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DATA RESEARCH

Powering Up Medical Record Retrieval

The First Step to Accurate Data: Finding the Right Providers

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TABLE OF CONTENTS

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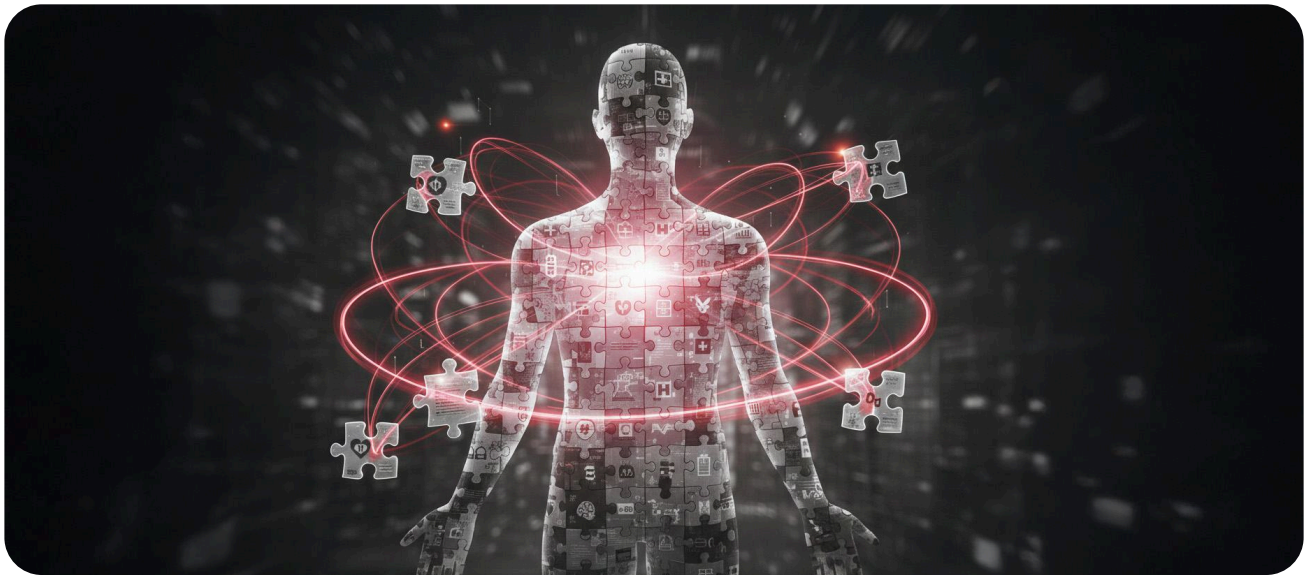
Executive Summary

Complete and accurate medical records are required for numerous applications. However, the fragmented United States (US) healthcare system makes locating a patient's prior healthcare encounters extremely challenging. Patients may see 18-20 differing physicians in their lifetime[1], meaning no single Electronic Health Record (EHR) will have all their records. More importantly, patients often cannot recall or have a complete record themselves of every provider encounter. These missing historical records mean registries, payers, life insurers, and legal representatives spend extra time and money tracking down patient charts, often missing important parts of a medical history.

To address this issue, Veritas Data Research announces **Provider Finder**, a secure solution that 'finds' the individual physicians and facilities where medical care was delivered to a patient.



THE COST OF INCOMPLETE DATA

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Incomplete medical histories **create failures** across industries, creating financial and operational penalties.

Clinical Trials Face Recruitment Bottlenecks

Patient Vetting and Enrollment: Clinical trial sponsors must properly vet patients prior to enrollment to ensure they meet strict inclusion/exclusion criteria. A lack of complete data leads to "screen failures," where patients are enrolled based on incomplete histories, wasting significant time and budget.

Registries Lose Analytic Integrity

Outcomes Analysis: For registries to provide accurate longitudinal analytics, they require a comprehensive view of patient care. Incomplete data leads to fragmented datasets, which can skew analytic results and obscure the true effectiveness of medical interventions.

