

DIGITAL HEALTH POLICY STRATEGIES®



Digital Health Policy Strategies is a healthcare consultancy whose mission is to cut through the noise and find the connections between innovative products, regulations, action plans, and target outcomes. Whether it is through translating policies or developing strategic plans for a client, the focus centers on achieving the corporate goals by identifying the key needs, creating actionable steps, and driving the execution in a manner that advances our mission.

Digital Health Policy Strategies creates innovative approaches and tactical plans that deliver solutions fit for the each clients' specific needs.



Strategy & Planning

Outline and execute tactical approaches to complex healthcare commercialization problems



Medicare Reimbursement

Analyze and improve available coding, coverage, and reimbursement avenues



Policy Development

Engage federal policymakers strategically to advance key issues



Navigate Government Requirements

Translate healthcare regulations, guidance documents, and standards into actionable plans and engagement programs



Data Driven GTM Pathways

Identify and explore market competitors and windows of opportunities across portfolios

Digital Health Policy Strategies advises manufacturers, diagnostic companies, health systems, health it companies, and startups on a wide range of healthcare issue areas.



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Contact us at 734.277.6261

julie@dhpstrategies.com to learn more.

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Corporate Strategy & Planning Services

- Craft strategic plan for market entry and expansion
- Generate competitor evaluations (SWOT analysis)
- Perform due diligence on current and future potential partners
- Identify regulatory requirements, barriers to market entry, and mitigation plans
- Establish key performance indicators (KPIs) and implement tracking tools
- Identify key strategic partners (health systems, vendors, industry influencers) to engage
- Lead the formation of strategic alliances to achieve corporate goals and objectives

Data Driven GTM Pathway Services

- Identify, quantify, and articulate industry trends
- Identify healthcare market segments (e.g., IDNs, academic medical centers, FQHCs, private practices, etc.) and scope
- Calculate TAM, SAM, & SOM by market (legal, healthcare, etc.)
- Develop a GTM / commercialization plan
- Outline unique value proposition and differentiating factors from others in the market

Support Engaging Government Decision Makers

- Interface with Medicare Administrative Contractor (MAC) leadership to obtain clarity on decisions and pricing
- Request meetings with CMS/ MACs to educate decision makers and position client representatives as a trusted source of clinical information
- Support preparations for, presentation during, and follow-up on meetings with CMS/ MACs including preparing responses to any outstanding questions and counsel on next steps
- Use the outcome of the MAC and CMS meetings to establish a strategy that outlines a feasible reimbursement environment for skin substitutes
- Survey the reimbursement landscape (OIG reports, CMS rulemaking, subregulatory guidance, and MAC activities) to assess current hurdles and position of decision makers
- Present summary findings to client leadership and use it to update messaging for government & commercial payors

Health Policy, Coding, Coverage & Reimbursement Support

- Monitor current reimbursement environment for the product, predecessors, & competitors
- Highlight the presence or absence of appropriate codes to identify & reimburse for products
- Coverage analysis, monitoring, and strategy for engagement (where/when needed)
- Regulatory and legislative issue monitoring including regulatory summaries, comment letter generation, policy engagement strategies, hearing coverage, and more

Claims & Billing Analysis & Education Services

- Interview/interface healthcare organizations (HCOs) and/or physician staff to assess medical documentation procedures, claims submission processes, and education provided for staff on local & national requirements as well as the systems utilized for monitoring adherence and identifying problems of non-compliance or denials
- Claims analyses to identify trends and ascertain the root cause(s) of the denials
- Develop and delivery of an interactive training program to improve claims and billing processes