

RAPID RISK ADJUSTMENT ASSESSMENT



HEALTH
DATA
DECISIONS

ARE YOU OPTIMIZING YOUR RISK ADJUSTMENT PROCESSES?

QUALITY

Significant overlap with quality programs such as Stars can lead to unnecessary extra work when the programs are not aligned. Including them in the risk adjustment process leverages existing data and can improve rates for both.

VENDOR ASSESSMENT

Outsourcing some operations can result in financial and operational efficiencies. When done without regard to the impact on risk, it can result in wasted effort and lower risk scores. We provide expertise and best practices on leveraging outsourced wellness visits, chart reviews, and analytics to best support risk.

COMPLIANCE

CMS rules and regulations enforce strict requirements on Medicare Advantage plans. When risk and compliance work together, they can quickly meet these requirements. Aligning the flow of data with rules makes audits go smoothly.

SUPPORT

Risk adjustment impacts your organization, and it involves multiple departments. Claims processing, IT networks, and databases are crucial for generating revenue. Our team examines the timing and transformation of claims, pharmacy, and revenue data through your systems to identify barriers to capturing and coordinating risk data.

HOW DO YOUR CURRENT ORGANIZATIONAL STRUCTURES AND PROCESSES ALIGN WITH RISK ADJUSTMENT OUTCOMES?

Verifying that all data is collected to support clinical documentation requires looking beyond the risk adjustment department.

Health Data Decisions' broad approach leverages operations in Member management, Provider Relations, Compliance, and Quality to maximize your risk adjustment.



MEMBER

Risk adjustment is focused on your members from enrollment to final reconciliation. Controlling churn to ensure reality matches CMS reports while capturing relevant data from the member record is essential for any plan. Our assessment ensures that dual-eligible ESRD and institutional flags accurately capture added risk for these members.

We track your data from member to CMS and back to identify all the touchpoints where data may be missed, dropped, or distorted. We create a roadmap to integrate risk throughout your organization to produce the most accurate results at the lowest cost.

PROVIDER

Including the person supplying the clinical inputs for risk adjustment is essential. By reviewing how provider data is stored, updated, and accessed, we ensure that chart chases, suspecting, and education programs reach the providers and document the diagnosis. Contacting the right doctor about the proper visit reduces administrative demands, increasing ROI.



Health Data Decisions empowers health plans and providers with data integration, sharing, and optimization expertise for Risk Adjustment, Star Ratings, HEDIS®, and Value-Based Care. Partner with us to unlock your organization's full potential in the competitive healthcare landscape.

To learn more email us at info@healthdatadecisions.com, or call us at (781) 718-2118.

