



Clarify Health Data Description

This is supporting information for the 2023 Health Data for Action (HD4A) Call for Proposals. To apply, or for more information about the funding opportunity, please visit www.rwjf.org/cfp/hd4a4.

Within the Clarify Health platform we have 18 payer institutional rate files (MRFs) loaded, refined and cleansed for outliers, with Institutional and Professional rates available for five of the largest plans covering a significant portion lives and geographies – UHC, Centene, BCBS and affiliates, Aetna and Cigna, this reflects >500TB of data ingested.

This data can be delivered on a per-geography basis via a flat-file, or through our software tool - Clarify Rates.

The Clarify Rates tool allows the user to segment and filter data through no-code queries. The data can then be visualized or exported for further analysis or upload into another system. We allow for the user to simply select the filters and configurations from a set of dropdowns and the tool automatically generates a report based on the user defined selections.

CLARIFY RATES DATA MODEL TAKES INTO CONSIDERATION THE FOLLOWING:

- We leverage CMS' methodology for Medicare benchmarking while also adjusting for geographical factors.
- In addition to the Percent of Medicare benchmark, we have to ability to show the contracted rate amount.
- In addition to the core rates data, we have to ability to layer in high-level utilization data to provide context to the negotiated rates. You will be able to see negotiated rates, as well as the service volume which will allow you to compare rates between competitors and Payers, and associated service volumes. This grants the ability to understand the true opportunity given the rates and volumes between competitors which allows you to build and inform negotiation and contracting strategies.
- Payer Rates data is updated 2-3x per year with new data obtained from the latest released Payer MRFs.

THE CLARIFY RATES PRODUCT OFFERS THE FOLLOWING FUNCTIONALITY:

- The ability to compare at the Facility, Service Line, and/or Code level to directly compare rates between systems/facilities and Payers.
- The ability to compare rates between competitors directly in our UI, configuring tables to include the level of detail needed whether down to specific codes, or an aggregate across all codes and classifications
- Filtering capabilities:
 - By Specialty Physician Specialty, Service Line, and/or Service Code.
 - By Region Provider State, Provider County, MSA, Provider City, and/or Provider Zip (we also have the ability to filter to a custom set of Provider NPIs).
 - We have to ability to benchmark as a Percentage of Medicare.
- Data export in .csv format. For queries >10,000 rows, we have a Bulk Extract tool.
- We also offer a feature called Analysis Builder to superusers that will allow your organization to build custom analyses or
 visualizations to support custom analyses that may require further specificity or different visualizations. These analyses can be
 exported, and visualizations can be displayed in custom spotlights, which can be shared across the organization or kept in a user's
 private folder.

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To ensure our customers success, we have a robust Customer Implementation and Success team who will assist in providing initial customer configuration and provide ongoing guidance and support.

Clarify Rates data is best suited for researchers who are trying to understand:

- the general landscape of pricing transparency
- the differences between payer reimbursement rates across all service lines, DRG and CPT codes, % of Medicare, site of care, facility
- ways to make healthcare more shoppable for the consumer / patient given how large these payer MRF files are (the average person, heck even a \$5B hospital cannot make sense of this publicly available data)
- evaluation of the changes in reimbursement rates as price transparency evolves and grows

Data Dictionary: The data dictionary is available here.