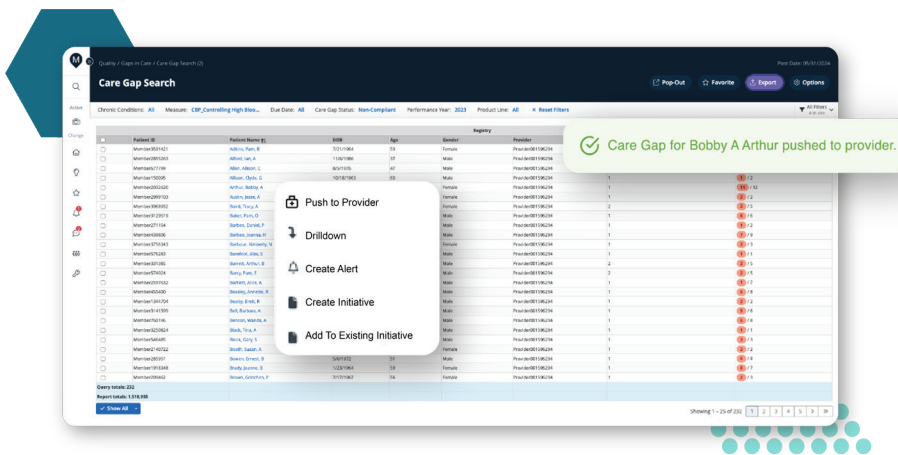# Empower care teams with critical, real-time patient insights to boost performance and gain a decisive edge

The vast amounts of data and technologies that are intended to streamline patient care delivery have made for an overly complex and burdensome reality for providers. This unnecessary administrative burden means care teams spend hours each day completing tasks in their EHR systems instead of using that time for patient care.

Enter MedeAnalytics Integrated Patient Insights (IPI), a game-changing solution that seamlessly embeds actionable insights directly into care team workflows. By doing so, IPI empowers healthcare providers to close critical gaps, meet performance targets, and significantly improve patient outcomes. This innovative approach not only streamlines processes but also enhances the quality-of-care delivery across the entire healthcare network.

Why you need Integrated Patient Analytics

Payers count on their network providers to deliver the highest quality of care at the lowest cost.

However, providers often lack immediate access to crucial patient data, hampering their ability to make informed decisions swiftly. IPI addresses this challenge head-on by seamlessly incorporating vital information at the point of care, including care gaps, coding gaps, and population health and social risks.

With this information, healthcare providers can take the most effective actions to improve patient outcomes. This translates to improved provider performance, higher quality of care, and lower costs—for all involved.

Potential returns

- **80%** increase in gap closure rate in 30 days
- **5%** improvement in revenue capture
- **1.2 hours** saved every day from care team activities

With MedeAnalytics Integrated Patient Insights, you can:

- Seamlessly integrate insights into EHR workflows, reducing administrative burden
- Gain visibility into population health and social risk for improved, comprehensive care planning
- Visualize and address care and coding gaps for real-time action
- Facilitate risk adjustment for improved reimbursement and more accurate financial forecasting

- Improve patient outcomes through timely and targeted interventions
- Engage providers in continuous performance improvement
- Improve quality across the provider network, fostering a culture of excellence in healthcare delivery

Improved risk adjustment and HCC coding

Reduced costs through preventative care

Enhanced quality metrics and reporting

Proactive management of SDOH risks

Improve accuracy of risk adjustment and reimbursement

Payers rely on providers for accurate coding and risk adjustment to ensure proper reimbursement from CMS. Integrated Patient Insights streamlines workflows by identifying coding gaps and surfacing actionable insights to the provider during the patient visit. Next step actions guide care teams in providing adequate documentation and HCC coding adjusted for patient risk. For example, actions can include writing to the EMR, recording notes that can be shared with the originating data source, marking certain actions as complete, etc. With precise HCC coding and risk adjustment, payers can ensure that they receive appropriate reimbursements reflecting their population's actual risk profile, which is essential for value-based care agreements.

Close gaps for improved care quality and costs

Integrated Patient Insights intelligently identifies where there are gaps in care for the patient in real time so the care team can work on closing them. For example, the system can inform providers about overdue preventive screenings or immunizations while they are with the patient. This allows the provider to engage with the patient and ensure timely intervention. By clearly presenting these care gaps, payers can promote proactive care and interventions, reducing the need for costly treatments down the line.

Drive care management through population health and SDOH insights

Having a complete view of quality, costs and utilization is necessary for informing care strategies and targeting interventions. Through the solution, care teams can monitor patient progress, apply evidence-based care strategies and track improvement, enhancing care coordination and quality outcomes. Integrated social determinants of health (SDOH) data adds another layer of insight that helps healthcare organizations understand and address the non-medical factors influencing health, such as housing and food insecurity. Having this information at the time of care enables the provider to connect the patient to the resources or community-based organizations that can provide support. Payers can use collective SDOH information to fund community initiatives and resources that mitigate these social risks.

Client results

A large east coast payer and provider organization collaborated to reduce friction in the coding process for providers, resulting in time saving, improved HCC coding accuracy, and increased CMS reimbursement.

Results:

- Within 8 months, the provider organization closed 71% of diagnosis gaps, a 10% increase from the previous year

- Within an 11-month period, the rate of recaptured chronic conditions increased by 5%

- Both the health system and plan received increased CMS reimbursements due to more accurate HCC coding and risk adjustment scores

From a KLAS Points of Light 2024 Case Study

Learn more about MedeAnalytics' Solutions at

www.MedeAnalytics.com