

Modern Retrieval – Navigating Change by Starting with Digital & Ending with Better Results

Presented By:

Andy Kumar, *Vice President, Product Management* - **Ciox Health**

Amir Keren, *Chief Technology Officer* - **Ciox Health**



THE RISE
ASSOCIATION



THE RISE
ASSOCIATION

We are a network of health care professionals addressing the challenges posed by the emerging landscape of value-based care and government health care reform.

OUR MISSION

Our mission is to provide a community for like-minded professionals to come together for networking, education, and industry collaboration to stay ahead and advance their careers.

ONE ASSOCIATION
THREE COMMUNITIES



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The impact of COVID-19 on Quality and Stars
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12

ASK YOUR QUESTIONS IN OUR DISCUSSION BOARD

Agenda

Market Dynamics

Polls- we will take two during this session

What is Digital First and why lead with this approach

Current vs Modern approach

Key Takeaways

Q & A

Ciox Overview

Ciox is a **technology-driven** healthcare company that empowers greater health by simply and securely connecting health care decisionmakers with the data and hidden insights in medical records.

Ciox assists Health Plans by improving the way healthcare information is shared and acted upon, resulting in **better quality of care** and **improved outcomes** for patients and health plans.

- **50M+** record request from 1M+ annual unique requestors
- **Number 1** in market experience and coverage with access to **3 out of 4** top hospitals in the U.S
- **Only one** in the market using historical provider data points to improve targeting outcomes

Clinical Data Acquisition & Insights (CDAI)

Multi-channel retrieval to maximize yield and minimize provider abrasion coupled with risk adjustment coding and member-centric data management



