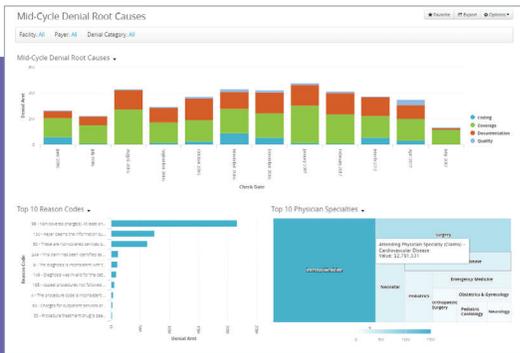Mede/Analytics®

Uncover revenue opportunities and areas of risk in the mid-cycle

With today's emphasis on value-based reimbursement, the clinical operations that take place after patient access and before medical billing are crucial to your hospital's bottom line. Having a comprehensive picture of your documentation and coding performance and compliance allows you to quickly identify opportunities to maximize reimbursements, minimize audit risk and resolve revenue cycle challenges.

MedeAnalytics Revenue Integrity offers you complete visibility into your mid-cycle performance, connecting clinical activity to financial impact. Its power lies in its capabilities for maximizing ongoing reimbursements while also minimizing audit and take-back risk. Together, this ensures you protect the revenue you worked hard to collect.

Pinpoint sources of mid-cycle denials

With Revenue Integrity, you can:

- Improve and accelerate revenue capture
- Compare your performance against your peers with powerful benchmark data
- Identify areas of opportunity for improved documentation and coding
- Proactively identify areas of risk using a robust risk rules engine
- 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

Revenue Integrity

who.
CFOs, CCOs, CQOs, VPs of finance, VPs of revenue cycle, VPs and directors of compliance, directors of HIM, directors of clinical documentation improvement and coding

what.
Identifies strategic focus areas to maximize reimbursements, mitigate audit risk and improve revenue capture

why.
- Monitor and improve documentation and coding performance
- Decrease compliance risk and take-backs
- Reduce clinical/coding denials
- Facilitate and streamline internal and external audits
- Measure physician performance against peers and cohort

how.
Data aggregation, actionable business intelligence and a risk rules engine afford insight into opportunities for improved revenue capture and reduced compliance risk

Identify documentation and coding improvement opportunities

Revenue Integrity provides visibility into documentation and coding performance to drive claims accuracy and process efficiency. Powerful, real-time benchmarking against cohorts from the nation's top hospitals offers physicians and coders meaningful, actionable data that fosters accountability to intervention strategies. Dashboards and scorecards give you insight into:

▸ Underutilized and secondary diagnosis codes and under/over-coding

▸ Missing documentation and documentation lacking specificity

▸ Coding performance by physician, coder, procedure, payer and other variables

Proactively identify area of risk

Monitoring the financial health of your organization isn't just a matter of finding more revenue; it's about keeping the revenue. With a robust risk rules engine, 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 and address vulnerabilities with corrective action.

Forecast cash yield from current AR portfolio

Gain insight into mid-cycle denials

Granular data analytics enable analysts and other front-line personnel to pinpoint root causes of denials. In Revenue Integrity, you can monitor denial patterns, denial overturns and denial write-offs as well as view claim- and line-item detail. Drill-downs into attending physicians, number of claims coded for a specific diagnosis and specific benchmarking variances allow investigation of claims denials, delays and diminished reimbursement.

Manage external and internal audits

Being prepared is the best protection to combat appeals and prevent compliance take-backs. Revenue Integrity enables self-assessment by applying compliance target rules to all claims, exposing areas of risk prior to external audit requests. With intuitive point-and-click workflow, you can efficiently manage external audits, track appeals and increase audit appeal overturns.

Provider Solutions

Revenue Cycle Management

▸ Patient Access

▸ Revenue Integrity

▸ Business Office Suite

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 our **solutions** page.

About MedeAnalytics

MedeAnalytics was the first to market in 1994 with a healthcare analytics SaaS solution. Today, that spirit of innovation continues with a platform that includes advanced analytics technologies like machine learning, guided analysis and predictive analytics.

call us. 469.916.3300 | visit us. www.medeanalytics.com