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CAQH

We power the business of healthcare

For 25 years, our work has eliminated billions of dollars in waste and inefficiencies earning the trust of health plans, providers, associations, and even our competitors

75% eligibility data on U.S. covered lives

80% U.S. MDC, DCO, and DMDs share their data

Member logos: Humana, UnitedHealth Group, Aetna, Centene, Elevance Health, Verity, ADA, AHIP, AMA, Geisinger, Medication, blue, Cigna, Interoperability, Better Access to Care, Payment Accuracy, Data Quality, Provider Directory Accuracy, Network Adequacy Standards.

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PROVIDER DATA

CAQH Provider Data Application is Utilized Nationwide

4.8M+ Provider data records

CAQH Application Utilization*

- 24 CAQH Accepted
- 15 Mandated or Codified
- 12 State specific applications enabled by CAQH

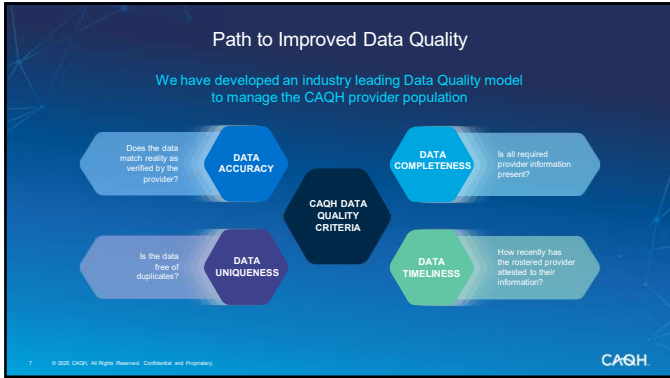
Total is 51 (50 States + DC)

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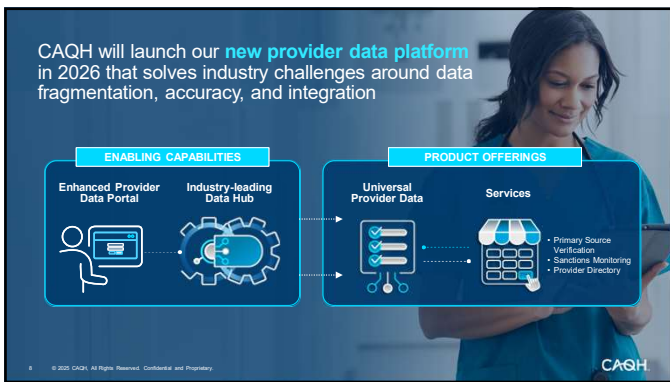
Transforming Provider Data Management for Health Plans & Providers

- Improved Data Accuracy, Security & Compliance**
 - Reduced claim denials, payment delays & compliance risks associated with data discrepancies
 - Nimble configuration ensures timely NCOA, CMS, and state regulatory compliance
- Centralized Data Source**
 - Single source of truth for provider data
 - Real-time updates & automated credentialing validation
- Operational Efficiency & Cost Savings**
 - Reduces costs of provider outreach and data reconciliation
 - Integrated with existing systems reducing operational friction
- Scalable, Future-Proof Technology**
 - Built on a cloud-based, modular architecture, allowing for flexible & scalable adoption
 - Future-ready AI & automation capabilities drive continuous process improvement
- Improved Member Experience & Quality of Care**
 - Members have access to accurate provider directories
 - Reduces misrouted claims and payment issues (from provider data errors)

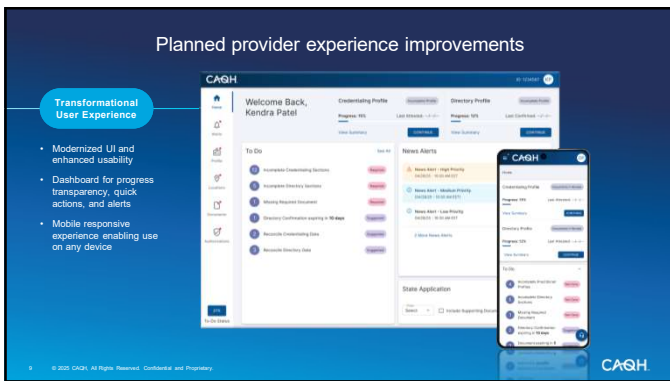
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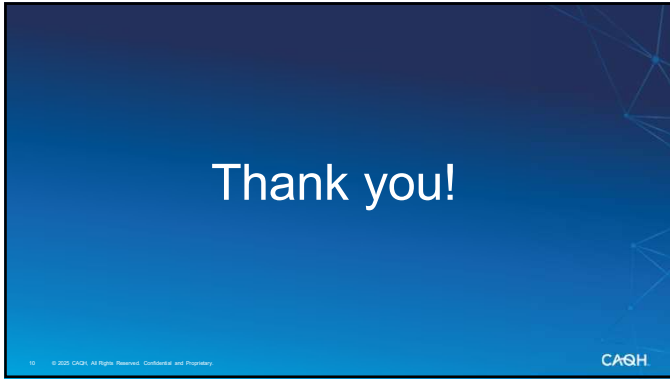
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