1st

Over 60% of ALL Medicare Risk Adjustment Charts retrieved



40+

years of health information management experience



700,000+

providers touched nationwide



120+

Health plans served



50M+

health information requests fulfilled annually



3 out of 4

Top U.S. hospitals served with embedded HIM experts

Market Dynamics

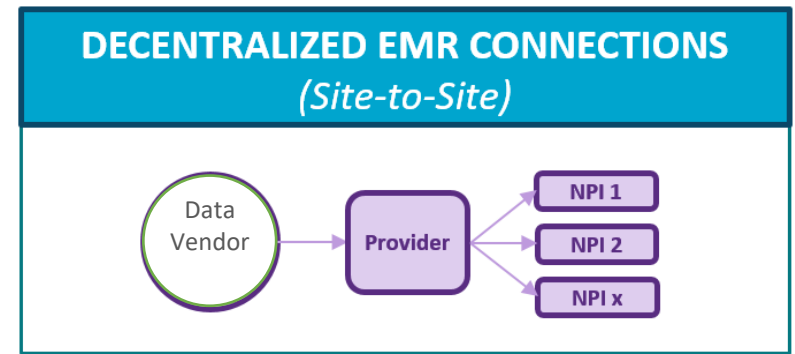
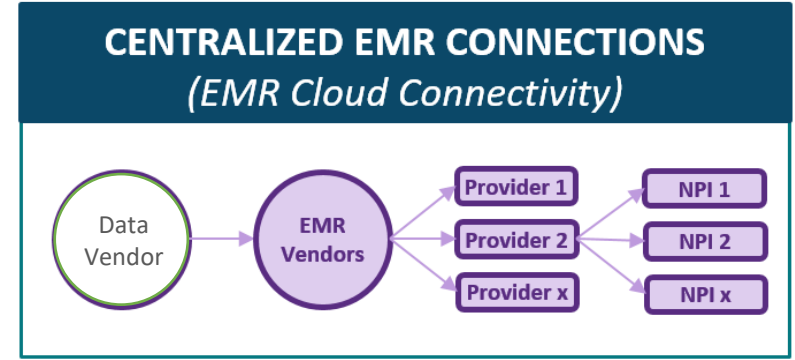
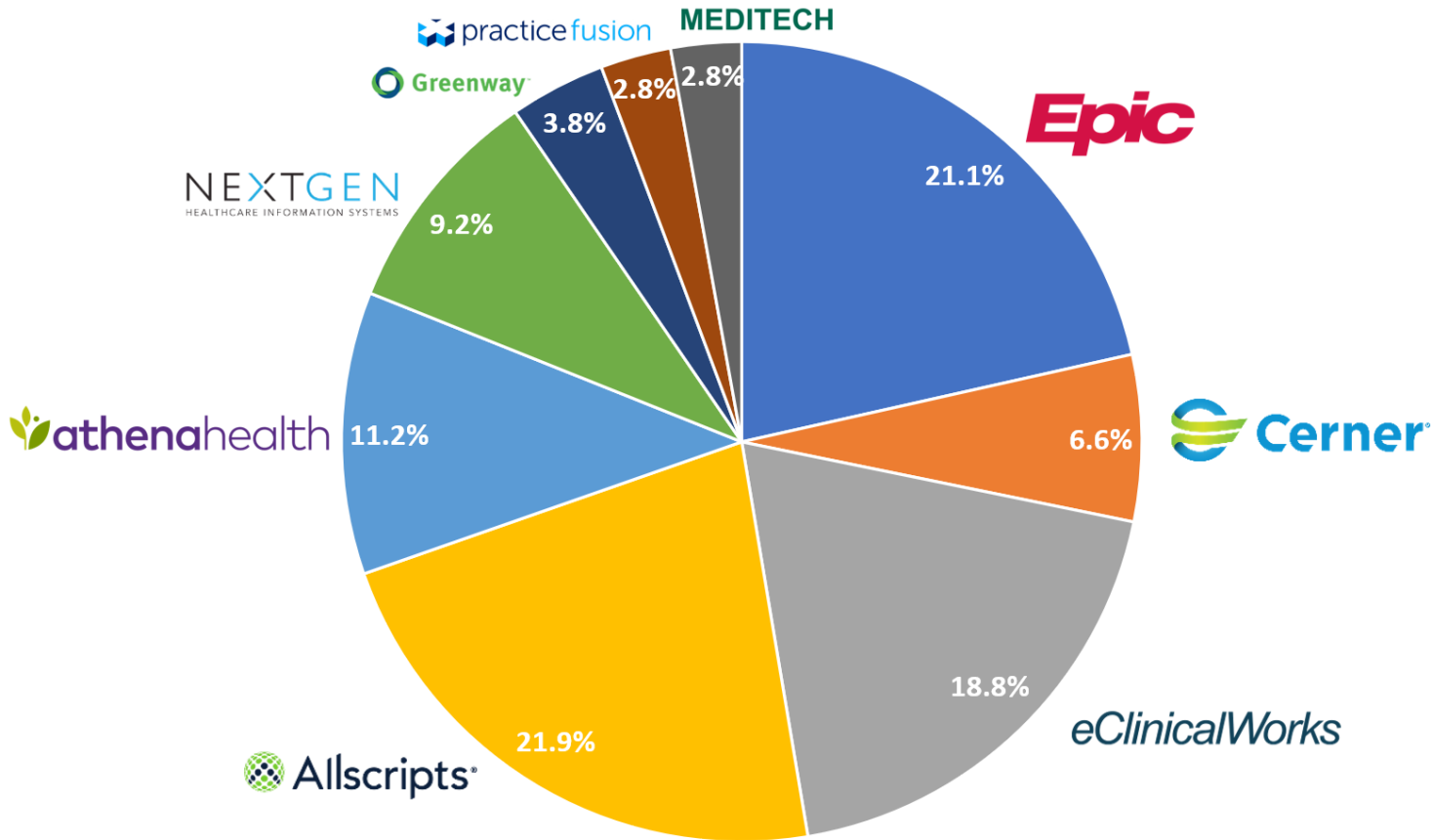
- CMS Interoperability and Patient Access Final Rule is driving interoperability and patient access to health information by liberating patient data
- With 85% of physician using some type of EHR there has been sizable shift from traditional to electronic chart retrieval.
- With availability of rich/portable data we see a shift in demand to use structured & unstructured clinical data
- Streaming of data for patient visit to improve overall patient care is gaining momentum
- Compliance in Medicare advantage risk adjustment practices is receiving increased scrutiny leading to submission of clinical data to support claims



