

ProviderOutreach.

Kiriworks ProviderOutreach delivers health plans a dynamic platform for outreach management and analysis for their provider network. Whether it is attestations, surveys, questionnaires, or staff verifications – ProviderOutreach is used to design, distribute, manage and report on all aspects of your provider outreach program.

TEMPLATE & PROCESS MANAGEMENT

ProviderOutreach allows health plans to develop universal form templates that meet brand standards and compliance guidelines. Once a template is selected, ProviderOutreach is used to manage the creation, approval and implementation of the form prior to distribution to the provider network.

Fraud, Waste, and Abuse

Provider FWA and Compliance Training Attestation

This attestation form MUST be completed annually for all participants who have completed the Medicare FWA training and the Medicare Advantage D-SNP training. Training records must be maintained for at least 10 years.

I attest I am an entity representative who has signature authority for the group or organization listed below. Each provider and staff member related to this organization has completed the FWA & General Compliance Training requirements as stated in 42 CFR §§ 422.503(b)(4)(v)(C) and 23.504(b)(4)(v)(C). My group or organization has reviewed the Medicare FWA Training & General Compliance Training.

Please enter your Provider ID

Provider ID *

Provider Name

Provider Email

1. Please check the box if your organization does not serve Medicare or Medicaid patients and is exempt from this requirement.

2. Please check the box if your organization has a Medicare Certification Number and is exempt from fraud, waste and abuse (FWA) attestation but did complete the General Compliance training, Standards of Conduct, and compliance policies and procedures as required by CMS (provide Medicare # below).

Entity, facility, group, or vendor Address 1 Address 2

Type of Organization City State Zip

Completed By

Title

Submit

FORM FEATURES

- Attachments
- Bar Code Reader
- Calculated Fields
- CAPTCHA
- Check Box
- Drawing Tool
- Formatting Controls
- Multi-line Text Box
- Radio Button (Group)
- Repeating Section
- Select List
- Signatures
- Conditional Logic
- Date Pickers
- Dynamic Display
- Field Masking
- Field Validation
- Label Positioning
- Lookups
- Prefill Options
- Printing
- Security
- Tabs
- Themes

CAMPAIGN MANAGEMENT

Whether it is a single survey or a multi-touch campaign, ProviderOutreach delivers health plans the ability to execute their provider outreach strategy. From a single screen, users can see the status of a campaign including in progress, completed and past due surveys. To ensure compliance, campaigns can also be configured to remind providers to complete time-sensitive responses.

RESPONSE INSIGHTS

ProviderOutreach goes beyond other online surveys tools by providing real-time response insights. Once forms are submitted, ProviderOutreach can analyze the response data and create follow-up tasks for your network management teams to connect with providers that are out of compliance.

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CAMPAIGN CREATION

Campaign Details

Campaign ID: 16924
Campaign Name: FWA Surveys 2018
Requested By: John Smith
Request Date: 9/5/2018 11:29:10 AM
Campaign Start Date: 1/1/2018
Campaign End Date: 12/31/2018
Campaign Description: The FWA Surveys for 2018 are included in this campaign.

Providers

[2] DPL - Campaign Providers Spreadsheet - Campaign ID: 16924 - 9/5/2018

Surveys

Survey Name	Date To Be Sent	Date To Be Completed By	Hosted Location
Fraud, Waste, and Abuse	4/1/2018	4/30/2018	Extranet
FWA 2018 Q2	7/1/2018	7/31/2018	Extranet
FWA 2018	10/1/2018	10/31/2018	Extranet
FWA 2018	1/2/2019	1/31/2019	Extranet

1 - 4 of 4 records

RESPONSE MANAGEMENT

Survey Details

Campaign ID: 16892
Survey Category: FWA
Survey Name: FWA 2018
Campaign Status: Complete
Survey Description: Survey is used for FWA in 2018.

Request Details

Requested By: John Smith
Date/Time Requested: 8/23/2018 10:14:56 AM
Date To Be Completed: 8/24/2018
Automated Follow-Up: Yes
Days Took To Complete: 13

Provider Details

Provider ID: 1
Provider Name: DARLENE ANDRICHAK
Provider Email: Providers@kirhealth.com
Phone: 157-999-5702

Follow-Ups

Outreach Method	Manual	Outreach Notes	Outreach Date/Time	Completed By
Email	<input type="checkbox"/>	Automated followup. Email has been sent to provider.	8/23/2018 1:33:37 PM	System

1 - 1 of 1 records

Completed Survey

[1] Survey Name: FWA 2018 - Provider ID: 1 - Completed: 8/23/2018 1:35:31 PM

Milwaukee / Cleveland / St. Louis / Chicago
1-800-242-1777 / kiriworks.com