





## COMPLIANCE

Optimize risk identification and compliance program effectiveness.

- Auditing
- Monitoring
- Regulatory Library Management
- Delegation & Vendor Oversight

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## ANALYTICS

Harness disparate data and automatically import it into an integrated analytics tool.

- Emerging Trends Analysis
- Risk Assessment
- Key Performance Indicators
- Executive Dashboards

## OPERATIONS

Automate operational processes across departments and external systems.

- Appeals & Grievances
- Sales Allegations
- Provider Disputes Tracking
- Federal & State Complaint Tracking

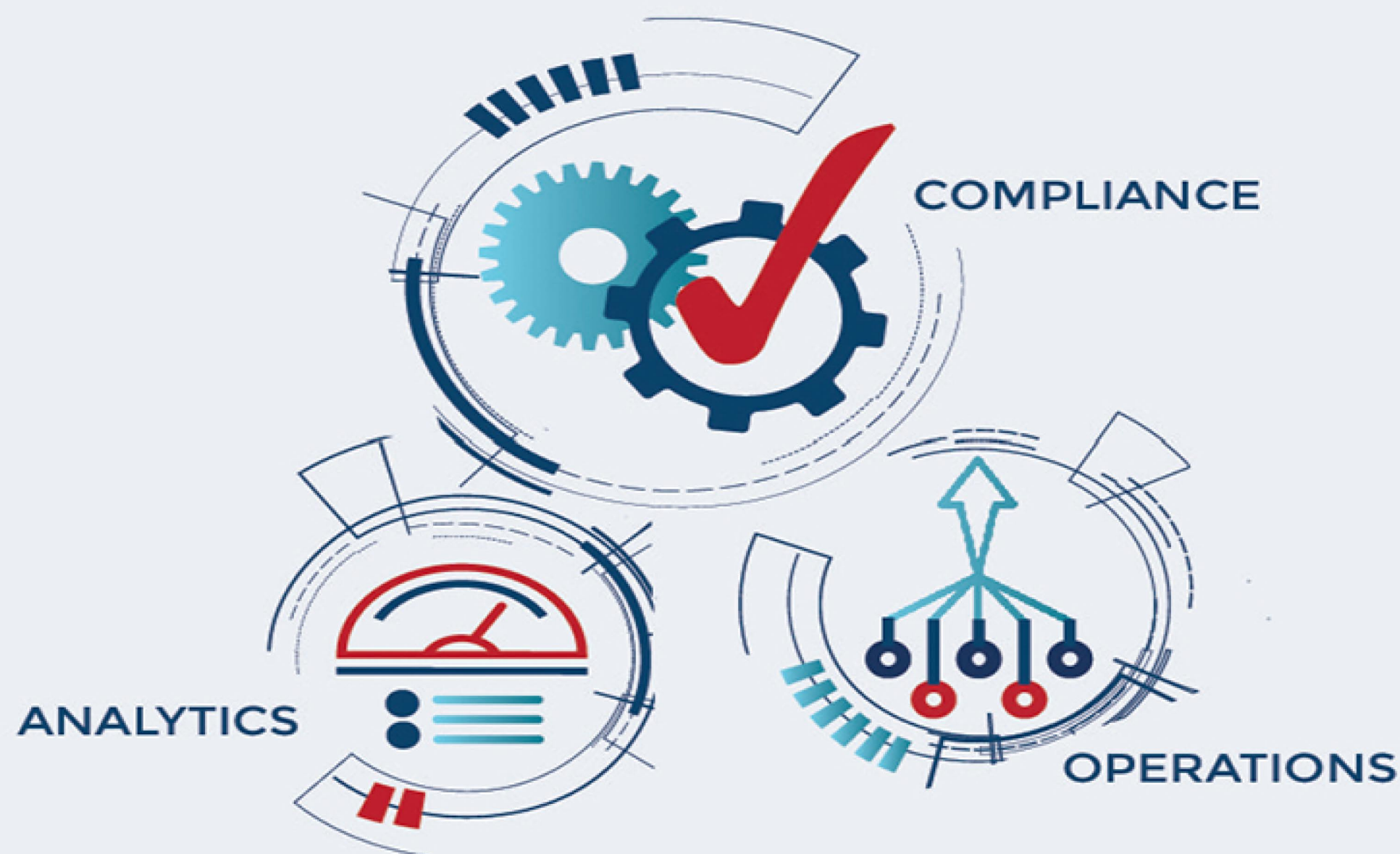
Unit Price	Revenue	Sales Volume	Rev. Increase	HETT201	SUB_801	SUB_009
\$ 2,178	890	\$ 120,020.00	9%	1.23E+00	12	45%
\$ 1,000.00	654	\$ 44,545.00	34%	5.6E+01	343	67%
\$ 5,540.00	454	\$ 4,324.00	4%	4.6E+01	3,434	55%
\$ 34,344.00	454	\$ 65,464.00	3%	1.2E+01	243	65%
\$ 43,232.00	34	\$ 43,444.00	34%	4.3E+01	33,332	67%
\$ 657,465.00	878	\$ 4,545.00	55%			
\$ 2,178	890	\$ 120,020.00	9%			
\$ 1,000.00	654	\$ 44,545.00	34%			
\$ 5,540.00	454	\$ 4,324.00	4%			
\$ 34,344.00	454	\$ 65,464.00	3%			
\$ 43,232.00	34	\$ 43,444.00	34%			
\$ 657,465.00	878	\$ 4,545.00	55%			