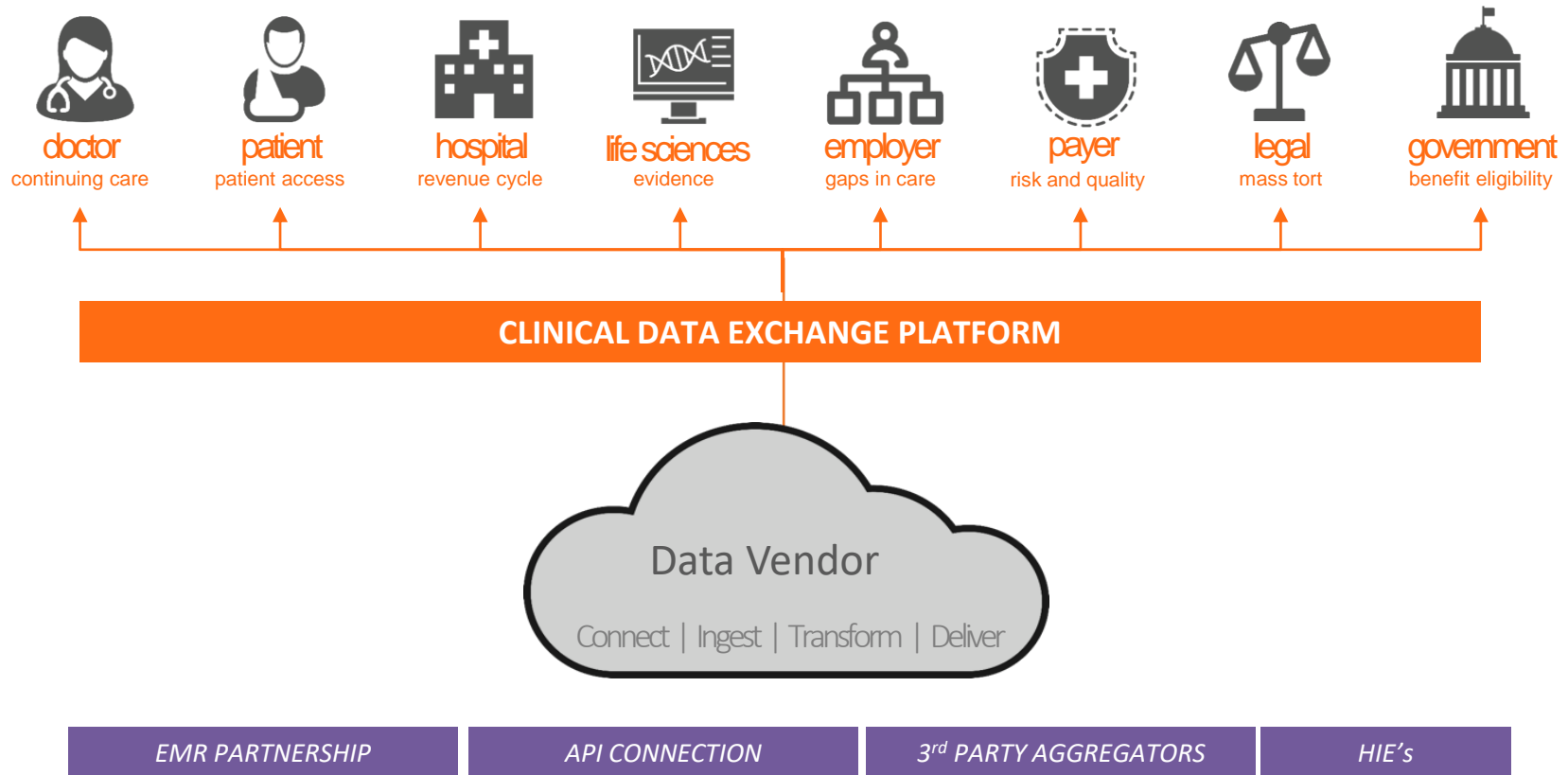
Poll Question

- What percent of your membership population are you currently collecting medical charts during retrospective review?
 - Less than 50%
 - 50% - 75%
 - Over 75%
 - All

