

DATA, DIFFERENTIATION, & DILIGENCE



The Tribunus Health process helps providers improve their network participation and reimbursement rates. We use data analysis, strategic insights and payer negotiation expertise to deliver tailored solutions for our clients.



Consultation and Evaluation

Our Client Development team leads with curiosity to accurately assess your objectives and understand your needs. We consider various elements – such as your practice specialty and size, your location and competitive landscape, and the nature of your payer relationships today – to help us better evaluate if our services will have a measurable impact against your goals. We gauge your practice's unique requirements and differentiators to determine if our approach and specific expertise is the right fit for your organization.



Month
1



Partnership and Integration

Once an agreement is reached, our Client Services team takes the lead, carefully matching you with the most suitable Tribunus Health teammates based on factors such as specialty-specific expertise, resource requirements, geography, and payer network affiliations. Through due diligence, data collection, analysis and open communication, we set clear expectations for timelines, communication, and results to establish a strong foundation for our partnership.



Month
2



Strategy and Positioning

In this phase, we develop customized strategies and prioritize actions to help get you in-network and/or to maximize your reimbursement rates. In partnership with each client, we evaluate the competitive and payer landscape to carefully prioritize our efforts, focusing on the most impactful opportunities first. We then identify unique differentiators to define a client's value proposition from a payer's point of view. We use these value propositions to craft bespoke marketing materials we use to effectively position you in front of payers, driving awareness, consideration, and negotiation opportunities.



Month
3



Engagement and Negotiation

Our goal is to persuade payers to extend offers for your organization to become an in-network provider and to negotiate favorable contract terms - inclusive of amendment language - while keeping you informed through candid and effective communication practices. Our team engages in persistent follow up with payers on your behalf, relying on relationships built over hundreds of negotiations to speed up a notoriously long process. We set and adjust expectations with you throughout this phase, leveraging our expertise to derive insights from new data that influences our actions accordingly.



Month
4



Contracting and Optimization

In the final phase, we facilitate proper contract routing and follow-up, ensuring timely implementation of the agreed-upon terms. Additionally, we continuously feed new data, insights and information into our analysis and prioritization process. Each new piece of information allows us to reevaluate and reprioritize which payer processes will be the most impactful ensuring your reimbursement rates remain competitive within your specialty and geographic area. With each successful effort, we are able to then consider additional payer negotiations, if appropriate, and look ahead to reengaging when it is time for the next round of negotiations.



Month
5-9+