BetterDoctor Exchange: Provider Data Attestations

# FREQUENTLY ASKED QUESTIONS A GUIDE FOR HEALTH PLAN PROVIDER SUPPORT



## INTRODUCTION

#### **ABOUT QUEST ANALYTICS**

Quest Analytics offers a provider network management platform that is trusted by more than 95 percent of America's health plans. We help our partnered plans measure, monitor and manage network performance across all lines of business. Our platform links network adequacy and provider directory accuracy thereby reducing regulatory risk for both measures, while integrating actionable data and insights within a health plan's workflow, including credentialing, directories, contracting, claims and more.

### QUEST ANALYTICS ACCURACY SOLUTION

#### Powered by our BetterDoctor Exchange

Quest Analytics' BetterDoctor Exchange is the only primary sourced, auditable national database of providers. By connecting our Quest Enterprise Services with our BetterDoctor Exchange, we reduce network accuracy risks by helping our partners ensure their Health Service Delivery (HSD) tables or federal network filings match their member directories. And by continually integrating provider data changes back into their Quest Enterprise Services, our partners can remediate gaps and improve their network adequacy. Through the BetterDoctor Exchange, we regularly reach out to more than 500,000 providers (and that number is growing daily). We collect data from multiple plans and sources, normalize, aggregate and validate the data through attestations, and deliver the attested information back to our partners for ingestion of corrections. We collect more than 100 important and critical data elements, including those mandated by Federal and State regulations.



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# **BETTERDOCTOR EXCHANGE: PROVIDER DATA ATTESTATIONS**

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## **GENERAL QUESTIONS**

#### WHAT IS BETTERDOCTOR?

BetterDoctor is the Quest Analytics Accuracy solution enabling health plans to provide their members with convenient access to an adequate network of doctors and hospitals and an up-to-date, accurate directory of network providers. The goal is to improve the flow and quality of accurate provider data, so members can quickly get the care they need when they need it. State and federal regulations mandate that health plans must update information quarterly or at least every six months to avoid misdirecting members. BetterDoctor is performing this outreach for us to providers, like you, to ensure our provider directory is as accurate as possible. All outreach efforts are made under the BetterDoctor name.

By attesting your information through BetterDoctor, you become part of the BetterDoctor Exchange (BDX) – a database of more than 500,000 providers (and growing daily) across 50 states.

# WE'VE REQUESTED BETTERDOCTOR CONTACT YOU TO CONFIRM OR UPDATE YOUR INFORMATION.

If you don't respond to the BetterDoctor request, we may have to remove your information from our directories.

#### IS THERE A COST TO ATTEST MY INFORMATION?

There is absolutely no charge to validate your information with the BetterDoctor's online tool. BetterDoctor is contracted by us to update our provider data. We are funding this outreach and data validation effort.

#### IS BETTERDOCTOR A MARKETING COMPANY?

No, BetterDoctor is not a marketing company and the data validation attempts they are making on our behalf are not marketing or sales attempts.

#### HOW OFTEN AM I REQUIRED TO VERIFY MY INFORMATION?

CMS (the Centers for Medicare and Medicaid Services) requires health plans to reach out to providers on a quarterly basis. Additionally, there are state-specific laws, such as SB-137 in California, that require health plans to reach out directly to contracted providers at least once every six months. We have engaged BetterDoctor to perform that outreach and data verification.

#### HOW DOES BETTERDOCTOR'S PROVIDER DATA ATTESTATION PLATFORM WORK?

- 1. BetterDoctor receives the provider roster from us.
- 2. BetterDoctor uses effective multimodal outreach methods to validate data from each provider (fax, email, phone).
- 3. Providers validate and update their data via their input into the BetterDoctor portal.
- 4. The validated data is reviewed and exported back to us to update our source systems and, ultimately, the provider directory.

#### HOW CAN I CONFIRM YOU'VE RECEIVED MY VALIDATION?

Please email <u>support@betterdoctor.com</u> with your practice phone or fax number and the access token you received. A member of the BetterDoctor support team will be in touch regarding your validation confirmation.

#### **HOW WILL MY VERIFIED INFORMATION BE USED?**

The data you verify, and update will be securely forwarded to us. We will then update our source systems and, ultimately, our provider directory.



#### WHAT ARE THE CONSEQUENCES OF NOT COMPLYING WITH OUTREACH REQUESTS?

Failure to verify your information limits our ability to ensure members have access to your most up-to-date information regarding you and your practice and may result in your information being removed from the health plan's print and online provider directories. In some states, payments may be delayed, or for a repeated pattern of non-responsiveness, health plan participation agreements may be terminated.

