



# Veradigm Payer Solutions

An end-to-end suite of solutions for health plans and payers, focusing on risk adjustment, quality management, clinical data exchange, and EDI clearinghouse services.

<https://veradigm.com>

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## Overview

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Veradigm Payer Solutions is a comprehensive, end-to-end solution designed to help health plans, payers, PBMs, and insurance companies balance cost control with the goal of providing high-quality care and optimizing member health outcomes. The suite is built on the Veradigm Network, which drives value at the intersection of payers, providers, and life science organizations.

### Key Components and Capabilities:

**Health Plan Analytics (Veradigm Quality Analytics):** Identifies gaps in quality measures like Star Ratings, Quality Rating Systems, and Pharmacy Quality Alliance measures. It includes an NCQA Certified HEDIS engine to help close quality gaps and improve quality scores cost-effectively.

**Risk Adjustment (Veradigm Risk Adjustment Analytics):** Assists finance, medical management, and quality teams with precise, advanced risk adjustment algorithms built from broad data sets for superior accuracy, aiming to maximize financial performance and clinical outcomes.

**Bi-directional Clinical Data Exchange (Veradigm eChart Courier™):** Improves efficiency by automating the medical chart retrieval process for HEDIS submissions and other data collection, facilitating high-speed clinical data exchange between payers and providers.

**Clearinghouse & EDI (Veradigm Payerpath's EDI Gateway):** Solves Electronic Data Interchange (EDI) challenges by creating a single point of contact for seamless connection with providers, regardless of their clearinghouse. It offers unified file processing and pre-adjudication edits to simplify claims and reduce errors.

**Care Gap Alerting (Veradigm Payer Insights):** Integrates patient-specific care gap alerts directly into the Electronic Health Record (EHR) workflow of network providers, delivering real-time, actionable insights to improve care and reduce administrative overhead.

The platform leverages newer technologies like Artificial Intelligence (AI) and machine learning to enhance predictive modeling, allowing payers and providers to identify high-risk patients sooner. It is

committed to embracing FHIR standards and industry-standard protocols like APIs to streamline data sharing and interoperability.

## Key Features

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- Risk Adjustment Analytics
- Quality Management & HEDIS Submissions
- Bi-directional Clinical Data Exchange (eChart Courier)
- EDI Clearinghouse & Gateway (Payerpath)
- Care Gap Alerting at Point-of-Care
- Health Plan Analytics & Reporting
- AI/ML-Enhanced Predictive Modeling
- FHIR Standards Interoperability

## Pricing

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**Model:** enterprise

Pricing is not publicly disclosed and is handled via a custom quote based on the specific solutions needed (Analytics, Clearinghouse, Data Exchange) and the scale of the payer organization.

**Target Company Size:** medium, enterprise

## Integrations

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All major Practice Management (PM) systems, Electronic Health Record (EHR) systems

## Compliance & Certifications

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SOC2, ISO 9001, EHNAC, ONC Certification Rule

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