Current Landscape

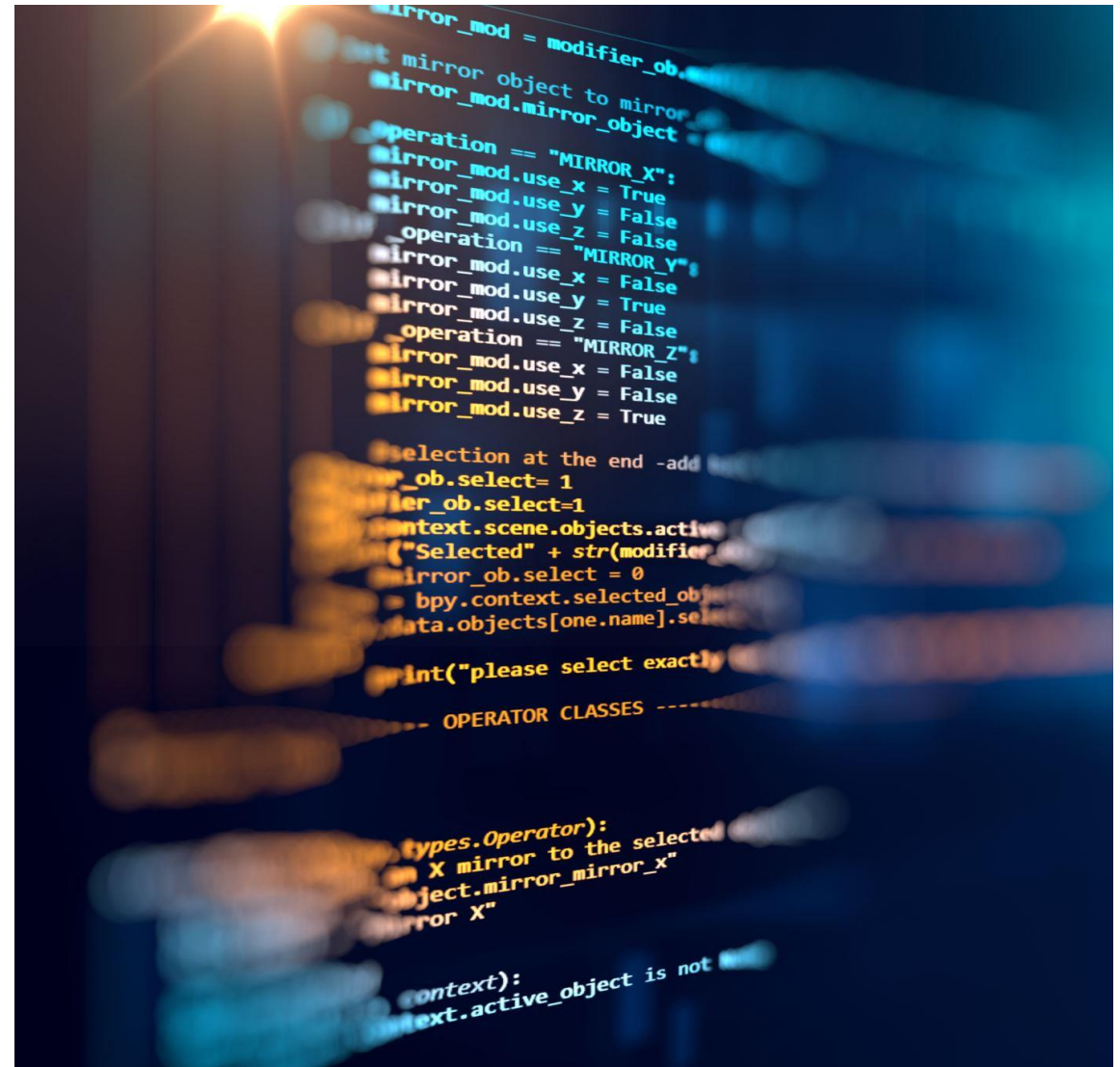


Multi-Tier Approach



WHAT IS DIGITAL DIRECT?

- Digital Direct is an operational approach leveraging e-retrieval to...
- Chase all members on a plan using claims data, rather than a targeted list in traditional methods
- Run a digital chase to acquire all digitally accessible charts
 - By doing so, increase the % of digital charts accessed annually, even those that would not have been traditionally assigned for retrieval
- Benefit from a larger digital chase since the CPC's are lower compared to other retrieval methods





WHY LEAD WITH DIGITAL?

- Benefits for health plans
 - Rapid HCC gap closure
 - More complete member data acquisition
 - Accelerated submission opportunity
 - Low cost
 - No provider abrasion

What to look for in a Digital Direct program?



