



# Payerset Data Solutions — An IQVIA Data Marketplace Partnership


*Price transparency insights into every contracted rate to drive maximum value for patients and stakeholders*


Healthcare leaders face mounting pressure to deliver value, optimize reimbursement, and maintain compliance in an increasingly transparent marketplace. The regulatory shift, driven by the Federal Hospital Price Transparency (2021) and Transparency in Coverage (TiC) (2022) laws, has transformed the landscape, requiring public disclosure of negotiated rates between providers and payers. While this opens new opportunities, it also introduces complexity and risk.


## Key challenges for leaders


-  **Strategic rate benchmarking**

Executives must ensure their organizations are not under- or over-performing in contract negotiations. Without clear market medians, it's difficult to identify where reimbursement rates stand relative to competitors.
-  **Confident contract negotiation**

Limited visibility into market rates can undermine negotiation leverage. Leaders need robust data to negotiate fair, competitive contracts with payers.
-  **Network optimization**

Identifying high-value providers and modeling network scenarios is essential for building resilient, cost-effective care delivery systems.
-  **Market access for medical devices and diagnostics**

Revealing payer-provider reimbursement for medical devices, infusibles (J codes), and molecular diagnostics will inform and optimize competitive market pricing strategies.
-  **Revenue cycle management**

Detecting underpayments and overpriced services is critical for financial health. Executives must optimize reimbursement processes to safeguard margins.
-  **Policy and competitive intelligence**

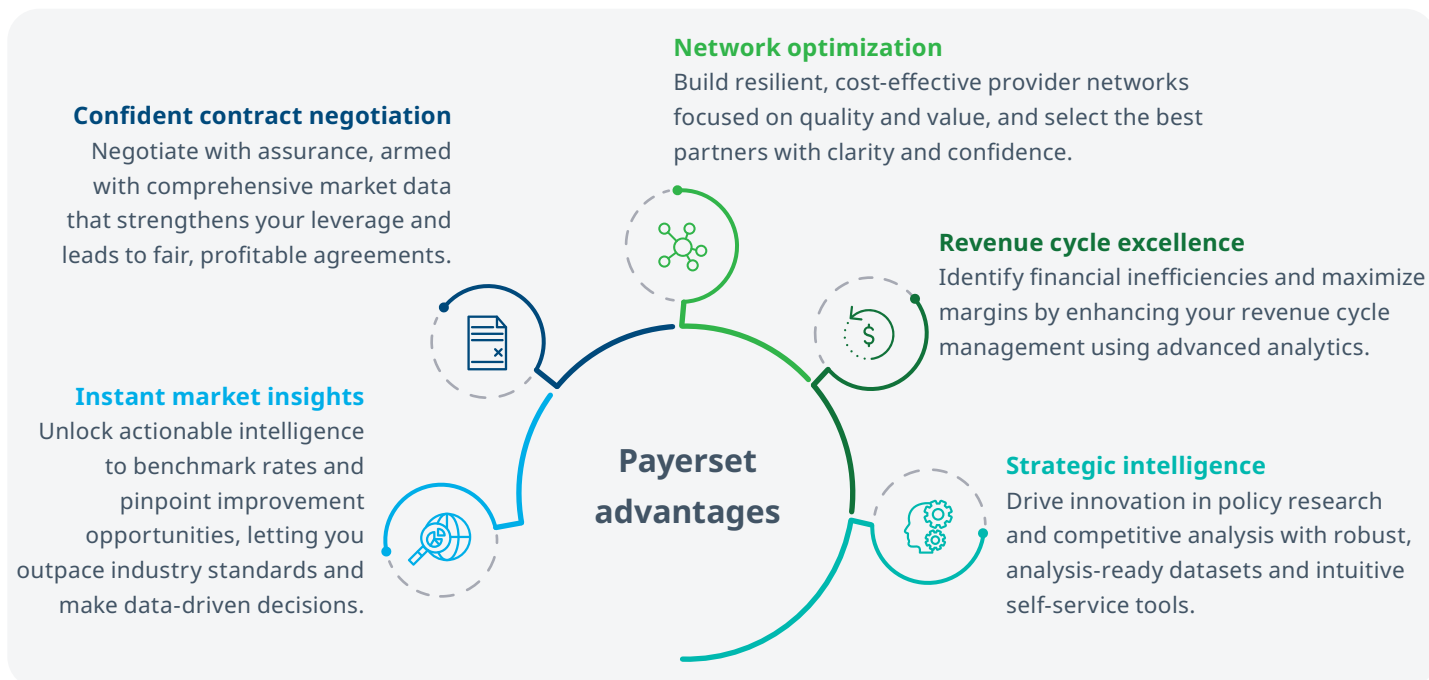
Quantifying price variation, studying competitors, and informing payment-reform proposals require access to transparent, reliable data.

