

# Elion

## Buyer Review Transcript

<b>Product Reviewed</b>	Medallion; andros
<b>Integrations Reviewed</b>	N/A
<b>Other Products Mentioned</b>	Verifiable
<b>Date</b>	07/14/2023
<b>Expert Role</b>	Operations Manager
<b>Care Model</b>	Tech-enabled behavioral health
<b>Payment Model</b>	Fee for service

**Today we're going to be talking about Medallion and how it's being used at your company. To start, can you give some context on the company and your role there?**

I work at a behavioral health company. I'm an operations manager and I oversee our provider credentialing and licensing teams.

**What type of clinicians are you licensing and credentialing?**

Mental and behavioral health clinicians. So marriage and family therapists, social workers, psychologists, mental health counselors, and clinical counselors.

**When did you purchase Medallion and how long have you been using the platform?**

We've been using them for about a year now.

**Can you give an overview of the product and how you use it?**

Yeah, they support the provider licensing process. This involves taking in all the information from the providers and then packaging it up to send over to the Department of Health (DoH) or wherever it might need to go. They then do the continuous follow up with both the clinician and the Department of Health to get the license approved. So in effect they manage all the back and forth with the DoH, which saves us a lot of time.

They have a platform where you invite a provider into it (typically via email), and it captures all of the required information. On my end, I'm able to track where they are in the process and see all

the activity. Sometimes the activity is a request to the clinician, sometimes it's "Hey, I emailed the board for an update", or it's asking a question for us. I'm able to track progress all the way up to the license being issued.

**Are you just working with Medallion on the licensing process? Or are you using any of their other products or services, such as credentialing?**

We do credentialing in house. Our primary source verification vendor is andros. We evaluated Medallion when we were looking at credentialing, but we didn't go with them.

**Interesting. Let's circle back to that in a bit. On the licensing front, were you involved in the procurement process for Medallion?**

Yes, I did not lead it, but I was involved in the evaluation process. To be honest, there's not a ton of vendors that do this, especially for behavioral health specifically. I think it came down to Medallion and Verifiable. Verifiable was great, but they were double the price. We were able to negotiate down with Medallion. Also, at the time, we weren't sure if this was something we wanted to continue with, so we didn't want to go with a long contract, which Medallion was ok with. Medallion was also a little more flexible on the number of licenses we needed to commit to. These were the primary reasons we went with them.

**Got it. One clarifying contextual question: Medallion sounds like it's both a technology product and a service. Is that right? That is, you're using their platform, but it's their service team that's doing the legwork on the licensing. Is that the right understanding?**

Yeah, and they also offer other features that we don't particularly use. For example, you can upload your entire clinician roster into their platform and it'll track when their license is going to expire and send your clinician an email. We do that in-house already for the bulk of our clinicians, and because it's such a small number of clinicians that we're requesting new licenses for, we haven't utilized that service.

**Got it. So when you were evaluating Medallion versus Verifiable, was it predominantly on their technology and their service?**

We were essentially outsourcing this licensing process because we didn't really have, and still don't have, any experts in the space. Also, it's a very long process to get licensed in another state. There's a lengthy application and a lot of requirements. One of our values is to try to take as much of the work off the clinician as possible, which Medallion does by taking all the information and then sending the application on the clinicians' behalf. This is much easier than the clinicians having to print things out, fill them in, send them, and figure out questions on their own. Medallion is helpful to us because it takes a lot of work off the clinician and reduces confusion since they're not having to search for information on their own.

**Got it. When you were evaluating Medallion and Verifiable, did you notice any material differences between them in terms of either strengths or weaknesses from a technology or service perspective?**

The platform for Verifiable was definitely a little more user-friendly. But they have multiple services and given that we were only using the licensing piece for Medallion, user-friendliness wasn't quite our top priority. But for the most part, they both did what we needed them to do, which was to intake information and send applications and follow up on them for us. It ultimately just came down to the price and flexibility.

**So now that you've been working with Medallion for a year, how would you characterize the experience?**

Up and down. They're really good if you stay on top of them with weekly check-ins. There was a period earlier in the year where they were slipping a little from our SLAs. But once we raised the issue, they put more focus on our account and performance improved.

I will say that everyone we've worked with there has been really pleasant. I've enjoyed working with them, and performance has been better since I raised the flag.

**So it sounds like it's mostly been a service issue with them?**

That's right, rather than a platform or technology issue.

**Can you describe what the platform does, what it looks and feels like, and what your experience has been with it?**

Sure, when you log in, it looks like a database. It lists all of your clinicians who you've invited to the platform. It has the dates for every step they're in the process and you can see the activity, so you can see everyone who's talked to each other and pull that log up. It's easy to use. They also send an email every Monday to me and my team outlining any outstanding tasks from clinicians. I will say that a lot of Medallion's reminder emails to clinicians aren't super personalized and don't always have a lot of information, which is why we decided to start sending emails on our end as well. The feedback we've heard from our clinicians is that it's really easy to input all the information. Come to think of it, we've never heard any issues in terms of clinicians being able to log in and input everything.

