

Government Programs

Maximize Your Medicare and Medicaid Business Lines



Successful participation in federal and state government-sponsored programs is increasingly challenging. The continuously evolving regulatory requirements, demanding financial and operations audits, and constant scrutiny make it difficult for payers and medical providers to keep pace, much less maximize profitability.

Our consulting services team has the breadth and depth of expertise to help both payers and medical providers new to this unique market, as well as those with substantial experience, achieve success.

Our Team Is Steeped in Knowledge of Both CMS and Health Plan Operations

Our team's leadership, guidance and support has helped payers launch new Medicare lines of business that subsequently achieved 4+ Star ratings from CMS

Knowledge Plus Experience

Succeeding in government programs entails not only staying abreast of evolving requirements, but also anticipating changes. Having this foresight enables you to proactively strategize how to manage change to your advantage.

Our consultants have worked in leadership positions within both health plans and the Centers for Medicare & Medicaid Services (CMS) where we spearheaded clinical operations, caremodel design, implementing collaborative care environments. and managing operational and regulatory demands. Each team member has a minimum of 15 years of experience which enables us to provide the leadership, guidance, and management skills that will help your CMS business lines to prosper. Our consultants also have experience with medical providers and credentialing to support government enrollment and revenue cycle operations.

Strategize and Implement

We help customers select the right lines of business and products, and help them develop successful applications. This includes writing policies and procedures, training, developing new provider relationships and a network to support new models of care, implementation, and positioning for growth. Our team helps craft policies for:

- MAPD & Special Needs Plans
- Medicare/Medicaid Aligned Incentives
- · Dual Demonstrations

We support your transition to emerging models:

- Value-Based Payments forpayers and providers
- Risk-Sharing Contracts

And we work with you to obtain your network's cooperation and support in achieving high CMS Star ratings and quality health outcomes.

Compliance and Audit Readiness

We help ensure our customers are in compliance with all regulations and are "audit ready."

Our team assists with:

- Compliance Program Design
- Annual Risk Assessment
- Internal/External Audit Work Plans
- · Delegation Oversight
- Monitoring
- Mock Audits in preparation for a CMS Program Audit

We can also help you design and implement a rigorous special investigations unit and policies for the identification, remediation, and prevention of fraud, waste, and abuse.



Insight. Innovation. Transformation.

About Change Healthcare

Change Healthcare (Nasdaq: CHNG) is a leading healthcare technology company, focused on insights, innovation and accelerating the transformation of the U.S. healthcare system through the power of the Change Healthcare Platform. We provide data and analytics-driven solutions to improve clinical, financial, administrative, and patient engagement outcomes in the U.S. healthcare system.