

Hospital Services Corporation: Think Piece. April 2022

Trend Alert: Is your CVO telling you they are just too big and important for your size hospital?

One common reason that health systems acquire and consolidate is to gain economies of scale in their purchasing and negotiating power. Without taking away the "localness" of a hospital or health system, associations can help create the similar efficiency by negotiating on behalf of all of their members, including hospitals and providers both large and small.

Experts in Credentialing and Provider Enrollment have noticed a trend taking place in communities across the U.S., one of which directly affects healthcare systems with a provider roster of 100 or less providers. Despite that each provider file requiring credentialing and verification should be given the same diligent attention to maintain accuracy and high quality, massive national credentials verification organizations are downsizing their numbers of customer accounts by imposing a provider minimum on healthcare organizations. Often, the hospitals is unaware of the change until they receive a letter or notification that they will no longer be covered and will not have access to the services needed for verification. Some large CVOs have even sent letters mid-process requiring the verification of physicians, advanced practice providers, behavioral health providers, certified nurse anesthetists, and other healthcare professionals. Given the already stretched workforce at most hospitals, this created another added burden to the staff and an interruption of workflow.

The trend is counter-intuitive as we might assume the larger the organization, the more automation. The catch is that the human part of credentialing includes setting up a new account and working with a frontline team at the hospital that may turn over more often than in the past given these changing times. our partnership with state associations have helped solve both issues by working on a competitive contract and rates for Credentialing and Provider Enrollment with an expert who employs a flexible process where no organization is too big or too small and has a quick start process orientation.

Hospital Services Corporation comes alongside a hospital's team or designee with automation for the components of the verification process that do not require the human touch, and expertise in the areas that do. As a certified NCQA CVO with "perfect files"*, Hospital Services Corporation processes initial applications for privileges in an average of 18 days. HSC software developers adapt the software to the changing needs of the healthcare industry, and the paperless process ensures accuracy and ease starting with an initial request all the way through transfer of information back to the hospital team. Most importantly, HSC Credentials Verification staff have the knowledge and skills to shorten the time for your new providers to be verified so that they may treat patients faster. If you prefer, you can actually interact with another human at Hospital Services Corporation as their Customer Service team loves talking to people!

In a time when healthcare systems need to be as resourceful and efficient as possible, Hospital Services Corporation can provide a user friendly and exceptional solution to the provider roster minimum.

*March 2021 quote of from NCQA evaluator assigned to evaluate Hospital Services Corporation.

Hospital Services Corporation has been NCQA certified since _____ and focuses on hospitals of all sizes in 19 states, many via contracts designed by Hospital Associations and Shared Services entities.