**Got it. With regard to clinician communications, it sounds like when they do have to reach out to the clinicians, it either comes across as automated or impersonal. Have you rerouted all follow-up with the clinicians through your team so you can put that more personal touch on it, or do you double up – that is, they send their impersonal communication and then you send your more personalized version?**

I think some of Medallion's process is automated. Every Monday, their platform generates a report about each clinician who is missing a certain task. Our team, which has had prior interactions with these people, will then reach out with personalized messages offering support. This provides an extra level of support, particularly as Medallion's support team juggles multiple accounts. We strive to minimize the administrative burden on clinicians, which is why we add our input to Medallion's automated processes.

**That makes sense. Regarding the service challenges you faced, do you know what caused those? Was it turnover in their team?**

They weren't completely transparent about it. It seemed like they just weren't meeting the agreed upon timelines. After we complained, suddenly our licenses became a priority and were being followed up on at least once a week, which exceeded our service level agreement (SLA) of 10 business days. My guess is it was probably due to turnover and just some general slipping of service.

**It sounds like they were responsive when you raised the issue.**

Yeah, they were. They brought in people that week to have discussions and gave us some credits back as well, meaning we didn't pay for the licensing support on the ones that they weren't following up on. So they mitigated the situation, but it was unfortunate at the time.

**How was the onboarding and account setup process?**

It was quite simple because our interaction with the platform is minimal. We only have to invite clinicians and monitor their progress. The onboarding included a 30-minute call with their onboarding team and sales manager to discuss the platform's features. However, if we were importing our entire clinician roster or tracking additional details like license expiry and continuing education, the process might get more complicated.

**What was the reason you didn't use any of Medallion's other capabilities?**

We track all of our clinicians' credentialing and licensing information on our own internal system. And we use andros for primary source verification for credentialing. So it didn't make sense to track all the licensing information on a different platform.

**You mentioned that behavioral health licensing is trickier, with fewer vendors offering this service. Why is it more challenging?**

There's no standardization in mental health licenses, which is a significant issue in the U.S. Requirements vary by state, even for the same license. For example, let's say you have a license in Washington. Idaho requires a higher number of supervision hours, so you're unable to get the same license there. And testing can be challenging as well. California uses its own tests which differ from what other states use.

We've tried to build our own knowledge internally, going into the various states' Department of Health websites and documenting all the requirements. But it's a huge challenge. Medallion doesn't seem to be fully versed in it, and I don't get the sense that they have that many deep behavioral health people. We've spoken to other consultants and it doesn't seem like there's anyone who truly does it well because the root issue is all the variation in requirements that exists across different states. On top of all of this, there can be extremely long lead times for licensing, with wait times of a year to get your license approved in some states.

Medallion's assistance in filling out applications for clinicians has still been very valuable. They've had to go on a bunch of wild goose chases on our behalf to help resolve random issues. For example, there was one situation where a provider who was licensed in Ohio was trying to get approved in Washington. However, they'd taken the relevant test in 2004, and this test was no longer accepted by Washington. There's a lot of nuances like this that need to be resolved, which makes it a really challenging service to offer.

**This is surprising to me because there's such a huge focus on mental health these days and so many people are trying to expand virtual mental health coverage that I would think there's a tremendous need for this service.**

It's a big focus in legislation right now. There are a couple of pacts happening at the moment that people are trying to get passed. There's the psypact, which is for psychologists specifically. A good number of states are a part of it. But the issue is you still have to apply, so if your state is in it and you're trying to get licensed in another state who's also in it you have to apply to the pact and there's still a process. And then there's another one for Marriage and Family Therapists, but it's only in three states right now. So people are definitely working towards it but it's still, to be honest, such a chaotic situation.

**Anything else to say on the licensing front that we haven't covered?**

Medallion does the basic things we need them to. I wouldn't say they're the best ever, but really the only two we found that do behavioral health licensing were Verifiable and Medallion. There's definitely a lot of other vendors that do physician or nursing licensure and stuff like that. But Verifiable and Medallion were the only ones that did behavioral health when we did our search.

**So shifting gears to credentialing. I'll start by asking a basic question: when you reference credentialing, are you talking about credentialing with respect to your own organization – that is, you credential your own providers to be comfortable with them delivering care on your behalf? Or are you talking about it with respect to payer-required credentialing?**

I'm referring to payer-driven credentialing. Payers require our providers to be credentialed with them. We're delegated with all of our payer partners so we manage the process ourselves.