# Your Partner in Healthcare Compliance

Inovaare partners with healthcare organizations to deliver solutions that automate the entire compliance life cycle. Its cloud-based platform allows healthcare payers and providers to configure processes across different departments and systems, populating compliance, operations and analytics tools with real-time data to guide oversight and generate compliant reports at the touch of a button.



## HEALTHCARE EXPERTISE

Inovaare has been serving the healthcare organization industry since 2008, offering over 100 years of combined compliance experience to consult and guide clients through each step of every process within an ever-changing regulatory environment.

## CONTINUOUS COMPLIANCE

Configurable software modules form a centralized compliance system that optimizes risk identification, supports operations and displays intuitive analytics dashboards. This facilitates better decision making to ensure healthcare organizations are continuously compliant.





### AUDITING AND MONITORING

Efficiently audit or monitor compliance readiness by centralizing and automating critical processes. Merge different workflows and maintain a system-wide overview of all compliance activities. This cloud-based software module empowers healthcare compliance teams to:

- View audit and monitoring process data in real time
- Track findings, recommendations and action plans
- Generate on-demand reports and analytics

### CORRECTIVE ACTION PLANS

Easily record and track each corrective action plan (CAP) for events resulting from the internal or external audit or monitoring processes. CAP ensures and demonstrates remediation of any deficiencies experienced. By centralizing, streamlining and automating processes, health plans can:

- Monitor all CAP life cycles
- Collaborate among departments
- Expedite CAP resolution

### UNIVERSE MANAGEMENT

Accurately generate universes, a fundamental requirement for regulatory compliance. These essential compliance tools monitor, analyze and oversee regulatory requirements. Configure and scrub any universe for validation at the click of a button to:

- Improve data-integrity testing
- Optimize workflows
- Identify errors early

### DELEGATION OVERSIGHT

Systematically conduct audits and perform file reviews of first-tier, downstream and delegated (FDR) entities to create a culture of compliance within the areas of Credentialing, Utilization Management, Quality Improvement and other delegated functions. This essential software module can:

- Deliver real-time audit statuses
- Lower audit backlog, efforts and timelines
- Help health plans perform pre- and post-delegation audits





## RISK MANAGEMENT



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### RISK ASSESSMENTS

Confidently guide healthcare organization leaders to identify, assess and mitigate risks relevant to their businesses. Real-time assessment capabilities facilitate better decision making while templates, metrics and workflows help compliance teams to:

- Identify, prevent and manage corporate risks
- Maintain full audit trails
- Lower risk levels to reduce direct costs

### REGULATORY LIBRARY

Keep current on regulatory guidance to ensure consistent compliance. Easily upload CMS Health Plan Management Systems and state notices to the Regulatory Library. This solution improves regulatory guidance visibility and incorporates reporting tools so compliance teams can:

- Streamline review processes
- Coordinate communications among all entities
- Improve timely regulatory-memo responses

### CONTRACT MANAGEMENT

Efficiently manage contracts with a cloud-based solution that tracks and monitors compliance as well as regulatory quality management in real time. A central compliance system connects different departments and systems so health plans may access all contracts to:

