

Reimagining Risk Adjustment







Risk Adjustment is the Bread and Butter of MA Plan Success

A million new members join Medicare Advantage each year, but reporting timelines remain the same. A new proposal suggests CMS audit nearly all MA plans' risk adjustment, a steep rise from the 5% of plans that are audited today. MA plans are being asked to code for more patients, more accurately, with no more time—and the cost of failure is steep.

Commercial Risk is High Stakes

For the 2015 benefit year, risk adjustment transfers averaged 10% of premiums in the individual market, and 6% of premiums in the small group market. Plus, every single exchange offering is audited. There's no way around it— poor risk adjustment reporting means trouble for plans on the commercial exchanges.

Traditional Risk Adjustment Methods Aren't Enough

Traditionally, risk adjustment has used manual, low-tech methods of identifying, obtaining, and individually reviewing Medicare Advantage (MA) patient records.

There are several problems with the current manual process:

Searching records for HCC codes can be inaccurate and hit-or-miss

No matter how competent and diligent coders might be, they don't always agree—in fact studies have shown that they can disagree up to 30% of the time. Also, the possibility for data entry error during this process is very real.

Chart review is lengthy and error-prone

Going through patient records by hand is an enormous process for coding teams, even those with the most experience. The average coding team spends thousands of hours per year manually combing through documents, hours that could otherwise be spent ensuring that documentation is accurate and comprehensive.

Fortunately, there's a better way.

Chart retrieval is slow and costly

Direct access to Electronic Medical Records (EMRs) is often not possible or not permissible. Therefore, medical records are secured for all eligible patients from doctors' offices—through electronic files, hard drives, or even by scanning and faxing paper records, one at a time. This is extremely disruptive to provider operations—especially in situations where they have multiple insurance plans, often with multiple departments, all demanding charts.

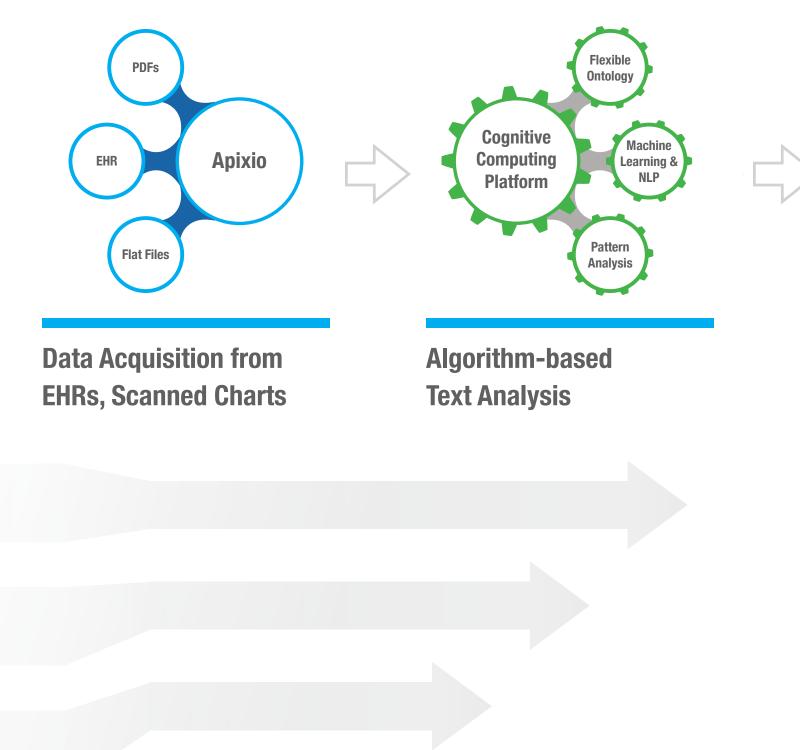
Limited number of well-trained, qualified risk adjustment coders

There is simply not enough time and "human bandwidth" to consider all the clinical evidence, especially during peak review season. At best, this depletes reimbursement revenue. At worst, it exposes payers and providers to all manner of financial risk. Not to mention the potential negative effects on patient care.