**Got it. I'd love to understand the history there, including what you guys decided to keep in-house versus what you decided to outsource to a vendor, as well as how you thought about andros versus other vendors.**

Sure, I was responsible for building the team. I started and they were like, "figure this out" a few years ago. We used to just go through our payer partners' credentialing process, which is different for every single payer and is just generally a mess.

We had heard about delegation, and found a consultant that worked through the process before. I worked with them to learn the process and get it working.

There are a ton of steps to become delegated:

- You have to have a committee that represents your clinical community
- Your delegation committee needs to be chaired by an MD
- You have to have a primary source verification (PSV) vendor that runs a bunch of checks, including their experience, education, criminal background, and more. The vendor needs to be NCQA certified as well.
- You need policies and procedures that outline how you run your credentialing process

When it comes to the vendor, we were working with a consultant that showed us the industry folks that do it. A lot of people actually do the primary source verification. I talked to a few, but the platforms were horrendous. So it really came down to Medallion, andros, and Verifiable. They all do primary source verification. At the time Verifiable didn't have full NCQA certification and wouldn't for another six months, which just didn't work for our timeline. The sales rep at Medallion was very off-putting. So really, it came down to andros.

andros is the standard in the industry. They're like Epic in the EMR world, not perfect but they do it pretty well. So we decided to work with them. Their training is a bit more in-depth because of how you have to upload your providers into the platform and manage what comes back once the checks are completed. They offer a lot more support than we use from them as well. We pretty much just use their platform and the verification process. They offer a lot more than that, for example they'll help you to become delegated and build out your policies and procedures, as well as manage payer audits. We've preferred to keep this all in-house. They've been pretty good to work with overall and their account management team is amazing.

**Can you explain the credentialing workflow? What do you do in-house versus what does andros manage?**

When we hire a clinician, they have what is called a CAQH profile. I like to call it the "common app" for clinicians. It houses all their work history, education, certifications, references, documents, and insurance. It lives with them across any job that they go to; they don't have to redo it every time. I'd say about 95% of the clinicians we work with have a CAQH profile when they come to us. We just need them to make a few updates to it.

Then, in terms of the process, the following happens:

- We first review their CAQH profile to ensure there are no issues
- We get their CAQH profile number and upload that into andros once a week.
- From there, andros pulls the information from CAQH and starts running all of the primary source verifications, which takes probably three to five days unless someone is flagged
- We get a report from andros once a week that tells us whether a clinician's PSV came back clean or whether there are flags that need to be reviewed
- For those that are clean, our credentialing chair signs off
- Those that are flagged go to our credentialing committee who decide whether to approve or deny the clinician
- Finally we send updated rosters of our clinicians to the payer, usually once a month

andros will help with payer enrollment if you want them to, but given the intricacies of some of our payer contracts and the relatively low volume on our side, we prefer to keep this in house for now.

**Can you describe how the PSV process works? What evidence are they providing specifically?**

For the education checks, it involves using databases such as the National Clearinghouse. For reporting entities, they use databases like NPDB and CMS. Most of these are public, so anyone can look at them. There's also a regular background check involved. Part of the process is automated on their end as they have access to these databases and can pull information. But they also have a team to scrutinize any files that have issues.

**What led you to work with a vendor to manage the PSV process in the first place instead of keeping it in-house?**

The vendor needs to be NCQA certified and this involves meeting a number of rigorous criteria. Some large companies get NCQA certified themselves and bring it in-house, but the majority of those I've spoken to, including larger companies, use a PSV vendor. To bring this in-house, not only would we need a large team, but we'd also have to get NCQA certified. Given the level of difficulty and time required to get certified, I don't think it would be worth it at our size.

**That makes sense. So overall, it seems like you're pleased with andros. Are there any aspects you dislike or think could improve?**

Good question. I've had a very positive experience with andros. They are very communicative and prompt in addressing any issues. Anytime anything goes wrong, even if it's just like a small hiccup, we get an email immediately from our account manager letting us know what's happening. This happens even for issues that aren't impacting us, which I really appreciate.

They've also been accommodating with making changes to their platform that suit our specific needs. For example, they've been able to make some backend changes on our reports that are tailored to some of the specific nuances of our business.

They are not the cheapest option. We looked at some other cheaper options, but they had really awful platforms. We've just extended our contract with andros for another three years, and I have nothing but good things to say.

**That's helpful. So, it sounds like you plan to continue working with andros for a while. What about Medallion? Do you anticipate staying with them for the next couple of years?**

We're in the process of negotiating a contract with Medallion. We're still trying to figure out our exact licensing needs going forward. Assuming we continue to need support, we will probably keep them on with a year-to-year contract.

