

Harnessing the Hidden Power of Provider Data

Strategic Insights from Payer and Provider Leaders



The New Role of Provider Data

Today, most people start their care journey online—not in a clinic or on the phone. They look up providers, and they compare ratings. They search by ZIP code, insurance, and symptoms. At every step, provider data shapes their experience.

What used to sit quietly in back-end systems has become the foundation of how organizations compete, connect, and deliver care. Provider data is no longer just a regulatory concern or an IT issue. It has become essential infrastructure for digital access, operational efficiency, and AI-powered tools.

This guide shows how provider data has become a strategic asset, not just a back-end task. You'll learn how leading payers and providers are:



Reducing care access barriers through cleaner, more connected data.



Meeting rising member expectations with enriched, accurate profiles.



Laying the groundwork for AI and digital innovation.



Collaborating across teams and organizations to improve data quality.

Throughout, you'll hear directly from payer and provider executives about what's working—and what it takes to get there.

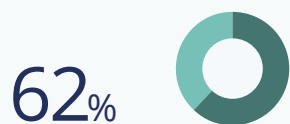


The insights in this guide are pulled from a Beckers Payer Issues Roundtable conversation with forward-thinking executives from Highmark Health, Corewell Health, UCare, and Allegheny Health Network. Their message is clear: what was once an administrative function is now a strategic priority. Today, provider data touches marketing, digital, clinical operations, member experience, and more.

The pressure to modernize this data is mounting:



of healthcare consumers say they began their most recent search for care online, most often starting with a health plan’s website or app. ¹



want more accurate provider information.²



of providers believe that health plan directories reflect their details accurately.³

These aren’t just technical problems—they’re strategic gaps that affect every touchpoint in a member’s care access experience. Inaccurate information can delay care, undermine trust, and increase the risk that patients and members will seek help elsewhere.



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This ‘junk drawer’ of provider data accuracy is becoming such a challenge for the member experience. We know that half the provider directory data could be incorrect at any given time.

— DAN SARLES
Provider Data & Network Analytics,
UCare



Understanding the Real-World Impact of Inaccurate Provider Data

A wrong phone number can derail an appointment, and a mislabeled specialty can route a member to the wrong provider. These aren't small inconveniences—they're access failures.

Inaccurate or outdated data can lead to:

- Members giving up entirely after failed attempts to schedule care
- Patients arriving in the wrong place, sometimes outside their network
- Patients arriving unprepared for the care being offered
- Operational efficiencies, from increased call volumes to billing errors and manual scheduling workarounds

Care teams lose valuable time navigating problems that could have been avoided.

Proactive leaders are tackling this head-on. They're aligning teams around a shared definition of data accuracy, cleaning up conflicting records, and establishing a clear source of truth across platforms.

The results speak for themselves: fewer misdirected appointments, less manual rework, and more confidence from patients and members that they're in the right place, with the right provider, at the right time.

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You don't want people showing up to an urgent care clinic Google said was open when your website says it's closed. That erodes trust instantly.

— JOEY SELISKI

Director of Digital Health Operations, Allegheny Health Network



30%



of healthcare consumers have delayed or skipped care due to inaccurate provider information. ⁴

70%



of members with surprise out-of-network bills were unaware their provider was out of network. ⁵

Positioning Provider Data as a Strategic Asset

Today's consumers expect more than just names and phone numbers. They want provider details that reflect the way they search for and choose care—including bios, languages spoken, care philosophies, appointment availability, accepted insurance, and locations that are convenient to them.

Health plans and systems are responding to this demand. Marketing, digital, operations, and IT teams are coming together to ensure that provider profiles are complete, accurate, and consistent across every channel.

Treating provider data as shared infrastructure, rather than allowing it to remain siloed in departments, helps reduce friction, increase trust, and streamline access to care. It also positions organizations to move quickly as AI and other innovations raise the bar for digital services.

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We know people are going to third-party sites like Google. Things like pictures, videos, bios ... understanding care style ... those things beyond just location and phone number were super important when we started doing our member research.

— PRITEE SUBRAMANY
Vice President of
Product Management,
Highmark Health



Fixing the Provider Data Supply Chain

Many organizations rely on fragmented systems and siloed workflows to manage provider data. Credentialing, scheduling, marketing, claims processing, network management, member support, and access teams use different formats and timelines. This makes it hard to ensure accuracy and deliver a seamless experience.

Technology helps, but alignment is the key. Organizations making the most progress are the ones stepping back to define what a complete, validated provider profile looks like. High-performing teams treat provider data like a supply chain—with clear owners, strong governance, and cross-functional fixes that flow across systems. Nearly three-fourths of health system and health plan executives have set up an AI governance structure to set priorities and plan for AI's future, and 22% are establishing dedicated governance committees⁶ —an essential step to ensure that provider data quality keeps pace with digital transformation.



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It's critical to have a leader that is very collaborative that can work across all of the necessary teams... it's data, medical staff, call center, physicians and operations.... Your governance looks so broad, and having that governance team meet frequently to collaborate and come up with a good strategy is critical.

— HOLLY SULLIVAN
VP of Brand, Marketing, &
Consumer Experience,
Corewell Health



Meeting Rising Member Expectations

The bar for digital experiences is rising, and healthcare is no exception. Patients expect to see accurate, detailed information about the people who may care for them, from credentials and experience to care philosophy, photos, videos, and more.

They're not just marketing features or UX wins. They build confidence. They help people choose the provider who best fits their needs and values. And when paired with real-time scheduling, they help turn intent into action.

Leading health systems and health plans today are doing more than simply updating their websites. They're publishing consistent, enriched profiles across portals, apps, and even third-party platforms where consumers search for care—like Google, Apple Maps, and Healthgrades.

