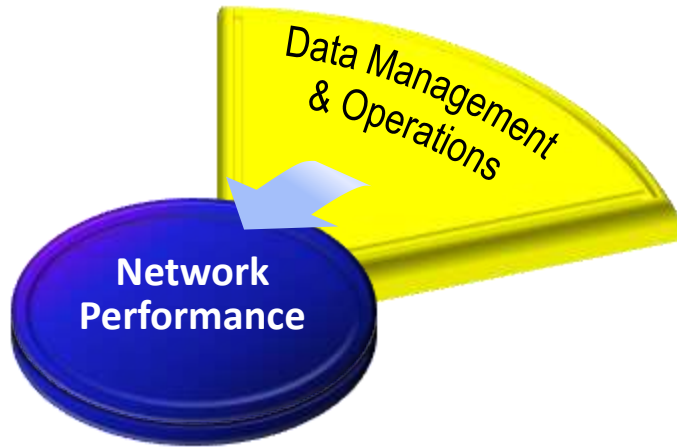
- Primary and 'Second Chair' Contracting roles
- Remote and on-the-ground contractors and provider relations specialists
- Financial analysis and reimbursement modeling to support negotiations
- Contracting parameters and Escalation protocols
- Documentation and data - collection and processing requirements
- Data tracking & management reporting; dashboards & market scorecards
- Call center support



