



# SimplePay Health

## Tiering Methodology

SimplePay Health uses one of the country's largest healthcare databases consisting of 30+ billion Medicare and Commercial claims. SimplePay uses this data to accurately determine the quality of providers in your network. Below are the 4 Primary components that SimplePay Health uses to assign provider tiers:

**Quality of Care** – Quality is studied first and is the primary driver in assessing a provider's tier. A few of the determining factors for quality include:

- Outcomes
- Board Certifications
- History of Malpractice
- Hospitalization Rates
- Timely and Effective Care
- Readmission Rates

**Relationships** – It is important that providers are referring to other high-quality physicians and operating within high quality facilities to ensure you are receiving the best care possible.

**Experience** – Physician years of experience plays a factor in assigning the tier of the provider. Additionally, past member experiences play a roll. There is value in having positive experiences with a health care provider throughout your episode of care.

**Cost** – Providers must demonstrate they provide cost efficient care.

If you have additional questions relating to the quality of your current provider or provider you are considering using, please do not hesitate to reach out to your Simplepay health pro at 800-606-3564 or [HealthPro@simplepayhealth.com](mailto:HealthPro@simplepayhealth.com).