Meeting expectations at this level takes operational commitment. It requires internal teams to coordinate on data entry, content management, and provider engagement. But the payoff is worth it, with higher engagement, fewer abandoned searches, and a smoother path to care.

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We call this journey 'find care and schedule care' because we know that journey doesn't end once they find a doctor. They actually need to schedule that appointment. Otherwise, it becomes a big barrier for them to actually go and get the care—and sometimes they just don't when it's too hard.

— PRITEE SUBRAMANY
Vice President of
Product Management,
Highmark Health



70%



of Millennials and 64% of Gen Z members wish their health plan provided more detailed provider profiles.⁷

92%



of healthcare consumers are interested in scheduling appointments online.⁸

Laying the Foundation for AI-Powered Access

AI is already reshaping how patients interact with healthcare. From recommended care options to virtual assistants, today's AI-powered tools promise convenience and smarter navigation, but they only work if they're built on reliable provider data.

When data is accurate, complete, and consistent, AI-powered tools can surface the right providers, automate scheduling, and personalize recommendations. When it's not, those same tools misdirect patients and erode trust.

Leading organizations are using AI to enhance patient-facing tools and simplify back-end processes. Some are generating provider bios from resumes. Others are using machine learning to validate provider attributes in real time or flag inconsistencies across systems. A few are even starting to blend provider data with cost and quality information to personalize care recommendations—a signal of where this is heading. As Pritee Subramany of Highmark Health noted, the next wave of innovation lies in using AI not just to clean up data but also to drive more proactive, personalized member engagement.

Organizations that haven't laid a solid foundation will struggle to scale AI safely and meaningfully, no matter how promising the technology. AI only works when the data behind it is clean, complete, and connected.




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We are looking at AI for more personalized and proactive engagement and blending provider information with cost, to identify care gaps and offer personalized recommendations.

— PRITEE SUBRAMANY
Vice President of
Product Management,
Highmark Health



More than **70%** 

of healthcare organizations say that they are pursuing or have already implemented gen AI capabilities.⁹

73% 

of health system and health plan executives have set up an AI governance structure to set priorities and plan for AI's future.¹⁰

AI Readiness Checklist: Is Your Provider Data Prepared?

AI tools can only perform as well as the data behind them. For health plans and providers looking to use AI to improve care navigation, automate scheduling, or personalize recommendations, clean, connected provider data is essential. This checklist outlines the key data foundations required to support AI-powered tools that enhance access and experience.

Accuracy

- Provider affiliations and network status are current and verified.
- Location and contact information are regularly validated.
- Scheduling availability is reliably updated and reflects operational realities.

Completeness

- All active providers are represented across all relevant systems.
- Profiles include enriched data (photos, bios, languages, availability, etc.).
- Key metadata (specialties, location, etc.) is consistently populated.

Consistency

- Data is standardized across internal systems (call center, directories, etc.)
- External-facing data aligns with internal records.
- There are no major discrepancies between systems that impact member experience.

Connectivity

- Data is integrated across platforms (digital tools, directories, search tools, etc.).
- Real-time or real near-time syncing is in place between core systems.
- APIs or other mechanisms support dynamic data access for AI tools.

Governance

- A designated owner or governance group oversees provider data quality.
- There are documented policies for how data is updated, ranked, and enriched.
- Data improvement is tied to broader business goals (digital transformation, AI strategy, etc.).

Strengthening Payer-Provider Collaboration

Provider data doesn't stop at the edge of an organization. Health plans and provider organizations both benefit when they collaborate to ensure the information they share is aligned, timely, and usable.

That means moving away from quarterly file transfers and toward shared standards, real-time APIs and syncs, and scheduling links embedded in payer directories. And the best partnerships go beyond compliance to focus on the member and patient experience.

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One of the focuses we've had between Highmark and Allegheny Health Network, as an integrated system, is to shift from being transactional in this process and be more collaborative.... How can I ingest that data in real-time?

— PRITEE SUBRAMANY
VP of Product Management,
Highmark Health



Better Data, Better Access

Provider data may not be flashy, but it is fundamental to every step of the healthcare experience. When provider information is complete, consistent, and available in real time, it improves access, builds trust, and enables innovation. It makes it easier for people to find care that fits their needs—and for organizations to deliver it with confidence.

As AI capabilities, digital-first experiences, and consumer expectations continue to evolve, the stakes are only getting higher. Directory accuracy has transformed from a back-end requirement to a front-door differentiator.

The organizations leading this transformation aren't just keeping pace. They're raising the bar on access, experience, and trust. By investing in governance, collaboration, and continuous improvement, health plans and providers can turn that asset into a competitive advantage and deliver the kind of care experience people are looking for. Because every inaccurate listing creates barriers for a person trying to make the right decision—for themselves, their child, or their parent.



Learn More

To explore how Kyruus Health helps payers and providers improve access, enhance digital experiences, and unlock the full potential of their provider data, visit kyruushealth.com.

Endnotes

- 1 Kyruus Health, "2024 Care Access Benchmark Report for Health Plans"
- 2 Kyruus Health, "2024 Care Access Benchmark Report for Health Plans"
- 3 Kyruus Health, "The Critical Role of Payer-Provider Collaboration on the Consumer Experience"
- 4 Kyruus Health, "2024 Care Access Benchmark Report for Health Plans"
- 5 KFF, "Health Insurer Financial Performance in 2023"
- 6 Define Ventures, "AI in Healthcare: A View from the C-Suite"
- 7 Kyruus Health, "2024 Care Access Benchmark Report for Health Plans"
- 8 Kyruus Health, "2024 Care Access Benchmark Report for Health Plans"
- 9 McKinsey & Company, "Generative AI in healthcare: Adoption trends and what's next"
- 10 Define Ventures, "AI in Healthcare: A View from the C-Suite"