

Provider Data Management (PDM)

Clean, Connected & **Completely in Your Control.**

THE CHALLENGE

Inaccurate, siloed, and outdated provider data costs the healthcare industry nearly \$5 billion¹ annually and can trigger compliance fines, claims delays, member frustration, and stalled market growth.

Whether you manage your own network or lease one, keeping provider data accurate, compliant, and ready for use shouldn't drain your time, budget, or IT resources.

THE SOLUTION

Perspecta's Provider Data Management (PDM) platform is a secure, self-service hub for consolidating, cleansing, and governing provider network data. Built for both group health and workers' comp, PDM eliminates silos, streamlines updates, and helps you meet compliance demands, without the headaches.

KEY CAPABILITIES OF PERSPECTA'S PDM

SELF-SERVICE PROVIDER MANAGEMENT
Add, update, or deactivate providers instantly

AUTOMATED CLEANSING & VERIFICATION
Cross-reference against Perspecta's Data Vault

ROSTER MANAGEMENT & DATA AGGREGATION
Ingest, map, and unify roster data from multiple sources

AUDIT-TRACKED UPDATES & REPORTING
Full transparency for compliance and governance

SECURE, CENTRALIZED MASTER DATA HOSTING
One authoritative source for all stakeholders

INTEGRATED INSIGHTS
Monitor and improve data quality over time

For Health Plans

- **Eliminate regulatory risks** and directory errors
- **Reduce claims rework** and operational costs
- **Scale network management** without inefficiency
- **Gain real-time visibility** into data quality

For Workers' Comp

- **Clearly managed** provider network data
- **Improve accuracy** in provider routing and claims handling
- **Optimize channeling** and provider alignment
- **Prevent costly delays** and denials

WHY PERSPECTA'S PDM STANDS OUT

SEAMLESS INTEGRATION

Works with your current systems—no costly overhauls

FLEXIBLE SELF-SERVICE

Control your data without relying on IT queues

AUTOMATED ACCURACY

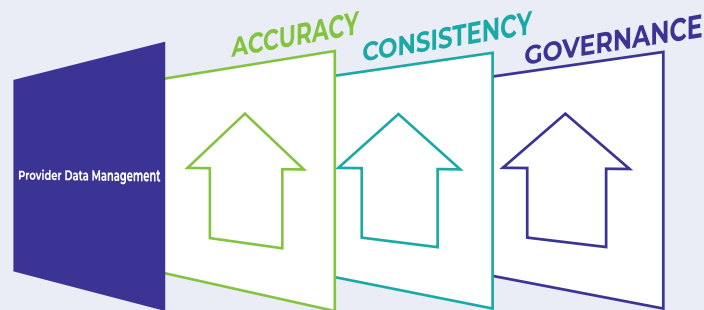
Real-time data validations reduce human error

AUDIT-READY COMPLIANCE

Stay ahead of evolving regulatory standards

PROVEN IMPACT

Lower fines, cut costs, and improve operational efficiency



THE RESULTS YOU NEED

75% reduction in provider directory errors

Avoid fines of **up to \$25K per beneficiary²** for Medicare directory issues

Save up to \$5 PMPM¹ by reducing redundant data management

Faster, verified provider onboarding and updates fuel additional market growth

Greater accuracy in workers' comp claims, helping **prevent costly delays** and denials

Data-driven reporting to **track ROI, trends, and compliance performance**

Let's Talk

Position your organization for smarter growth, cleaner data, and greater confidence with a **better data foundation**.

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¹ CAQH | ² CMS.gov

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