

NORMS AND

BENCHMARKING

FOR HEALTH PLANS

BENEFITS

- Broad geographic coverage better represents real-world treatment patterns and costs
- The large number of unique patients and great depth of patient-level information allows for accurate tracking over time
- Because MarketScan data is derived from multiple sources, it offers the ability to “retain” patients even when they switch health plans
- Full integration of all treatments reflects the true continuum of care

FEATURES

- Broad geographic coverage (national, regional, state, intrastate)
- 115 million unique patients
- Over 36 million inpatient hospital discharges
- Robust data from diverse sources (employers, health plans, Medicaid, and other carriers)
- Fully integrated drug and medical claims at the patient level

Truven Health MarketScan Research Databases

Challenged by consolidation and an increasingly competitive marketplace, health plans and third-party administrators (TPAs) must differentiate themselves to win and retain business. To determine a solid strategy, comparative data is needed to evaluate and benchmark financial and clinical performance.

An Independent Source of Comparative Healthcare Data

The Truven Health MarketScan[®] Research Databases are the gold standard in proprietary U.S. research databases. They provide a sophisticated dataset with robust, high-quality data that is strong longitudinally, detailed at the patient level, and reflects the true continuum of care. The MarketScan Research Databases were designed to make it easy to use real-world data to analyze patterns and cost. In fact, research supported by MarketScan data has been used in more than 300 peer-reviewed articles since 2000.

MarketScan enables accurate comparative analysis with:

- Data tracking of patients over a number of years and across multiple health plans

- Diverse data sources including employers, health plans, and government agencies
- In-depth, patient-level detail linked by unique identifiers for consistency across services
- Fully integrated treatment and plan design reflecting the complexity of healthcare delivery

The information provided by MarketScan can be utilized by multiple departments including:

- Network development/provider contracting
- Medical informatics/economics
- Data management
- Group account management
- Care management

MarketScan Databases

To help a health plan or TPA find the specific claims data they need, MarketScan Research Databases can be segmented into four categories: Commercial, Medicare Supplemental, Medicaid, and Benefit Plan Design.

The MarketScan Commercial Database provides in-depth, cross-sectional, and longitudinal views of healthcare

practices and costs for the American working population and their dependents.

Fully adjudicated, patient-level claims are seamlessly linked with other MarketScan datasets, including the Benefit Plan Database. Linking data at the patient level significantly enriches the insights derived from claims-based research.

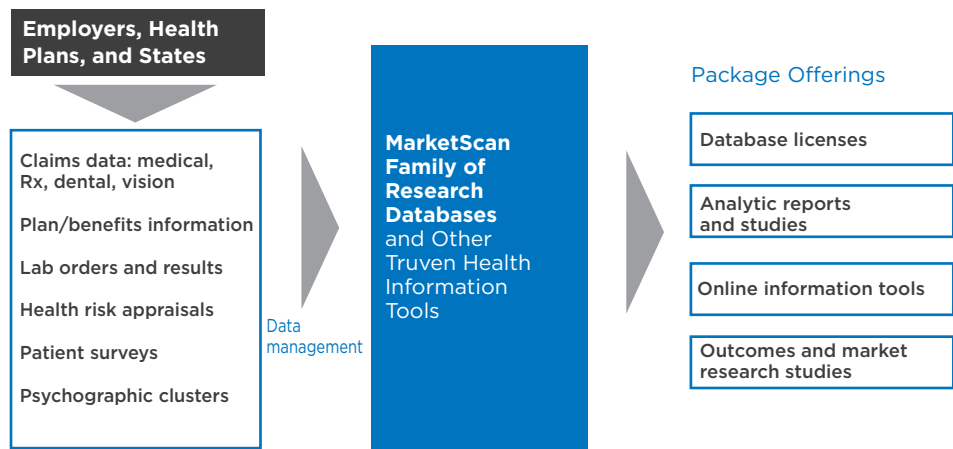
The MarketScan Supplemental Database includes both the Medicare-covered and employer-paid portions of the healthcare encounter. Detailed cost, utilization, and other information from inpatient and outpatient settings allows tracking of employees and dependents moving through their Medicare years.

The Medicaid Multi-State Database pools claims from over 28 million Medicaid enrollees from eleven geographically dispersed states. It includes a long-term care claims file that captures nursing home stays, home health care, and long-term care services. A representative subset of the full database is available for licensing.

The Truven Health Difference

As the market leader in analytic methodologies to evaluate healthcare performance, professionals in every facet of the industry rely on the leading data assets and extensive experience of Truven Health to help improve the quality and efficiency of care.

Robust, Diverse Data Sources



Information	Value
Fee-Schedule Comparative Information	Determine the most effective way to develop reimbursement schemes that are fair and equitable to providers while enabling your employer constituents to manage premiums.
Chronic Condition Benchmarking Report	Learn what others are doing to assist in managing chronic conditions and exhibit your success stories to employers.
Outpatient High-Cost Services Profiling Analysis	Discover what the national norms are and determine the steps to revise provider rates, institute vendor-management programs, and encourage subscribers to utilize care more appropriately.
Evaluation of Consumer-Driven Health Plan (CDHP) Models	See what the trends are nationally for CDHP initiatives and better position your plan for enhanced CDHP design.



ABOUT TRUVEN HEALTH ANALYTICS

Truven Health Analytics delivers unbiased information, analytic tools, benchmarks, and services to the healthcare industry. Hospitals, government agencies, employers, health plans, clinicians, pharmaceutical, and medical device companies have relied on us for more than 30 years. We combine our deep clinical, financial, and healthcare management expertise with innovative technology platforms and information assets to make healthcare better by collaborating with our customers to uncover and realize opportunities for improving quality, efficiency, and outcomes. With more than 2,000 employees globally, we have major offices in Ann Arbor, Mich.; Chicago; and Denver. Advantage Suite, Micromedex, ActionOI, MarketScan, and 100 Top Hospitals are registered trademarks or trademarks of Truven Health Analytics.

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