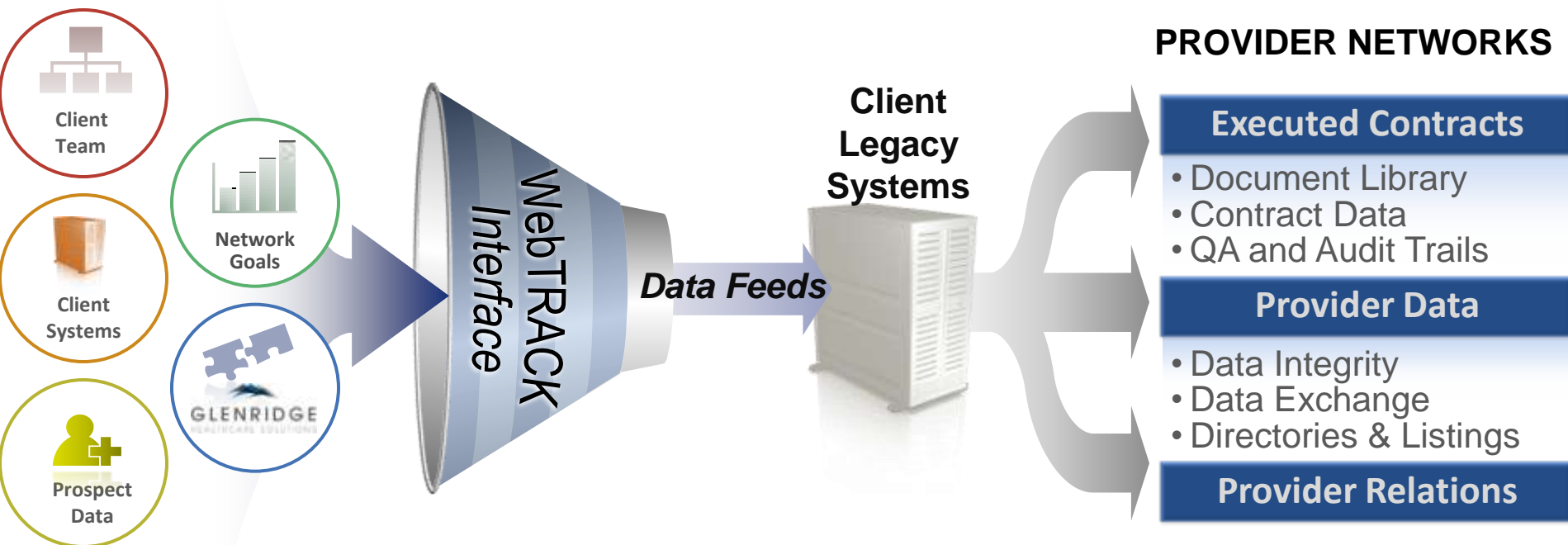
## Provider Data Management

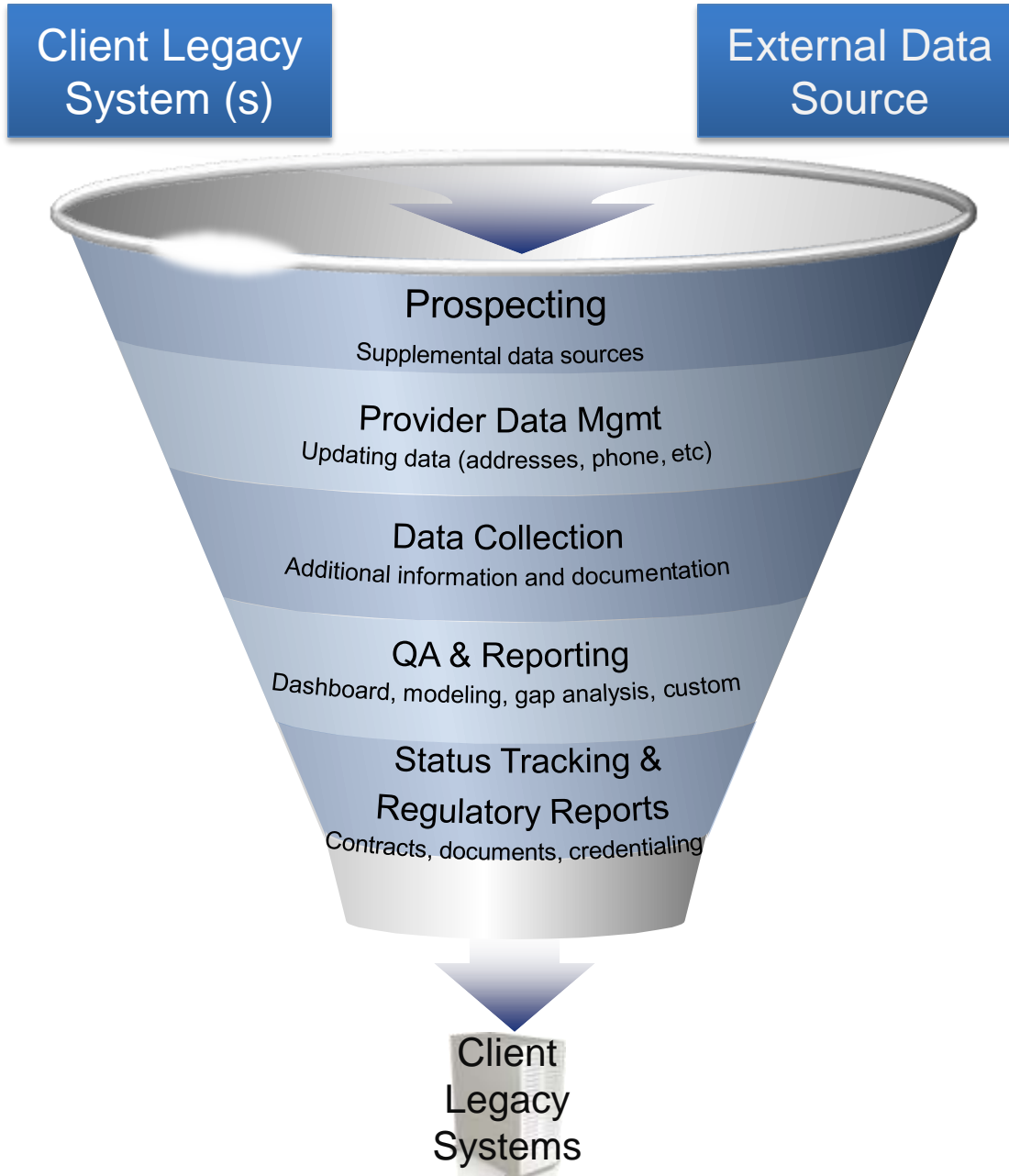


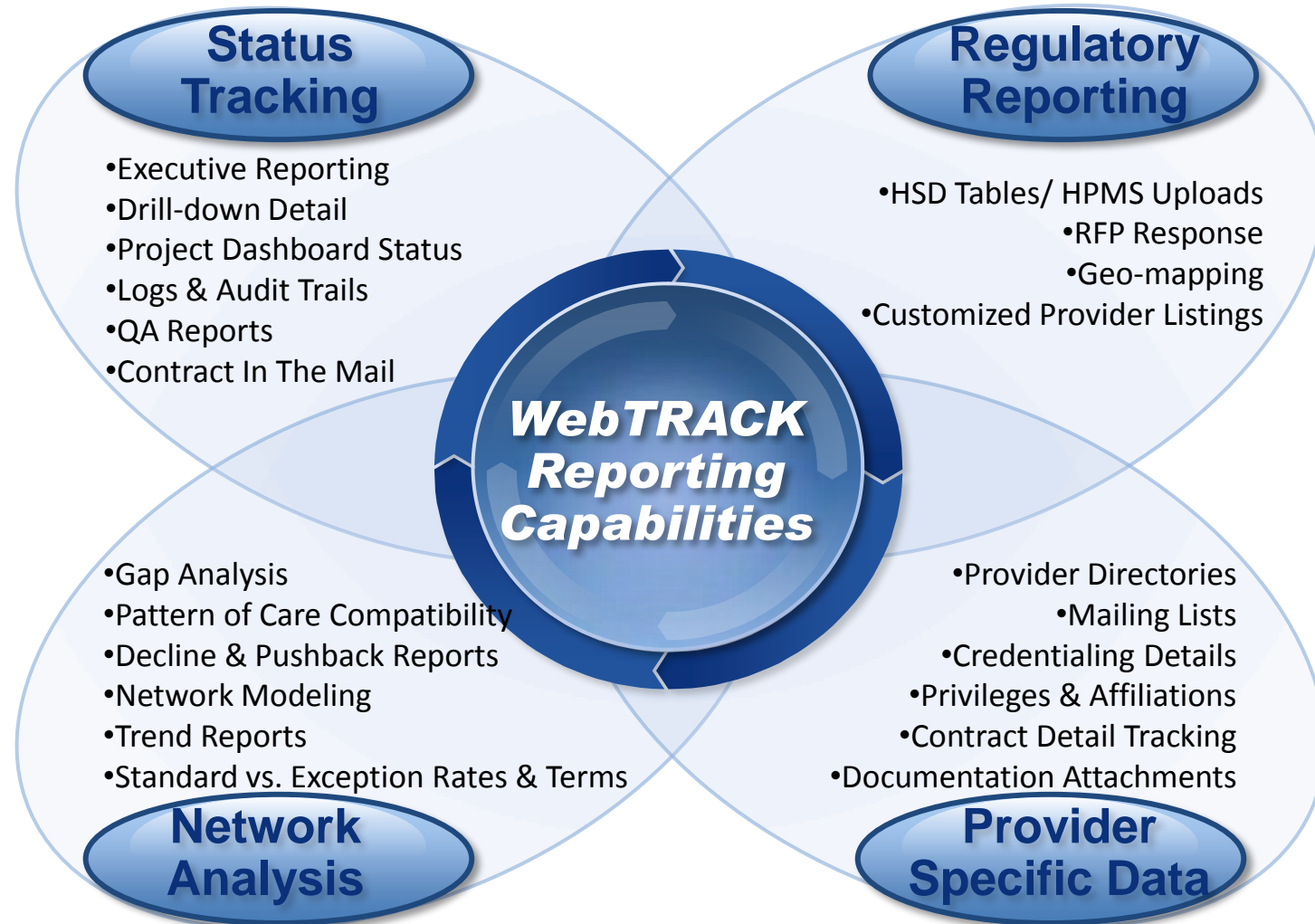
## Process Improvement & Audit Trails



- System selection and implementation support
- Systems and data integration
- Technology tools for analysis, reporting and mapping
- Data analysis and data scrubbing
- Provider data clean-up
- Claims processing review - accuracy & automation
- Generate / customize directories
- Root cause analysis of Provider Services and Member Services issues
- Third party vendor data integration
- Government and customer reporting

