

# Prospect Medical Systems Management Services Organization



Prospect Medical Systems owns and manages highly successful IPAs by leveraging our best-practice, results-driven administrative services to manage patients under risk arrangements with health plans/CMS.

Founded more than 30 years ago, Prospect has demonstrated its ability to responsibly and effectively manage costs without compromising quality of care. Leveraging our best-practice, results-driven administrative services for our primary care and specialist physicians, Prospect is able to deliver value to our members and providers. With the ownership of 20 hospitals by our parent organization we are highly experienced in provider-hospital partnerships and in the optimization of this critical relationship.



## What Makes Prospect Medical Systems Unique

- **Coordinated care model** to drive higher quality/improve outcomes/lower costs
- Economics of scale resulting in **better client costs**
- Compliance with **all state audits and health plan** audits/guidelines
- Manages professional and institutional risk for **multiple payers**
- Extensive physician alignment and healthcare data expertise
- Experience with **all insurance products**, including commercial, Medicare, Medicaid, PPO and ACO
- Successful transformation and expansion into **new markets**

## Results such as:



READMISSION  
RATE



MEDICARE AVERAGE  
LENGTH OF STAY



GENERIC  
PRESCRIBING RATE



ABANDONMENT RATE  
FOR MEMBER CALLS

## Key Facts:

- 23 IPAs in six states: CA, CT, NJ, PA, RI and TX
- More than 500,000 managed members
- More than 11,000 primary care and specialist physicians
- Ownership of 20 hospitals via Prospect Medical Holdings
- Successful culturally focused networks (Korean, Latino, Vietnamese, etc.)
- West and East Coast operations
- America's Physician Groups Elite status for six years in a row
- Admits/cases below Milliman guidelines

## Services Include:

- Comprehensive, state-of-the-art medical management for care at home transition of care; risk stratification
- Provider relationship management
- Credentialing
- Contracting (health plan and provider)
- Claims adjudication
- Customer service
- RAF/quality optimization programs
- Financial services
- Compliance
- Sophisticated, user-friendly systems portals and data analytics
- In-network retention and utilization control