

Enhancing provider panel cards for employers

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It is no secret that a quality medical provider is the driving force behind achieving the best possible outcome after a workplace injury. There are many ways to evaluate and identify the highest quality providers, but the more critical point is ensuring the utilization of these providers at the time of injury. Certainly, state regulations guide the ability to direct care within each jurisdiction, but traditional provider panel postings offer significant value to help support the direction of care for injured employees.

Historically, industry workers' compensation medical cost containment organizations held strictly to state regulations, which include mandatory provider panel postings and directory distribution in California, Georgia, Pennsylvania, Tennessee and Texas. Most often, an online provider search tool supports the direction of the employer, examiner or nurse at the time of injury. However, agreements between the provider networks and the managed care companies required that all panel postings included network providers.

Among the many issues with this approach is the ongoing concern related to incorrect network provider data. This information is known to be fraught with errors and corrections are nearly impossible to apply, causing panel postings to be out of date soon after they are created. Also, network contracts often prohibit employers from posting panels with "out of network" in-house clinics or local providers associated with good treatment outcomes. In addition, several jurisdictions allow, but do not mandate, panel postings so managed care companies generally do not produce panels for these locations.

Below are the keys to ensuring Sedgwick continues to improve the process:



VALIDATE PROVIDER DEMOGRAPHICS

The network industry continues to have difficulty maintaining accurate provider data. Being able to validate the address, phone information, office hours and whether the provider accepts workers' compensation patients are critical factors when directing care.



MAXIMIZE THE PROVIDER SELECTION

Mandatory panel states determine the type and number of providers allowed to be listed; however, the laws often do not limit the number of providers.



NOTIFY EMPLOYERS OF PROVIDER CHANGES

By tracking providers used on a panel, employers can be sure that they will be notified when a provider moves, retires, stops taking new patients or makes other changes that will impact care.



COMPLETE ANNUAL UPDATES

Reviewing and updating panel providers annually helps ensure all mandatory panels are up to date and follow jurisdictional requirements; and it provides an opportunity to place the best quality providers on each panel.



SHARE PROVIDER PANELS WITH THE CLINICAL TEAM

Provider selection is based on the evaluation and development of panel postings. At Sedgwick, these providers are identified using our five-star quality provider benchmarking and search tool, and shared with our nurses so they can perform prompt referrals at the time of injury to support the best outcomes.



STREAMLINE COMPLIANCE EFFORTS

Maintaining current and historical documentation ensures prompt, global updates when jurisdictional regulatory changes occur.



OFFER PANEL CARD OPTIONS

Making electronic and printed copies available at employer locations helps support the direction of care right at the time of the injury.

By including each of these important elements, Sedgwick's provider panel card postings have helped customers ensure prompt treatment for injured employees while reducing claim costs. Our dedicated colleagues have the expertise to respond to various types of mandatory and customized requests. We have continued to focus our efforts on making the process more efficient, and in 2015, our national panel card team produced 102,000 panels and validated demographics for 194,000 providers. We continue to monitor related regulatory changes and look for ways to improve provider panels for our customers and our clinical team.