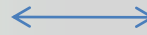




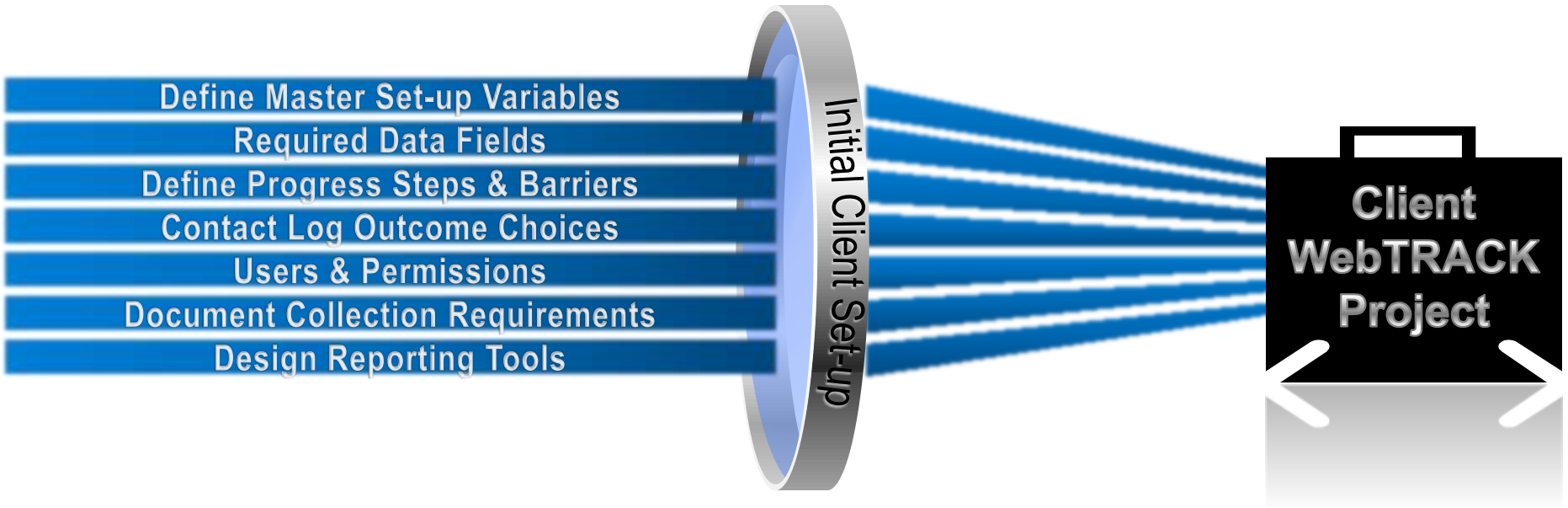


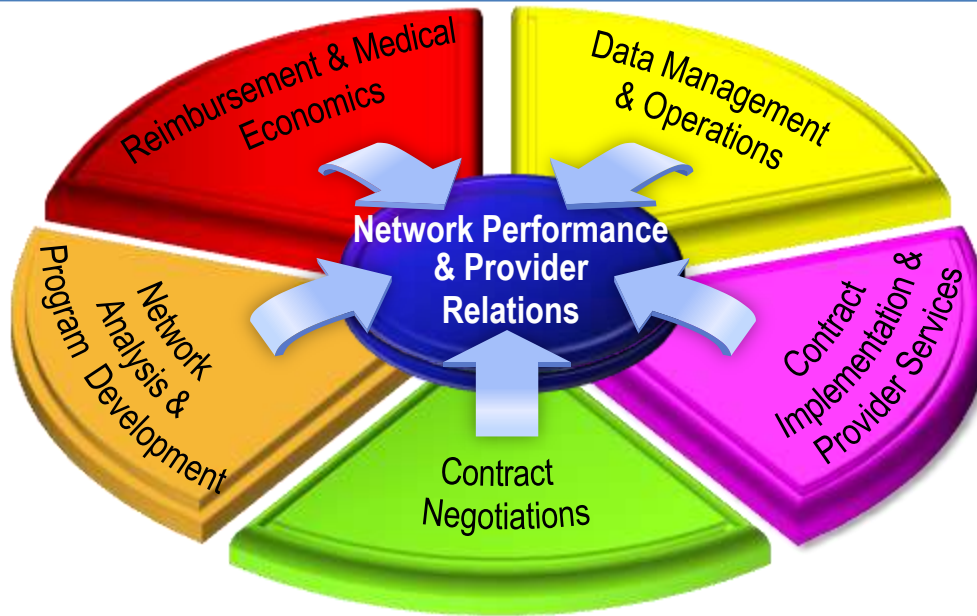
## Connect Platforms

Webtrack identifiers



Client Legacy System identifiers





## Planning

- Deliverables & Scope
- Protocols & Workflows
- Milestones & Timelines
- Data & Reporting Specifications
- Staffing Models & Budgets
- Internal & External Document Prep
- Modeling & Scenario Analysis



## Execution

- Project Oversight
- Trending & Issues Resolution
- Time & Budget Adherence
- Training and Reference Documentation
- Staff Accountability and Team Integration
- Escalations and Business Cases
- Data Management



## Monitoring

- Network Status Reports
- Network Adequacy / Gap Analysis Reports
- Standard vs. Exception Rates and Terms
- Performance vs. Financial Benchmarks
- QA & Productivity
- Worklists and Work Queue Monitoring
- Resource Allocation