FOR IMMEDIATE RELEASE

Contact:
Amy Pasquarello
703-883-9000 ext. 146
apasquarello@meritalk.com

HEALTH AND HUMAN SERVICES AGENCIES SQUANDER $342B ANNUALLY DUE TO DATA INTEGRATION ISSUES WITH ELIGIBILITY AND BENEFITS VERIFICATION

Agencies say improving IT systems for healthcare benefits and verification will eliminate improper payments, and deliver better overall quality of service, faster eligibility determination, and increased accuracy for benefits recipients.

Alexandria, Va., August 17, 2015 – MeriTalk, a public-private partnership focused on improving the outcomes of government IT, today announced the results of its new report, “The Economics of Eligibility: The Cost of Eligibility and Verification Challenges for Government Healthcare Benefits.” The study, underwritten by MarkLogic® Corporation, examines the challenges health and human services agencies have integrating, managing, and accessing vast, disparate, and diverse patient information. Most notably, data integration is cited as the number one challenge, with $342 billion being lost1. Nearly half of respondents (47 percent) say a focus on data integration can eliminate significant financial loss, while also improving customer service through faster and more accurate results.

Data integration challenges are wreaking havoc within IT systems, costing health and human services agencies billions and their customers a reduction in quality care. Almost half of participants say current processes hinder their agency’s ability to satisfy beneficiary needs, and they are unable to leverage all available data due to system and/or integration challenges (43 and 44 percent, respectively). IT pros in healthcare are widely displeased with existing infrastructure – just 22

1 Based on an estimate of approximately $1.7 trillion in total healthcare benefits paid out annually by HHS, SSA, and USDA. Calculation based on figures in GAO’s March 2015 Improper Payments report: http://www.gao.gov/assets/670/669026.pdf.
percent of managers say their current system is “analytical” and even fewer, 16 percent, say their system is “intuitive.”

A renewed focus on data integration will yield countless benefits, according to the report. Nearly half of IT pros (47 percent) want to improve data integration, which can improve customer experience (64 percent) by accelerating eligibility requirements (63 percent), and reduce costs by accurately identifying recipients (55 percent). Improved data integration could also yield a 23 percent increase in productivity by making the appropriate data readily accessible to the appropriate people.

“This report is consistent in what our customers are telling us: Complex, legacy infrastructure makes integrating patient information, quality, cost, and other key data either impossible, or unnecessarily costly and slow, resulting in waste and lost benefits. It’s time for agencies to adopt next generation database technology that can efficiently integrate, store, and search these data sets to better serve beneficiaries’ needs while improving the quality of care and business efficiency,” says Bill Fox, vice president, Health Care and Life Sciences, MarkLogic.

Agencies seeking to improve the efficiency of their benefits enrollment systems should follow these recommendations:

- **Audit current systems and processes**: Evaluate eligibility and verification processes to identify inefficiencies and design a path forward
- **Prioritize data integration**: Improved data integration will enhance productivity, improve the customer experience, accelerate eligibility determination, and reduce improper payments
- **Improve collaboration**: For technology improvements to take hold, case workers and IT departments must come together to define needs, devise solutions, and justify investments

“Health and human services agencies need a physical,” says Steve O’Keeffe, founder, MeriTalk. “An annual misdiagnosis of more than $300 billion will leave us all under the weather. It’s time for an IT prescription for change – leverage the benefits of modern IT innovation to deliver results.”

“The Economics of Eligibility: The Cost of Eligibility and Verification Challenges for Government Healthcare Benefits” report is based on an online and telephone survey of 155 social services IT professionals and case/program managers in June 2015. The report has a margin of
error of +/- 7.84 percent at a 95 percent confidence level. To download the full study, please visit: www.meritalk.com/economics-of-eligibility.

About MeriTalk

The voice of tomorrow’s government today, MeriTalk is a public-private partnership focused on improving the outcomes of government IT. Focusing on government’s hot-button issues, MeriTalk hosts Big Data Exchange, Cloud Computing Exchange, Cyber Security Exchange, and Data Center Exchange – platforms dedicated to supporting public-private dialogue and collaboration. MeriTalk connects with an audience of 85,000 government community contacts. For more information, visit www.meritalk.com or follow us on Twitter, @meritalk. MeriTalk is a 300Brand organization.