Deep Provider Database

Extensive experiential database to inform which NPI/Location/Provider is connected to which EMR system



Accurate Provider Matching

Accurate provider matching that allows better matching of client data to EMR connections.



Accurate Member Matching

Accurate Member Matching logic which allows us to achieve better member matching.



Structured CCDA documents from EMR Vendors

Look for solutions that not only renders the EMR data feed into a medical chart but also has the capability to provide the clinical extraction of the EMR data in a structured format.



Advanced Stylesheets

Look for solution that offer advanced stylesheets to render the data into a usable medical record tailored to risk adjustment, with a focus on the sections needed for coding. Key is to suppress unnecessary information and provide all face-to-face encounter data.



Poll #2

- What percentage of your medical records are being retrieved digitally – without any manual effort?
 - Less than 5%
 - 6% - 20%
 - 21 – 35%
 - Over 35%

Current Model

Payor is requesting Ciox to collect a specific medical records for a targeted member from a specific provider and POS (place of service) with a list of specific clinical data elements

Example of MRA Request

Client Requested Data:

Patient: **John Doe**

Provider: **Emory Clinic** Address: **1200 Main Street, Atlanta GA**

Request Type: Medicare Risk Adjustment (MRA)

Dates of Service: **2020 to Present**

Ciox Workflow

Ciox retrieves the patient's medical chart from Emory Clinic at 1200 Main St. Atlanta, GA

Ciox collects the specific list of clinical items which are required for MRA:

- All Progress Notes from 2020
- History and Physical
- Discharge Summary
- Pathology Report
- Demographic Sheet
- Procedures Notes

Example of HEDIS Request

Client Requested Data:

Patient: **John Doe**

Provider: **Ruth Cohen, MD** Address: **20 North St. Stamford, CT 06903**

HEDIS Hybrid Measure: **Adolescent Well-Care visit (AWC)**

Dates of Service: **2020**

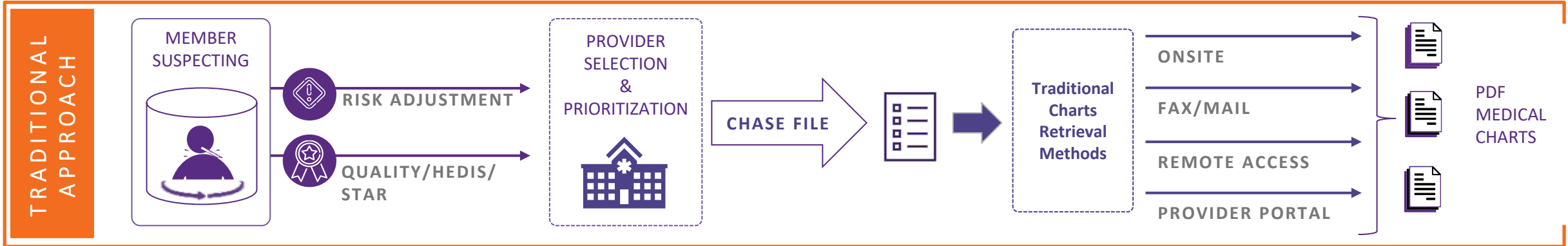
Ciox Workflow

Ciox retrieves the patient's medical chart from Dr. Ruth Cohen pediatrics practice in Stamford, CT.