Health Plans Face Financial and Regulatory Risks

- **Medicare Risk Adjustment and the Affordable Care Act (MRA & ACA)**: Without complete patient information, plans cannot validate diagnosis codes used to determine member risk scoring to maximize federal payments.
- **Healthcare Effectiveness Data and Information Set (HEDIS) and Quality Reporting**: Incomplete data hinders the validation of care delivery across 90 measures, lowering Star Ratings and reducing quality bonus payments.
- **Risk Adjustment Data Validation (RADV) Audits**: Centers for Medicare & Medicaid Services (CMS) are expanding audits to 100% of Medicare Advantage plans[2]. Failure to support diagnoses can lead to payment recoupment.
- **The New Enrollee Blind Spot**: 54% of Medicare beneficiaries are enrolled in Medicare Advantage (MA) Plans[3]. As more patients shift to MA plans, there is often no visibility in the historical care patterns of those new members to inform risk assessment, interventional care, and other programs that lower cost or increase CMS payments.

Life Insurance Mis-Categorizes Risk

Underwriting: Life insurance companies can mis-categorize risk and, therefore, face pricing delays and risk determination errors when complete medical records are not located. Simultaneously they can overpay for charts that contain little or no insight into what they are looking for.

Legal Firms Face Operational Delays

Litigation Risks: Legal firms depend on records to establish causation, liability, and damages. Missing patient histories delays discovery and proceedings and jeopardizes the ability to prove a case.

ACHIEVING OPERATIONAL COMPLETENESS

Current solutions in the healthcare data market serve as important foundational tools for obtaining medical histories. However, relying on national health information exchanges (HIEs) or single-platform EHR integrations alone creates inherent limitations. Without a centralized method to locate the specific physicians and facilities where care was delivered, these systems for obtaining medical histories remain incomplete, and unusable for many commercial applications.

Veritas' Provider Finder addresses this challenge by providing a secure solution that identifies health encounter locations and who provided care for consented or otherwise HIPAA-authorized patient chart retrieval use case. Provider Finder solves two major inefficiencies in medical record retrieval to reduce operational waste and maximize data utility:

1. **Identification of Care Locations**: Without a complete "chase list" of prior medical encounters, organizations miss important health encounters while also over-spending time and money on unsuccessful retrieval attempts for records that do not exist at the targeted location.
2. **The Context and Specialty of Care**: Not every healthcare encounter or chart is useful; understanding the physician's specialty and care setting of an encounter can save organizations from spending time and money on charts that aren't relevant.

Veritas's Provider Finder integrates into existing organizational workflows to ensure that record discovery is based on valid encounters rather than assumptions or incomplete exchange data:

1. Organizations maintain their established processes for collecting patient consent and HIPAA authorizations for their use case.

2. Once authorization is secured, the organization can submit patient PII through the Provider Finder API (or via secure file or sharing methods) for a near real-time lookup.

3. Provider Finder delivers back a list of each individual's prior healthcare encounters by physician and facility (but no clinical data); these results are powered by Provider Index, which provides complete and accurate contact information to aid in the retrieval process.

4. Organizations can then sort healthcare encounters by specialty, role of attending provider, or year of service, as reported by Provider Finder, to prioritize chart retrievals.

5. Organizations use their existing chart retrieval services to gather charts, with outreach informed by the contact information supplied within the Provider Finder results.

The Provider Finder workflow allows users to work more effectively with their preferred retrieval vendors, as they can now prioritize specific charts based on the clinical relevance of the provider. Provider Finder also reduces the time and cost for retrieval by including current contact information for each physician and facility, supplemented by verified secondary contact data to ensure successful communication with the record custodian.

To learn more about how Provider Finder identifies the specific physicians and facilities where care was delivered, and to improve the accuracy and completeness of your record discovery processes, **contact Veritas Data Research.**

REFERENCES

[1] PR Newswire. (2010, Apr 27). Survey: Patients see 18.7 different doctors on average.

[2] Centers for Medicare & Medicaid Services. (2025, May 21). CMS rolls out aggressive strategy to enhance and accelerate Medicare Advantage audits.

[3] Ochieng, N., Freed, M., Biniek, J. F., Damico, A., & Neuman, T. (2025, July 28). Medicare Advantage in 2025: Enrollment update and key trends. KFF.

ABOUT VERITAS DATA RESEARCH

Founded by experts in the **data analytics industry**, Veritas combines cutting-edge technology and efficient workflow design to solve the most complex challenges in healthcare data. While known for our best-in-class datasets, Veritas has expanded into secure, technology-enabled solutions that provide actionable intelligence to data/ analytics teams and companies, their customers, and other stakeholders.

We make critical information **accessible and actionable**, ensuring our partners can make informed decisions with confidence.

To learn more about us, visit **veritasdataresearch.com** and follow us on **LinkedIn.**