Transforming Risk Adjustment Through Science

Let Our Platform Do the Grunt Work-and Let Coders be Coders

Technology-enabled Risk Adjustment





Identify New Evidenced Conditions; Subtract Those Previously Submitted

HCC Profiler is a HIPAA-compliant cloud application which leverages Apixio's cognitive computing platform to mine clinical charts and medical claims for valuable data on patient chronic conditions. It uses this data to populate a review workflow that breaks down the complex task of risk adjustment coding into discrete tasks. The result is a more accurate view of patient conditions and risk, developed at a speed 3-10x faster than traditional chart review methods.



Present Evidence for Expert Approval

Tackle Both Sides of Risk Adjustment With HCC Profiler's Two Solution Suites

Code

Identify New, Supported Codes with HCC Profiler – Code Identifier

As an application or a service, your organization will benefit from the accuracy, efficiency and deep insights that HCC Profiler enables in your first or second pass coding efforts.

- Identify more, supported codes in retrieved charts using 80% less time than a manual review
 - Reduce data entry errors
 - QA up to 100% of results with less time and effort
 - Presents individual coding opportunities with supporting evidence so coders don't have to read entire charts

Compliance

Confirm Accuracy of Reported Codes with HCC Profiler's Compliance Suite

Verify that reported HCC's have sufficient evidence for CMS submission and protect your organization from costly audit and coding compliance failure with one of the modules from Apixio's compliance suite.

- Compliance Auditor: Enables you to audit 100% of 3rd party vendor coding results, increasing project visibility while reducing audit risk
- Zero Evidence: When combined with our coding offering, this report identifies submitted codes that have been found to have no supporting evidence in retrieved charts
- Code Validation: Validates the accuracy of HCC submissions by linking all HCC's to available source encounter notesencounter notes in charts

HCC Profiler is Available as an Application or as a Service

Take complete control of your risk adjustment with HCC Profiler.

Have a coding team? Thinking of bringing risk adjustment back in-house?

With HCC Profiler application, your team can review charts in 80% less time. Your team can gain deeper insights into projects with real-time reporting of coder quality, speed, and decision-making.

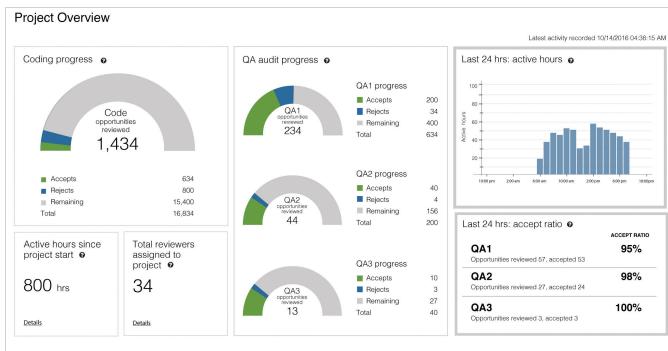
Don't have a coding team of your own? No problem.

Apixio offers expert coders who use HCC Profiler to provide quality work at a lower cost. During projects, you can monitor progress with real-time reporting. And, best of all, you can review all results, not just a sample, in just days not weeks. No guess work here.

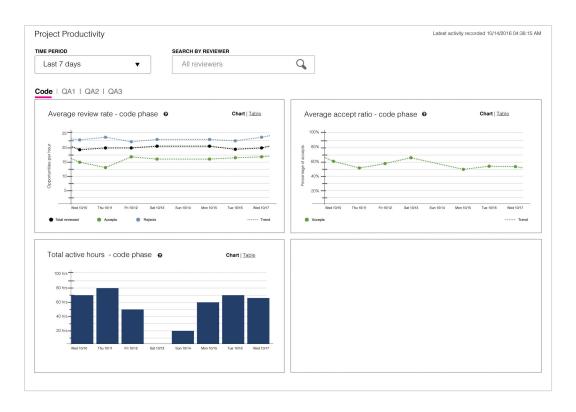
Powerful Insights Into Your Coding Project Are Just a Click Away

Measure Project Progress in Real-time

The HCC Profiler's Project Overview screen allows managers to get a sense of how a project is progressing and if resources are appropriately allocated. It displays information on coding and QA progress as well as time spent coding, accept ratio, total reviewers assigned to the project, and more. These statistics provide unparalleled transparency into coding projects and allow managers to benchmark their progress in real-time.



