

DATA SHEET

Get Visibility into How Clinical Operations Affect Your Bottom Line

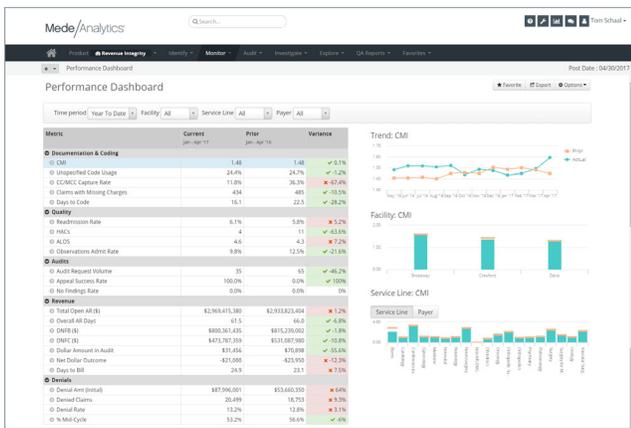
Start the value-based care conversation

By 2020, value-based reimbursement is projected to be 83% of your revenue, up from 43% in 2014 and 14% in 2010. Clinical operations are crucial to your hospital's bottom line. With a comprehensive picture of your documentation and coding performance—and that of your peers—you can quickly spot your biggest opportunities to maximize ongoing reimbursements, minimize audit risk, and resolve operational challenges like coding and billing delays.

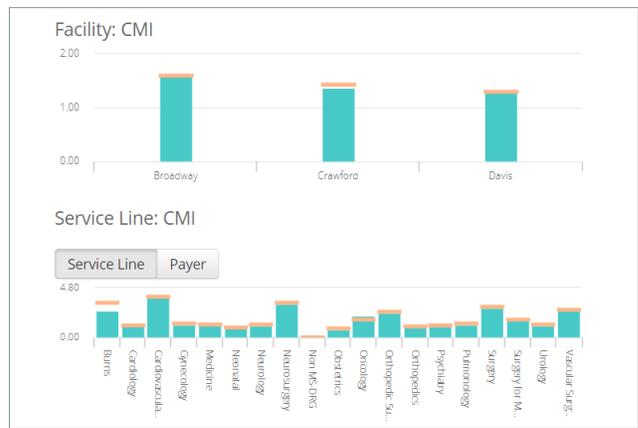
MedeAnalytics Revenue Integrity offers you complete visibility into your mid-cycle performance, connecting clinical activity to financial impact. Its power lies in benchmark comparisons against hundreds of your peers with similar specialties and demographics. You can see how clinical operations and reimbursement are interconnected so your CFO and CMO can find common ground to get the value-based care conversation started—and make even smarter decisions to improve your financial health.

KEY BENEFITS

- Improve and accelerate revenue capture
- Compare your performance against your peers with powerful benchmark data
- Improve coding and documentation
- Mitigate audit risk
- Measure and monitor the impact of coding performance
- Analyze data by physician, specific codes, diagnoses, benchmark variances, and more
- Conduct internal assessments and audits
- Optimize coding performance on professional claims data



START WITH AN OVERVIEW OF REVENUE METRICS



IDENTIFY WHICH FACILITIES, SERVICE LINES, AND PAYERS CONTRIBUTE TO THE LARGEST OPPORTUNITY

Get Visibility into Top-Level Opportunities

The cornerstone of MedeAnalytics Revenue Integrity is the executive dashboard. It gives hospital CFOs and CMOs quick and easy access to performance opportunities in a single view so they can identify where improvement initiatives are needed most and determine their revenue impact.

In a few clicks you can easily spot revenue opportunities and drill down into facilities, departments, and physicians to see their source. Intuitive red and green color-coding offers quick insight into key metrics and trends.

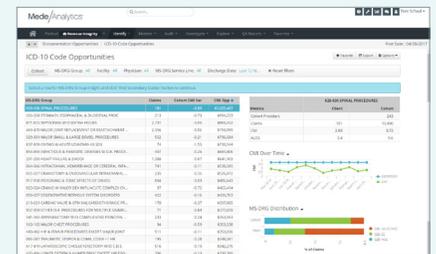
Create Interventions with Role-Based Insight

Role-specific views enable you to devise documentation and coding interventions and track them over time. A customized landing page, top-level metrics, alerts, and collaboration tools give directors and managers the detail they need to drive change.

Powerful, real-time benchmarking data from hundreds of peers improves physician engagement and their responsiveness to intervention strategies. With data from a broad spectrum of the nation's top hospitals, you can trust that the comparison is valid.

Pinpoint Root Causes Through Detailed Analytics

Granular data analytics enable analysts and other front-line personnel to pinpoint performance metrics to address root causes. You can drill down into attending physicians, the number of claims coded for a specific diagnosis, and specific benchmarking variances. Altogether, it offers the detailed, actionable data required to address physician coaching needs—ultimately enabling clinical operations to drive financial improvements.