- Manage contract life cycles
- Implement contract analytics
- Track all contract parameters

### POLICIES AND PROCEDURES

Officially control policies and procedures (P&P) for routine and ad hoc updates that fortify implementation of new regulatory requirements. Automated processes and a centralized repository provide company-wide access so healthcare organizations are enabled to:

- Establish rules for automated P&P reviews
- Collaborate across departments
- Ensure adherence to current policies and procedures





## OPERATIONS



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### APPEALS AND GRIEVANCES

Access and monitor appeals and grievances in real time with a cloud-based solution that provides instant data visibility and access. Configured to meet evolving regulatory changes, this module provides a seamless experience for compliance teams to help them:

- Adhere to compliance deadlines and requirements
- Monitor data in real time
- Generate reports with the touch of a button

### COMPLAINT TRACKING

Save time and effort with this module that empowers health plans to manage the end-to-end complaint process. By enabling compliance teams to quickly download CMS Health Plan Management System cases and upload required responses, health plans can efficiently:

- Track cases at each stage of the complaint process
- Route case assignments for review
- Achieve complaint responses within required time frames

### PROVIDER DISPUTES

Expediently resolve post-service payment disputes between the provider and health plan, which would be regulated by a specific written agreement. By monitoring contracted provider disputes and resolutions outside of the typical A&G process for non-contracted providers, health plans can:

- View resolutions according to provider contracts
- Improve contracted provider relations
- Establish effective standardized communication

### SALES ALLEGATIONS

Efficiently track all sales allegations and implement compliant workflows with this error-minimizing module that embeds classifications of sales allegations so health plans can ensure complaints are secured, investigated and closed properly. This helps compliance teams to:

- Document investigation details
- Define rules to rate offenses and disciplinary actions
- Track and trend sales allegation outcomes





## ANALYTICS

### EXECUTIVE DASHBOARD

Make better decisions more quickly with a centralized, configurable dashboard that intelligently organizes real-time key performance indicator data. Measure key performance targets vs. actuals to automatically highlight areas of concern so healthcare leaders are empowered to:

- Search KPI data to explore new data relationships
- Collaborate across departments with customizable reports
- Review compliance health through one centralized screen

### ACCURATE REPORTING

Quickly generate reports with the touch of a button and compile compliant audit reports from templates with preconfigured metrics. Streamline the process so compliance teams can readily prepare for audits on demand. Easily automate business requirements to:

- Optimize data gathering
- Eliminate data entry errors
- Measure risks correctly

### KEY PERFORMANCE INDICATORS

Establish order with an easily configurable solution that connects, captures and organizes business data across departments and systems. Compliance teams can pull real-time data and automate KPI data analysis processes, which helps healthcare organizations to:

- Discover new data relationships
- Compare delegated entities and highlight trends
- Receive risk alerts when KPI metrics change

### COMPLIANCE ANALYTICS

Harness a wide range of data and automatically import it into an integrated analytics tool that displays critical health-plan compliance information in real time so compliance personnel can make faster, better-informed decisions. This analytics tool allows health plans to:

- Customize KPI metrics
- Automate compliance reports
- Embed audit rules for continuous monitoring





### What sets us apart?

**Inovaare** simplifies complex compliance processes by designing configurable solutions so healthcare organizations can collect real-time data across internal and external departments, creating one centralized management system. A comprehensive suite of HIPAA-compliant software solutions features best-practice regulatory processes to help healthcare organizations efficiently meet their unique business requirements, sustain audit readiness, reduce non-compliance risks and lower overall operating costs.

Far from being a one-and-done software vendor, **Inovaare** has been serving health plans and healthcare providers since 2008, offering over 100 years of combined compliance experience to consult and guide clients through each step of every process within an ever-changing regulatory environment. Since each organization's compliance demands are as complex as the regulations they need to comply with, **Inovaare** tracks every shift in the regulatory landscape so its automated applications consistently satisfy evolving reporting requirements.

**Inovaare's** unparalleled responsiveness and agility ensure healthcare organizations won't get caught off guard or unprepared for regulatory audits. **Inovaare** studies their detailed requirements and objectives to deliver solutions based on current regulatory requirements and protocols so health plans and providers remain in compliance, avoid fines and improve their bottom line.

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