IE PERIOD		FILTER BY REVIEWER								
Since project start	•	PRODUCTIVITY				🛓 Download Accuracy Report Detai				
						ACCURACY				
REVIEWER NAME +	TOTAL REVIEWED	ACCEPT RATIO	ACTIVE TIME	TOTAL TIME	OPPS/HR	TOTAL CORRECT	NEGATIVE OVERTURNS	POSITIVE OVERTURNS	TOTAL QA'D	ACCURAC
acoder	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	979
b_reviewer	395	50.1%	13.39 hr	15.89 hr	30.21	177	5	3	185	965
c.auditor	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	97
da_reviewer	395	50.1%	13.39 hr	15.89 hr	30.21	177	5	3	185	96
dc_reviewer	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	97
e.coder	395	50.1%	13.39 hr	15.89 hr	30.21	177	5	3	185	96
f_auditor	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	97
g.reviewer	395	50.1%	13.39 hr	15.89 hr	30.21	177	5	3	185	96
g.s.auditor	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	97
h_coder	395	50.1%	13.39 hr	15.89 hr	30.21	177	5	3	185	96'
b_reviewer	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	979
c.auditor	395	50.1%	13.39 hr	15.89 hr	30.21	177	5	3	185	96
h_coder	211	55.3%	8.74 hr	10.10 hr	24.10	136	2	1	140	97



Take a Deep Dive into Team and Individual Metrics

The HCC Profiler's Project Productivity screen allows managers to monitor team-level metrics and view a snapshot of group progress. It displays metrics such as average review rate, active coding hours, and more. The Reviewer Details screen displays information specific to each coder, to allow for individual education and improvement. Among other things, total reviewed opportunities and total correct opportunities (as measured by QA) are displayed.

We Acquire Data Simply and Securely Through Our InfoStream Tools

This replaces the traditional process of acquiring and sorting through paper and electronic charts. Data is extracted directly from medical documents in different forms, such as scanned documents, faxes, rich text, HTML, electronic formats, and PDFs. The data is then translated into the same uniform format so it can be read and analyzed by computers, using adaptive and learning-based analytics.

> Client **EHR Database**

tele tele f2f hhs

tele tele f2f hhs

hhs

tele

f2f hhs tele

hhs f2f

Apixio Extraction (EHR-specific code) <Retrieve data that is structured like y>

Optical Character Recognition

Worried about having scanned charts instead of electronic ones? It's no problem! Our platform has proven experience with optical character recognition (OCR) of scanned chart data. It has successfully analyzed over 6.7 million patients to date.

Risk Adjustment Relevant Documents f2f f2f

f2f

f2f

Platform

0000 Cognitive Computing Platform

Apixio



Successful EHR Data Acquisition

Epic • NextGen • Allscripts • GE Centricity • and more

It's All About Patient Care

There are clear benefits to streamlining patient records and translating them into uniform formats, in terms of the efficiency and accuracy of all kinds of documentation - not merely reimbursement documentation. But there is an even bigger, more important dynamic at play. By aggregating bulk data in a scalable, manageable digital format and applying large-scale analytics to make sense of it all, the healthcare industry can deploy even more effective value-based care models while simultaneously pursuing infinitely more precise and individualized care-essentially helping transform the provision of healthcare from an art to a science.

By the Numbers

- 6 billion analytic events processed
- 6.7 million patient analyzed
- 3 to 10x coder productivity improvement
- < 3% False negative rate compared to human chart review

Success Stories

"As an experienced HCC risk adjustment auditor, I've been astonished to discover how Apixio's clean, simple interface facilitates identification of diagnosis capture opportunities at a level of efficiency and detail no other auditing program has ever delivered."

Ellen Lingar QA Specialist

"At Hill Physicians Medical Group, we've previously relied on tedious manual review of our charts. The HCC Profiler has allowed us to mine our EHR and scanned chart data for valid, risk-adjusting conditions with incredible transparency and efficiency."

Jennifer Pereur Director of Government Programs, Hill Physicians

"By using Apixio, we're improving our auditing bandwidth and enhancing the ability of our coders to focus on other chart audits and other projects that we couldn't do before."

> JoAnn Hayden Supervisor of Quality Improvement Programs, Scripps Health Plan Services



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