

Leveraging the right solution to disrupt current Risk Adjustment processes

Health plans aim to increase production, accuracy, and coder satisfaction

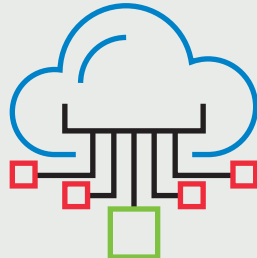
The current state of Risk Adjustment

As a result of new government policies, like the Risk Adjustment Data Validation (RADV) final rule, health plans must identify and invest in effective solutions to increase code capture accuracy and boost chart review productivity in order to mitigate potential compliance risk and protect their bottom line.



20-40

Coders can review an average of 20-40 patient records/day*



10%

of reviewed charts contain risk-adjustable codes



61%

of health plans report their biggest challenge is data accuracy

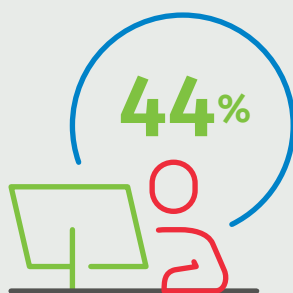
Shortfalls of today's Risk Adjustment solutions

Over two-thirds of today's health plans utilize manual risk adjustment processes, such as spreadsheets and homegrown tools, to review diagnostic codes submitted by providers. These methods are not sophisticated, lack valuable clinical insights, and have inefficient workflows.

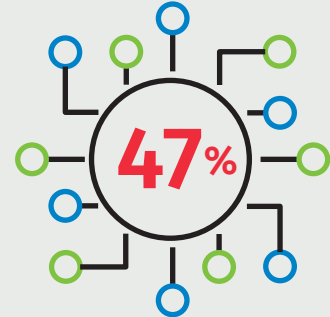
Many MAOs have turned to technology such as natural language processing (NLP), an effective tool to extract clinical insights from unstructured text, which comprises 85% of electronic health records; however, many are unsatisfied, claiming the technology returns "too much noise" due to its inability to understand the nuances of medical language.



69%
of health plans utilize manual risk adjustment processes



44%
believe that traditional NLP is inefficient at recognizing medical language



47%
of payers agree that their current NLP software does not extract meaningful information

The future state of Risk Adjustment

The Health Language Risk Adjustment Solution includes clinically-intelligent NLP (cNLP) technology, that has been trained with proprietary libraries of semantically enriched terminology along with Medicare Advantage coding intelligence, to quickly and accurately identify diagnoses and clinical indicators hidden within the medical record. And the Coder Workbench intelligent UI was designed and built by coders, for coders, featuring smart chart organization and a built-in coding assistant that optimizes workflow and boosts coder productivity.

Increase accuracy, productivity, and coder satisfaction with the Health Language Coder Workbench.



1-2%
net new codes identified and accepted



\$15K
approximate ROI generated for a pilot evaluation of 100 charts**



25%
to
40%
increased efficiency over manual chart review***

*Dependent on volume of pages per patient record.

**Based on early adopter performance. Pilot evaluation identified 13 net new diagnoses in 100 chart analysis, mapping to 5 HCCs, resulting in a risk score net increase of 1.365. Accounting for a conservative Medicare Advantage bid rate of \$900 across 12 months, this yielded approximately \$15K.

***Based on internal testing.