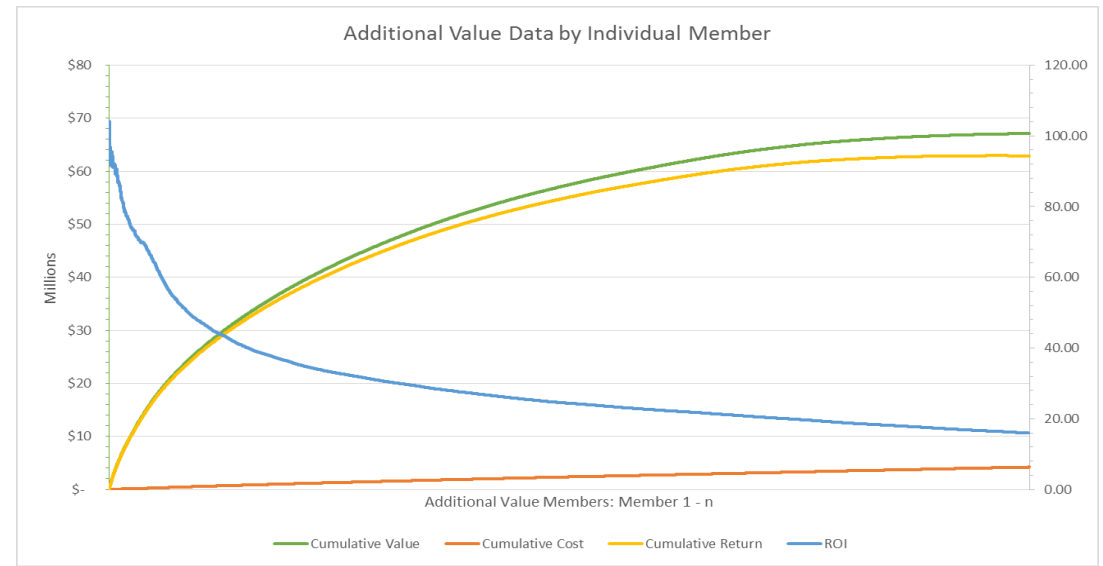
Ciox collects the specific list of clinical items which are required for the AWC HEDIS measure:

- All Progress Notes from 2020
- BMI and Growth Charts (all DOS)
- Immunization records (all DOS)

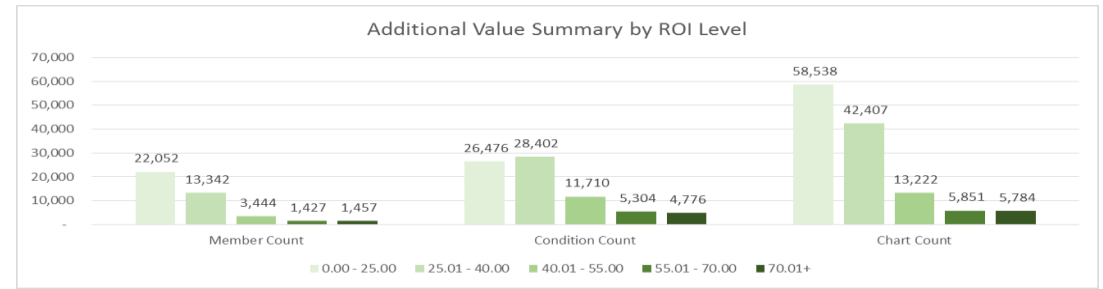
CURRENT PAYOR SUSPECTING PROCESS



Cumulative Value	Cumulative Cost	Member Count	Chart Count	Condition Count	ROI
\$ 5,007,537	\$ 56,129	393	1,678	1,457	89.21
\$ 10,001,302	\$ 132,362	962	3,957	3,393	75.56
\$ 15,002,323	\$ 217,091	1,678	6,490	5,321	69.11
\$ 20,004,211	\$ 344,435	2,578	10,297	8,872	58.08
\$ 25,002,093	\$ 507,169	3,755	15,162	13,418	49.30
\$ 30,002,852	\$ 688,836	5,213	20,593	18,371	43.56
\$ 35,000,209	\$ 909,572	6,975	27,192	23,658	38.48
\$ 40,000,743	\$ 1,157,437	9,084	34,602	29,271	34.56
\$ 45,001,600	\$ 1,425,773	11,607	42,624	34,911	31.56
\$ 50,000,102	\$ 1,747,093	14,648	52,230	41,063	28.62
\$ 55,000,150	\$ 2,135,481	18,499	63,841	48,228	25.76
\$ 60,000,623	\$ 2,611,910	23,711	78,084	55,900	22.97
\$ 65,000,301	\$ 3,296,999	31,445	98,565	65,605	19.71
\$ 67,050,927	\$ 4,208,077	41,722	125,802	76,668	15.93



- Factors impacting member selection & prioritization:**
- Provider abrasion and limitation of charts per provider office
 - Retrieval & Coding cost (i.e. retrospective budget limitation)
 - Copy Service fees
 - Turn-around time



PRESENT VS FUTURE STATE



MANUAL RETRIEVAL
Fax, Mail, Onsite, Portal, Copy Services
PDF Document

DIGITAL RETRIEVAL
API, CCDs, HIEs, Aggregators
XML or FHIR structured data



MEMBERS TARGETED
Retrieving medical records for sub-set of the entire member populations based on prioritization (high risk, gap in care, etc.)