## **COMPLETING THE ATTESTATION PROCESS**

#### WHAT CAN I DO IF I AM HAVING TROUBLE VALIDATING MY INFORMATION?

- 1. Go to: betterdoctor.com/validate.
- 2. Locate the access token on the fax or email you received from BetterDoctor (it is an 8-character alphanumeric code (for example ABC123D4), and it is not case sensitive).
- 3. Enter the access token
- 4. Click 'Submit.'
- 5. Verify and update your information using the online tool via the BetterDoctor portal.

Still having trouble? Contact <a href="mailto:support@betterdoctor.com">support@betterdoctor.com</a> to receive a new access token.

#### WHY IS MY ACCESS TOKEN NOT WORKING?

An access code could not be working due to a few different reasons.

Double-check the date you received the code. Codes can only be used during the current quarter. The quarters are January to March, April to June, July to September, and October to December.

If you're certain that the code is active, try refreshing your browser and typing it in again.

Still not working? Contact <a href="mailto:support@betterdoctor.com">support@betterdoctor.com</a> to receive a new access token.

# WHAT IF I DON'T SEE MY BOARD LISTED ON THE BETTERDOCTOR ONLINE VERIFICATION TOOL?

If your board isn't listed, please email *validation@betterdoctor.com* and let them know. BetterDoctor is adding new boards to their tool all the time because more and more types of practitioners are becoming subject to provider directory update standards and regulations.

If you need help deciding what to put in your form in the meantime, reach out to the BetterDoctor support team at <a href="mailto:support@betterdoctor.com">support@betterdoctor.com</a>.

#### HOW DO I ADD OR REMOVE A PRACTICE LOCATION?

At this time, you may only remove a practice or location based on what we provide to them. You will need to wait for outreach from BetterDoctor to add additional practices or locations. Notify us directly of locations to add or remove and they will become part of the attestation process in the future.

#### WHAT ARE "LICENSE TYPES" ON THE ONLINE FORM?

There are specific license types depending on the state in which you practice. If you do not see your license type on the online form, please email <a href="mailto:support@betterdoctor.com">support@betterdoctor.com</a>. They will provide your feedback for possible inclusion in the form in the future.



#### HOW DO I ADD INSURANCE PRODUCTS TO THE ONLINE FORM?

The only data requiring validation at this time is for the products identified by us and listed in the BetterDoctor online form.

#### HOW DO I ADD OR REMOVE A PROVIDER?

At this time, you may only remove a provider. You should notify us directly to add providers who will be part of future attestation efforts by BetterDoctor. To remove a provider please follow these steps:

- 1. On the first page of the form, click "Edit" next to any provider(s) you would like to remove.
- 2. A list of reasons will appear. Select the one that is most applicable to your situation.
- 3. Complete the rest of the form. We will be notified that the provider(s) have been removed.

Please note that this may take up to 90 days to update the information in our provider directories.

# CAN I EDIT MY SUBMISSION AFTER I COMPLETED MY VALIDATION IN THE ONLINE TOOL?

Unfortunately, we don't have a way for you to edit your submission online at this time after your validation is completed for the current reporting period.



# **OTHER VENDORS**

#### WHAT IF I ALREADY VALIDATED WITH A HEALTH PLAN OR ANOTHER COMPANY?

Generally, you should verify with all vendors that reach out to you. Certain regulations (specifically Medicare Advantage) require that health plans reach out to their providers once every three months to validate their information, which is why you have may have received multiple contacts within a few months from other health plans or companies. The information you submit to each vendor most likely gets submitted to different plans for a variety of purposes.

For example, if a vendor reaches out to you for verification of credentialing information that information may not get incorporated into each of your provider directory listings.

On the other hand, BetterDoctor verification requests focus specifically on verifying your information so that it eventually makes it into each health plan's provider directory. It's important to understand the difference between credentialing and provider directory information. One is intended for plans, the latter, for members.

# WHAT IF I ALREADY VALIDATED WITH CAQH? HOW IS BETTERDOCTOR DIFFERENT FROM CAQH?

Several health plans contract with BetterDoctor to clean and update their provider directories regularly so they are as accurate as possible for patients searching for care.

Many providers are familiar with CAQH's online updates and use them to update credentialing information with some health plans. Some plans also use CAQH to update provider directory information. But, it's important to understand the difference between credentialing and provider directory information. One is intended for plans, the latter, for patients.

The plans we work with do not use CAQH to update their provider directories, so there is no overlapping work. In short, the information you submit to each organization goes to different plans and is used differently.

# STILL HAVE QUESTIONS?

#### WHAT IF I STILL HAVE QUESTIONS?

If you are a provider and have any questions about the update process, don't hesitate to visit BetterDoctor's help center located at <a href="https://help.betterdoctor.com/s/">https://help.betterdoctor.com/s/</a>.