Medallion is pushing us to sign a larger contract, something like 100 licenses. But the reality is that we don't need to add licenses for every one of our clinicians, so our demand is relatively low. If our needs increase significantly, we might consider bringing this in-house, as that would justify hiring someone to manage this full-time.

**Do you need to integrate either of these solutions with other platforms? For example, some RCM solutions integrate with provider data management solutions to track things like credentialing.**

We don't require any additional integrations since most of our systems are built in-house. Both Medallion and andros integrate with CAQH and can pull all necessary information from there, which is helpful. But beyond that, we haven't explored other integrations in-depth.

**How does the pricing structure work for both of these companies?**

Medallion prices on a per license basis. We pay any passed through licensing fees along with a support fee. We were able to negotiate a low support fee with Medallion at the start.

andros operates differently, using what they call a credit. Essentially, each time you credential someone, it costs a credit. Since we re-credential clinicians every three years, we must account for the initial credentialing and any re-credentialing. So as part of negotiating our contract extension with andros, we had to examine our hiring goals over the next few years, as well as our current clinician count because all our current clinicians will have to be re-credentialed within three years.

**So, each initial credentialing and re-credentialing uses a credit?**



Yes, and re-credentialing typically happens every three years in the behavioral health world. There's also an initial platform fee and an onboarding fee, which we managed to negotiate out of our contract.

**Do you use any other vendors related to managing these processes, such as vendors to track continuing medical education (CME) requirements?**

We don't. Medallion offers this feature, but decided not to pay for it. Our clinical teams manage this directly and we've put the onus on the clinicians to keep track of it. We pay for their license renewal each year, but they manage the renewal process because it's a lot to track and it varies by license and state. We remind them when their license is about to expire, and I believe they also get notifications from the relevant boards.

**It sounds like your licensing and credentialing systems are in a good place, and in particular that delegated credentialing has worked well for you.**

Oh yes, definitely. Especially because many of the health plans take three or four months to credential, whereas we're averaging something like 16 days.

This is a huge deal when it comes to clinician utilization. Without delegated credentialing, you're choosing from bad options. Either you tell a new hire that they won't be able to start for three to four months and that we don't know exactly when their start date will be. Or we bring them onto the team, but they're sitting idle because they're not able to see patients yet, which is obviously very costly. So delegated credentialing has been a game-changer for us.

**Could you talk more about delegated credentialing? When should one start thinking about it, and is a certain volume of providers needed to make it feasible?**

You can start thinking about delegated credentialing pretty early. To get approval, you have to undergo an audit by each health plan. We only had one payer that had a minimum provider count to allow delegation. I would recommend starting to gather everything you need to pass an audit early on. This includes things like your policies and procedures, certifications, vendor contracts (such as our contract with andros) and then your full clinician roster.

The way an audit actually works is the payer will pick something like 20 clinicians from your roster and ask for the full credentialing files on them. andros has come in really handy here because you can easily go into their platform and download their full PSV file, which is often something like 30-50 pages. The payer then ensures that you're checking everything you're supposed to and not just blindly approving everyone, and that your processes for reviewing the credentialing files is sound. Essentially all of our payer audits have worked this way, just with varying levels of scrutiny.

One thing I forgot to mention with andros is that they do monthly reporting for us, essentially rechecking each of our credentialed clinicians to ensure that no new flags have come up. Payers also typically ask for these reports as part of their auditing process.

**Given that you had never built something like this before, how did you go about it? Did you have a consultant that you worked with?**

Yes, we had a consultant who helped us with the process. We initially had an exploratory call where she taught us the basics of delegation, and then we ended up using her to advise us through the process of becoming delegated. She walked us through what an audit looked like, gave us a checklist of what was required to become delegated, and provided us with helpful templates, such as the policies and procedures template which we customized to the specifics of our business. It really wasn't that much time though – we worked with her for a few hours, and then I took the information and ran with it.

**Yeah, I was specifically wondering about the policies and procedures. Obviously, if you've never written those before, you don't know what they entail.**

Yeah, you can find delegation and audit checklists online. But, I believe the most beneficial thing was the template of the policies and procedures. While you might be able to find it online, it was really helpful to get a template because it's a really long document.

She also had a lot of experience with the vendors in this space, which was helpful.

**Anything else you want to share that we haven't discussed?**

I will say again that andros's service is really great. Sometimes we'll need really quick turnarounds (requesting results within a couple of days) and they do it basically every single time.

**And any advice that you would give to others who are trying to investigate licensing and credentialing vendors?**

I think it's important to identify your priorities when choosing a vendor. Is it price, service, or product? Because once you're clear about that, it helps you make your decision. For example, andros is definitely more expensive than some other vendors we looked at, but I've had no issues with them, and they offer excellent service and do what we need them to do. Knowing what is most important to you up front and aligning with your team makes the decision process much easier.