Consulting and Service Program: 
Physician Referral Management

Integration Between Physicians and Hospitals Paves the Way for Success

As you navigate the transition from fee-for-service to value-based care, recognizing your physician-to-physician and physician-to-facility referral patterns can mean the difference between new revenues and losses. As the care model changes, hospitals are poised to assume much greater risk for care delivered — both inside and outside their networks. Truven Health Analytics™ offers the Physician Referral Management consulting and service program to help your hospital forge a tighter integration with your physicians, a critical factor in the successful transition to value-based care.

Truven Health experts will provide your leadership with the claims-based, quantitative insights you need to create a clear path to understanding your referral patterns.

The Truven Health Approach Drives the Results You Want

Our Physician Referral Management consulting and service program offers you the ability to understand your physician landscape and the intricacies of the referrals that have such an effect on your bottom line. We help you:

- Identify high-volume referral and utilization patterns
- Manage outmigration patterns by identifying physician splitters
- Enhance ongoing programs and plan for the future
- Identify high-value physicians to prepare for changing delivery models
- Drive profitable business and contribute to coordination in inpatient, outpatient, and post-acute care
- Assist your physician liaison team in achieving goals

Your Organizational Needs Are Unique

Your referral patterns are specific to your business model and physicians, and that means your solutions need to be customized and adapted to your hospital — a one-size-fits-all approach won’t cut it. Truven Health tailors your consulting engagement to your organization through our detailed process, including:

Project Initiation — The Truven Health team will host a project initiation meeting where we will review objectives, requirements, and the project plan. We will also define roles and discuss timeframes.

Truven Health utilizes the largest, most accurate medical provider database in the United States, comprising more than 1,000 data sources and processing more than 60 million claims each month. These databases include all payer claims built through relationships with most of the top commercial payers in the country.
Data and Reports — The data-gathering and reporting element of the process involves these steps:

- Data collection: We gather the most complete and accurate information about your claims, staff, physicians, and physician extenders
- Creation of custom databases: We leverage data to create custom physician referral databases that give insight into your unique referral activity and provide a representative sample of activity in all of your markets
- Reports and analysis: We complete reports in Excel format, detailing up to five provider specialties

Review of Findings — Upon completion of the project, we will summarize the findings in a written report and present this information to your leadership.

Timeline for a Successful Program Implementation: Approximately three to four weeks, upon receipt of data

Physician Referral Management Reports May Include the Following Analysis

- Executive Summary
- Payer Mix Analysis - Claims by Payer and Affiliation
- Referrals by In-Network Physicians to Named Physicians and Rendering Facility
- Referrals to In-Network Physicians by Named Site of Service
- Referrals by Physician Affiliation
- Referrals by Physician Affiliation and Site of Service
- Referrals by Out-of-Network Physicians to Named Physicians and Rendering Facility
- Referrals to Out-of-Network Physicians by Named Site of Service

Get Connected
For more information about the Physician Referral Management consulting and service program, email us at info@truvenhealth.com or visit truvenhealth.com/provider-consulting-solutions.

Our Team
Our consultants have extensive experience working with hospitals to improve outcomes. They easily combine the advanced analytics of Truven Health with real-world clinical expertise and technical competence. Because of this, our team can seamlessly bridge the gap between data and hospital operations.

ABOUT TRUVENT HEALTH ANALYTICS
At Truven Health Analytics, we're dedicated to delivering the answers our clients need to improve healthcare quality and access, and reduce costs. Our unmatched data assets, technology, analytic expertise, and comprehensive perspective have served the healthcare industry for more than 30 years. Everyday our insights and solutions give hospitals and clinicians, employers and health plans, state and federal government, life sciences researchers, and policymakers the confidence they need to make the right decisions.

Truven Health Analytics owns some of the most trusted brands in healthcare, such as Micromedex, ActionOI, 100 Top Hospitals, MarketScan, and Advantage Suite. Truven Health has its principal offices in Ann Arbor, Mich.; Chicago; and Denver. For more information, please visit truvenhealth.com.

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