BENCHMARK CODING AND DOCUMENTATION PERFORMANCE DOWN TO THE SECONDARY DIAGNOSIS CODE LEVEL



INITIATE AUDITS BASED ON OBSERVED RISKS AND THE RESULTS TO CORPORATE STRATEGIES



ANALYZE HIGH-IMPACT MID-CYCLE DENIALS TRENDS



BENCHMARK PHYSICIAN PERFORMANCE ACROSS THE CLIENT COHORT AND WITHIN THE SPECIALTY

Change the Physician Mindset

Your physicians can be reluctant to change. In the transition to a value-based care world, however, change is imperative. Engage physicians around data they find meaningful and actionable. You can then create physician champions and drive appropriate documentation specificity by offering detailed analytics and benchmarking data around diagnoses. Show your physicians how they compare to others within the facility and across the country. Physicians are scientists at their core, and healing patients is their goal. The data enables you to appeal to both sides of their minds, the analytical and the compassionate.

Considerations for the CFO

In a fee-for-service world, the onus for revenue capture and financial improvement lies squarely on the CFO's shoulders. In a fee-for-value world, however, the CFO must work with the CMO and other departments in the organization to drive and monitor change in clinical operations. Understand the link between clinical operations and financial performance, and use MedeAnalytics Revenue Integrity to start the conversation.

Considerations for the CMO

Never before have clinical leaders been so involved in the financial health of the hospital. In the transition to value-based care, clinical operations hold great sway over the hospital's bottom line, and physicians respond to the data that links clinical operations and financial performance. With Revenue Integrity, the CMO can align with the CFO to identify opportunities for improvement in the clinical operations that drive financial outcomes.

THE "MID-CYCLE" DEFINED

The "mid-cycle" refers to the middle of the revenue cycle, between patient access and the business office, where clinical operations affect revenue. In the shift from volume to value, the mid-cycle is where improvements will have the greatest financial impact.

INDUSTRY-LEADING PARTNERS

Revenue Integrity was created in partnership with The Advisory Board Company, the industry's leading global research, technology, and consulting firm. This expertise is complemented by MedeAnalytics' client base, which includes many of the most prestigious healthcare organizations in the world.

Evolving at the Speed of Healthcare

Revenue Integrity was designed to evolve with you as healthcare transforms. It gives you complete visibility into how your mid-cycle performance affects your bottom line—ultimately reducing denials, measuring the impact of coding performance, and mitigating audit risk—today and for reimbursement changes to come.

Improve Revenue Capture

When your coding and documentation are specific and indicate the level of complications associated with patient interactions, you will be paid accordingly. Actionable benchmarking data helps you identify opportunities to reduce lost or missed revenue, and the resulting improvements in claims accuracy drive revenue capture.

- Identify CC/MCC capture rates that affect CMI
- Compare secondary diagnosis codes driving acuity and DRG assignment
- Quantify the financial opportunity and risk for CMI improvement suggestions

Monitor Coding Performance

Revenue Integrity helps you reduce denials, capture underutilized diagnosis codes, isolate coding and billing process bottlenecks, and identify the missing documentation concepts that drive lower specificity. Plus, with near real-time benchmarking data, you can take corrective action immediately and engage coders and physicians around meaningful, actionable data.

- Understand the root causes of high-impact denials
- Analyze coding by physician, coder, procedure, payer, or any other variable
- Categorize denials to monitor improvement over time
- Gain insight into APR-DRGs with case weight, severity of illness, and risk of mortality

Reduce Audit and Take-Back Risk

Monitoring the financial health of your organization isn't a matter of finding more revenue; it's about finding the right revenue. Revenue Integrity helps you protect revenue, increase appeal success, and boost efficiency. With workflow tools and risk analytics, you can compare your data to complex audit rules to proactively manage compliance risk.

- Identify new and frequent areas of risk prior to audits
- Manage external audits with an intuitive point-and-click workflow
- Initiate internal assessments to align compliance objectives with coding and documentation initiatives

ROI

Improve Efficiency

Reduce time spent managing denials by 30%

Increase Revenue

Improve CMI and reduce clinical and coding denials by 20%

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Analyze the Entire Revenue Lifecycle

By integrating MedeAnalytics Revenue Integrity with patient access and business office analytics, you can improve your financial position at all points of the revenue cycle. With analytics that link coding and documentation to root causes in the business office and front end, you gain meaningful insight into the entire revenue lifecycle to identify where money is lost and how each area of the lifecycle contributes to lost revenue, missed revenue, and revenue at risk. Whether it's due to insufficient documentation, missing charges, denials, bad debt, take-backs, or a lack of insight, you can track it all through a single, integrated analytics platform.

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PROVIDER SOLUTIONS

Revenue Cycle Management

- Patient Access
- Revenue Integrity
- Business Office

Value Based Performance

- Population Health
- Quality Management

Cost and Operations

- Supply Chain
- Labor Productivity
- Service Line
- Throughput

Enterprise Performance Management

- Action Planning
- Progress Tracking

For more information about MedeAnalytics Revenue Integrity, visit www.medeanalytics.com/solutions/revenue-integrity.