

## Enhance Coding Accuracy and Operational Efficiency with Innovaccer's Risk Management Solution

Identify suspected coding issues and enable information sharing at the point of care for improved risk gap closure across your network.

#### Enhance Coding Accuracy, Operational Efficiency, and Outcomes With End-to-End Risk Management

Inaccurate coding and documentation of medical records lead to incorrect risk mapping, which can negatively impact data quality and risk-adjusted scores. Accurate coding and risk adjustment are vital in identifying high-risk patients, determining reimbursement levels, and accurately predicting the cost of care per enrollee. With the introduction of models such as ACO REACH, providers are incentivized to seek stronger coding protection tools. Innovaccer's risk management solutions support these efforts to help healthcare providers achieve their risk goals. Its AI-powered coder assistant helps providers address coding challenges by analyzing dropped codes and reviewing claims data over multiple years to identify prospective coding opportunities and surface suspect codes based on evidence. This enables them to receive appropriate reimbursements by providing high-quality care to patients.

## Key outcomes achieved by customers using Innovaccer's risk management solution

### ~50%

Increase in accuracy in RAF score with suspect codes surfaced through unstructured data

## 20-30%

Decrease in physician time spent on coding at the point of care

## 30%

Reduction in time spent on risk coding by automating manual processes



## Maximize Risk Contract Outcomes and Refine Population Stratification by Improving Coding Accuracy

Diagnosis data is often dispersed across systems, such as EHRs and payer claims files, often causing discrepancies and inefficiencies. Navigating multiple systems for suspected and missed diagnosis codes can negatively impact risk adjustment performance.

Innovaccer's coder assistant identifies missing codes based on claims data and suggested clinical markers, helping avoid improper data submission and related consequences such as lengthy audits and repayments to CMS. The solution enables physicians and coders to save time by identifying information that could not be directly found in the patient's clinical or claims data.

Failing audits, repayments to CMS, and legal ramifications are some of the unfortunate outcomes of improper data submission. Automation helps overcome these and other challenges by detecting suspect and dropped codes while reducing administrative burden.



relevant claims and clinical info to validate coding opportunities and leave comments for physicians. Coders can approve / reject / snooze a potential code notes & comments are pushed to the EMR in visit diagnosis and as encounters in the problem list and patient chart gets updated.

- provider
- Flag a code to the provider for them to accept / reject

pr/ reject	
1	
1	

dx and problem list, which then gets used to generate claims / billing.

Innovaccer's Risk Management Solution Features

## Identify and Improve Coding Accuracy with Analytics and NLP

Surface suspect codes generated from relevant data points using unstructured NLP, including labs, medications, diagnosis, etc.

Identify incoming patients and coding opportunities by analyzing scheduling data.

Automatically capture dropped codes through algorithms with a retrospective review over multiple years.





Access rule-based distribution of patients into worklists to work on open gaps, suspect, and dropped conditions.

Accept or reject suspect and dropped codes during the review with the option to include comments and supporting documentation for physicians.

Get assistance from rules based on clinical guidelines for 74 HCCs across Medicare, commercial, and Medicaid populations to trigger suspected HCCs.



Point-of-Care Insights and Writeback

Highlight potential coding gaps, evidence, and coder feedback, and allow physicians to add codes manually at the point of care directly using the coder assistant, InNote.

Enable physicians to accept or reject codes based on the comments and supporting documentation and choose the relevant ICD 10 codes in suspect codes.

Surface the insights based on the coder's inputs for physicians to accept, reject, or snooze the alert. For accepted codes, providers can initiate the bi-directional EHR writeback capability with supporting MEAT criteria documentation and comments in 2-3 steps.

Customizable dashboards help performance and productivity with tracking on InNote and the ability to export information in a payer-friendly format, allowing easy adjudication and approval.



Record physician feedback and display it to coders for training and loop closure.

Task creation is automated in the coder worklist to review physicians' responses and enable them to revert to the physicians for note updates or request missing documentation.

It assists coders by providing sufficient evidence for coding opportunities (post-visit/pre-claims) before sharing them with payers.



# Seamless Data Sharing Without Disrupting Workflows

With the shift to value-based care, providers have the motivation to improve the quality of care by sharing clinical data, which can benefit assessment accuracy. They need a solution that enables seamless data sharing without disrupting workflows to improve physician response rates and help prioritize care. Automation helps address these challenges by minimizing workflow disruption and point-of-care alerts and increasing coding accuracy. It also helps improve the stratification of high-risk patients. The result is reduced readmissions and more shared savings.

The Innovaccer #1 Best-in-KLAS data and analytics platform offers an end-to-end solution powered by ML and NLP to parse unstructured data to identify additional suspect conditions for complete risk capture. In addition, users can personalize the solution to best suit their organizational needs.

To explore our solution in action, **schedule a demo** with our experts.

#### **About Innovaccer**

Innovaccer Inc. is the data platform that accelerates care innovation. The Innovaccer platform unifies patient data across systems and care settings, and empowers healthcare organizations with scalable, modern applications that improve clinical, financial, operational, and experiential outcomes. Innovaccer's EHR-agnostic solutions have been deployed across more than 1,600 hospitals and clinics in the US, enabling care delivery transformation for more than 96,000 clinicians, and helping providers work collaboratively with payers and life sciences companies. Innovaccer has helped its customers unify health records for more than 54 million people and generate over \$1.5 billion in cumulative cost savings. The Innovaccer platform is the #1 rated Best-in-KLAS data and analytics platform by KLAS, and the #1 rated population health technology platform by Black Book.

For more information, please visit innovaccer.com.



#### Awards and Recognitions



