

# The five non-negotiable traits of a medical benefits management partner

When you partner with a medical benefits manager, you trust them to help you keep two promises — to safeguard your members' health and to support your providers' decision-making. This is no small order.

Those partners who can protect your promises have five distinct traits, which are: agile, cohesive, endorsed, supportive, and expansive. How does your partner measure up?



Learn how to assess your medical benefits management partner on the next page.



# Starter questions to assess your partner

You know the five traits that your medical benefits manager must have. But how can you assess whether your partner has them? Use these questions below to start your analysis.

## Agile

- What are the medical benefit manager's capabilities, and how do they support members' and providers' decision-making across the continuum of care?
- What strategies does the organization offer to improve providers' experiences?
- Can the organization handle all lines of business, including national accounts?

## Endorsed

- What percentage of providers in your market use the medical benefit manager's solution(s)? How have your providers reacted to them?
- Are providers satisfied with the organization's clinical guidelines?
- Are the organization's clinical healthcare leaders well recognized within the healthcare community?

## Supportive

- Do providers in your market feel that the medical benefits manager's physician reviewers are responsive and helpful?
- How quickly are cases resolved, including those that undergo peer-to-peer review?
- How does the organization educate providers and support them?

## Expansive

- How broad is the medical benefits manager's suite of solutions and experience?
- Has the organization introduced innovative programs, that address your most pressing challenges, such as value-based reimbursement, member education, and site of care optimization?
- How many acquisitions has the organization undergone? Is the organization free from conflicts of interest, or does a major competitor own them?

## Cohesive

- Does the medical benefits manager offer a single platform or several disparate ones?
- Do the workflows enabled by the organization integrate well with providers' delivery of care?
- How structured and consistent are the organization's operations, such as their implementation process?

## We keep our promises — and protect yours

No partner is perfect. But the right one keeps their promises and helps you keep yours. As the leading medical benefits management partner for today's healthcare organizations, we do exactly that — we follow through on all the details that impact your promises. We treat your providers like colleagues. We streamline workflows. We promote continuity of care. And, we respond to your needs, no matter the size. That's our promise.

# 88%

Cases initiated online

# 95%

Provider satisfaction with our physician reviewers' clinical competence and helpfulness

# 80%

Cases resolved online at intake

# 87%+

Cases resolved within 24 hours