## The right solution — Payerset

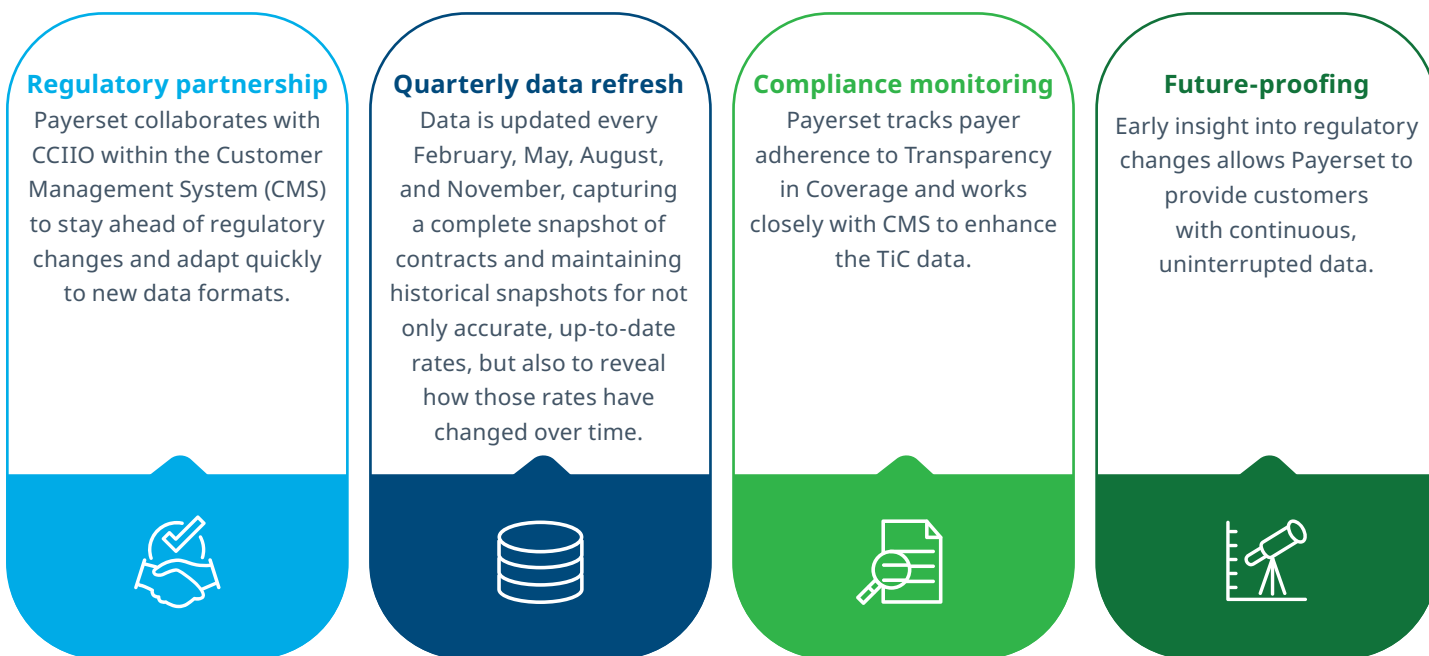
In a marketplace defined by transparency and complex regulations, Payerset empowers organizations to rise above the competition and deliver maximum value to both their patients and stakeholders.

Payerset delivers comprehensive price transparency data by aggregating and enriching both hospital and health plan (TiC) files, covering all care delivery organizations. This enables stakeholders, including pharmaceutical market access teams, medical device manufacturers, and hospitals, to effectively benchmark reimbursement rates, target optimal facilities, and strengthen negotiations with payers.

By turning negotiations into partnerships, IQVIA's Payerset Data solutions enable leaders to take control of cost management, competitive pricing, and strategic planning.



## What makes Payerset different?



## Who can benefit from Payerset data?

Price transparency data is valuable for a variety of segments across the healthcare ecosystem to **benchmark rates, identify opportunities, and strengthen market positioning**, including:



**Pharmaceutical market access teams:** Use transparency data to compare infusion drug reimbursement across carriers and hospitals, identifying favorable rates and opportunities.



**Medical device manufacturers:** Target clinicians and facilities with the best reimbursement rates, improving market strategy and pricing discussions.



**Hospitals and health systems:** Benchmark contracted rates against peers to ensure fair payment and strengthen negotiations with carriers.

Payerset is a strategic partner for thriving in a transparent, data-driven healthcare ecosystem. It propels the transformation of payer/provider challenges into opportunities and charts a path for sustainable growth with insights built for today's leaders.

## Data segmentation options:

Price transparency data can be focused on specific subsets and categories, or it can be broader based on the insights required.

- 1. Payers:** Select specific insurers, TPAs, or self insured employers.
- 2. Geography:** Data can be sliced by state (minimum granularity) or by county or city.
- 3. National Provider Identifiers (NPIs):** Choose all facilities in selected states or every organization in the U.S.
- 4. Product/Billing codes:** Select specific codes (e.g., HCPCS, CPT) or access all available billing codes, including DRGs, Revenue codes, and more.

## Related offerings:



**Payer and plan mapping**



**Medical claims data**



**IQVIA data marketplace**

## Why IQVIA

IQVIA creates intelligent connections across all aspects of healthcare through its analytics, transformative technology, big data resources, and domain expertise. As healthcare's vital partner for over 50 years, IQVIA delivers Connected Intelligence with powerful insights, speed, and agility.

Executing a successful data strategy to address your evolving use cases begins with a partner who helps protect the flow of information through a resilient panel and the ability to link data across sources to drive patient analytics and insights. IQVIA provides timely access to data while infusing privacy and governance into all processes to manage risk, all supported by an integrated delivery and support infrastructure to help you succeed.

With unparalleled industry expertise and its connected intelligence, IQVIA provides customers with accelerated insights to make quick and confident business decisions.

**Contact us today for more information.**



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