

Inovalon Payer Cloud

A cloud-based suite of software and analytics for health plans to improve outcomes across quality measurement, risk score accuracy, and value-based care.

<https://www.inovalon.com>

Overview

The Inovalon Payer Cloud is a comprehensive, cloud-based suite of software solutions and analytics specifically designed for health plans (payers). Built on the Inovalon ONE® Platform, it transforms traditional, disconnected payer workflows into data-driven processes to support key organizational goals, including improving clinical quality metrics, risk score accuracy, and value-based care program management.

Key Features and Capabilities:

Converged Quality: Provides the market's leading HEDIS® certified engine for CMS, NCQA, and state data submissions, empowering teams with quality measurement software to manage and improve quality ratings.

Converged Risk: Offers advanced analytics and flexible member engagement solutions to ensure efficient and accurate documentation of member conditions, supporting risk adjustment programs (CMS-HCC, HSS-HCC, etc.) and audit readiness.

Converged Provider Enablement: Translates organizational goals to the provider point of care with shared insights into patient care quality, documentation, program performance, and utilization metrics to align health plans and providers in value-based care.

Converged Outreach: Consolidates all intervention activities and vendors to ensure members receive the right interaction at the right time, making member outreach easier and more patient-centric.

Inovalon Healthcare Data Lake: Provides a single source of truth to store, enrich, and analyze complex claims and clinical data, leveraging the company's extensive primary source healthcare dataset.

Electronic Record On Demand: Clinical data extraction software to access digital medical records rapidly, securely, and cost-effectively for use in quality and risk programs.

Target Users and Use Cases:

The primary target users are large to enterprise-level **Health Plans** and other **Payer Organizations**. Key use cases include Quality Measurement & Reporting (HEDIS/Star Ratings), Risk Score Accuracy &

Adjustment, Value-Based Care Program Management, Population Health Analysis, and Member & Provider Engagement.

Key Features

- Converged Quality (HEDIS/NCQA Reporting)
- Converged Risk (Risk Adjustment/HCCs)
- Converged Provider Enablement (Value-Based Care)
- Converged Outreach (Member Engagement)
- Inovalon Healthcare Data Lake
- Electronic Record On Demand (MRR)
- Real-Time Analytics and Dynamic Business Intelligence

Pricing

Model: enterprise

Pricing is not publicly disclosed; contact Inovalon sales for a custom quote based on the client's specific needs, size, and the suite of solutions required.

Target Company Size: enterprise

Integrations

FHIR-based APIs, EHR Systems (via API), PointClickCare Marketplace

Compliance & Certifications

HIPAA, HITRUST, SOC1 Type 2, SOC2 Type 2, NCQA HEDIS Measure Certification, CMS/State Regulations Compliance

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