

Integrated, modular solution to identify, manage, and document population risk.

Key Benefits

- **Enable accurate and complete risk capture** for financial success in risk-based payment models
- **Optimize ROI** by stratifying high-risk patients and prioritizing outreach
- **Engage physicians** through actionable insights delivered via the EHR
- **Inform care** by accurately reflecting patient health status
- **Ensure compliance** in documentation, coding, and billing
- **Decrease administrative burden** with technology-enabled solutions that streamline manual processes
- **Manage performance** and target education opportunities

Background

With the shift from fee-for-service to value-based care well under way, providers are truly shifting their reimbursement models to be more at risk.




As a result, providers now have patient populations that must be managed holistically rather than through a collection of episodes. These organizations need to accurately identify, document, and report risk scores in order to receive commensurate payments, yet their current infrastructure, resources, and processes are insufficient to ensure financial success.

Health Fidelity's Approach

Lumanent Provider Workflow is a comprehensive solution that combines analytics, technology, services, and subject matter expertise to help organizations succeed in risk-sharing programs. Our unique blend of industry-leading technology and services can be tailored to meet any organization's needs, allowing our provider clients to experience accurate, efficient, transparent, and cost-effective risk adjustment. Health Fidelity's solution is the only one in the market that utilizes NLP to generate risk adjustment gaps, resulting in an accurate and complete picture of population risk across three distinct interaction points: before, during, and after the patient encounter.

Health Fidelity's approach has been specifically developed for providers, aiming to deliver value without disruption to existing workflows through integration with the EHR. The holistic approach centers around the patient encounter to help identify, target, document, and code for all risk adjustment gaps, ensuring optimal accuracy and completeness.

Lumanent Provider Workflow

			
Module	Pre-Encounter Prep <ul style="list-style-type: none"> • Analytics based on administrative and NLP-enabled clinical data • Targeted patient outreach and scheduling • Utilize care team to increase confirmation rate prior to physician review 	Point-of-Care <ul style="list-style-type: none"> • Delivery of verified gaps in care and documentation • Gap closure at the point-of-care • Accurate and complete encounter documentation 	Post-Encounter Review <ul style="list-style-type: none"> • NLP-enabled coding review for completeness and compliance • Accurate diagnoses on outbound claims • Analytics updates allow for tracking additional gaps as needed
Users	Nurse Care Manager / Assistant Medical Assistant CDI Specialist	Physician	Coding / Billing Staff CDI Specialist / Staff

Risk Capture Maturity Model

The transition to value-based care is a long and complicated process, with providers at various stages of taking on risk-sharing contracts. To help providers understand their risk-sharing readiness and identify areas of improvement, Health Fidelity developed a risk capture maturity model:

Risk Capture Maturity Model			
Risk-share Coverage	<ul style="list-style-type: none"> Little to no risk share, upside risk only 	<ul style="list-style-type: none"> Partial risk-share arrangements for single payer partner and/or population 	<ul style="list-style-type: none"> Fully delegated upside and downside risk-share contracts across multiple populations, payer partners, and/or CMS Advanced APMs
Data Acquisition and Management	<ul style="list-style-type: none"> Decentralized data sources for all clinical and administrative patient data Manual data retrieval processes that rely on human exchange of files 	<ul style="list-style-type: none"> Required data components and respective sources are identified and secured Certain processes for acquiring patient data are automated and reliable 	<ul style="list-style-type: none"> Use of a centralized data repository for all clinical and administrative data to create a holistic patient profile Automated processes to capture and store data from multiple sources across payers and providers
Reporting and Analytics	<ul style="list-style-type: none"> Lack of investment and infrastructure in scalable analytics Ad-hoc reports that are dependent on IT resources 	<ul style="list-style-type: none"> Analytics fuel prospective efforts to identify, target, and prioritize the opportunity Metrics are defined and in place to measure performance and efficiency 	<ul style="list-style-type: none"> Ongoing performance management with actionable data and ROI tracking from centralized analytics Provider and practice-specific reporting on Clinical Documentation and Quality Improvement (CDQI) performance metrics
Provider Engagement	<ul style="list-style-type: none"> Limited provider training and engagement 	<ul style="list-style-type: none"> Ongoing engagement with providers in addressing high-risk members with optimal intervention strategies 	<ul style="list-style-type: none"> Consolidated gap closure across multiple focus areas (risk adjustment, care management, quality) Actively push out critical interventions in a timely manner
Mode of Risk Capture	<ul style="list-style-type: none"> Heavily reliant on a manual risk capture processes (often retrospective in nature) 	<ul style="list-style-type: none"> NLP-enabled gap identification integrated into risk capture workflow, both prospective and retrospective programs in place 	<ul style="list-style-type: none"> Comprehensive pre-, during-, and post-encounter processes in places to optimize gap capture in the EHR at the point of care
Use of Technology	<ul style="list-style-type: none"> Limited to manual, people-dependent processes 	<ul style="list-style-type: none"> Technology used in silos within single departments for specific use cases 	<ul style="list-style-type: none"> Technology is leveraged to automate processes that impact multiple entities
Level Of Risk Capture Maturity			

An analysis of your organization's capabilities across these six dimensions will provide a clear picture of the opportunity for improvement and help you create a roadmap for financial success in risk-sharing arrangements.

Lumanent Benchmark

Lumanent Benchmark, a consultative service that helps organizations understand the status quo and create a roadmap for continuous improvement, is available to assist organizations with their transformation plan. Before investing in any improvement efforts or solutions, organizations should take stock of their current state, set a baseline from which progress can be measured, and develop an implementation plan that will serve as the blueprint to achieving success. Understanding and quantifying the opportunities for improvement are also critical to setting the right strategies and expectations.

Your customized, data-driven report details which of your risk-share populations segments, provider groups, and condition categories have the most opportunity – enabling targeting prioritization that yields a significant increase in outcomes right from the start. We help to build a business case and a strategic roadmap for moving along the maturity model, and partner alongside you to execute it.



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Health Fidelity simplifies risk adjustment, offering risk-bearing organizations clear visibility into and control over the process. Through our NLP-powered solutions and expert advisory services, we uncover insights that enable better care plans and more complete revenue capture. The Lumanent™ suite gives our partners the confidence to pursue and ability to succeed in risk-sharing arrangements across MA, ACA, Medicaid, and ACO programs. To learn more, please visit www.healthfidelity.com.