ALL MEMBERS
Collection of data for all members using digital connections



PROVIDER TARGETED
Collection of medical record from a specific pre-selected provider office

QUERY ALL PROVIDERS
Collection of member's data across all available connected providers





USE CASE SPECIFIC
Only retrieving partial clinical information based on the requested use case (for example, clinical notes, face-to-face visits for RA)

COMPLETE DATA EXTRACTION
EMR extraction of entire clinical data and filtering to match use case



RETROSPECTIVE
Retrieving medical records from previous year date of service

CONCURRENT
Data retrieval of medical current post visit in the current year





DIGITAL DIRECT™
MEMBER LOCATOR

Member querying and electronic data collection across multi-network digital sources



DIGITAL DIRECT™
PROVIDER LOCATOR

Claims or Provider engine to identify existing digital connections



DIGITAL DIRECT™
DIGITAL STREAM

Near real-time clinical data extraction, post member's encounter utilizing ADTs, triggers and claim matching algorithm



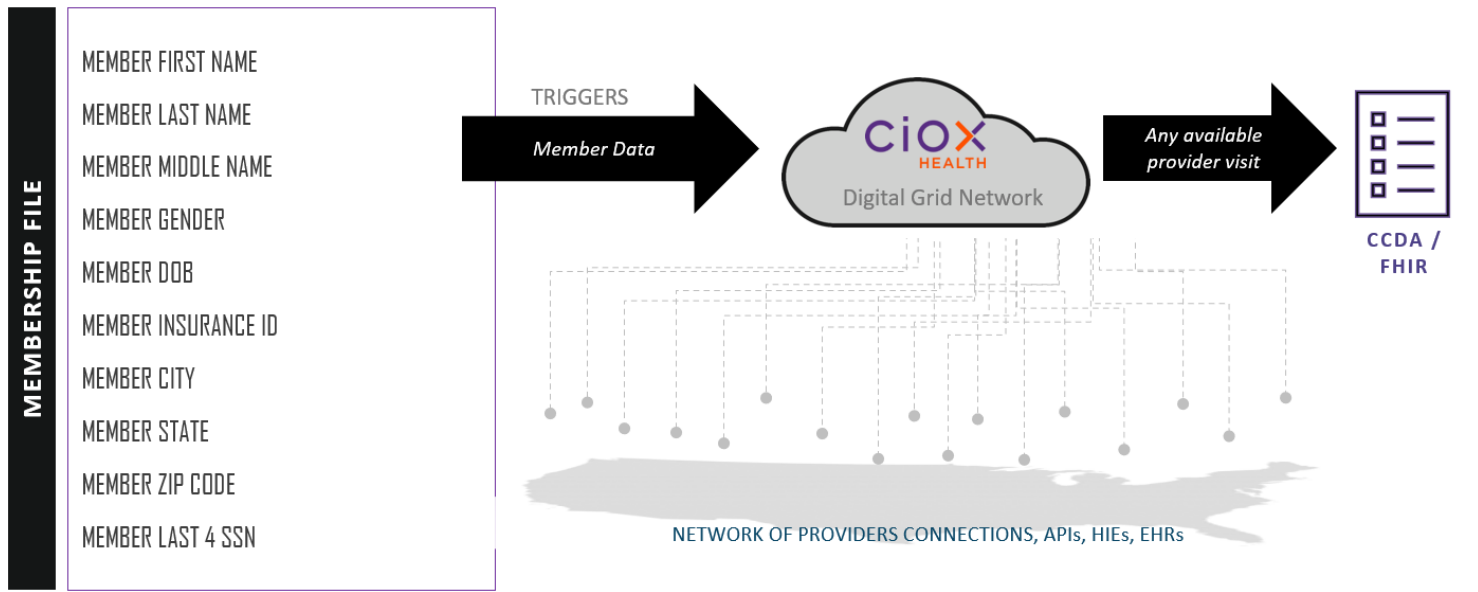
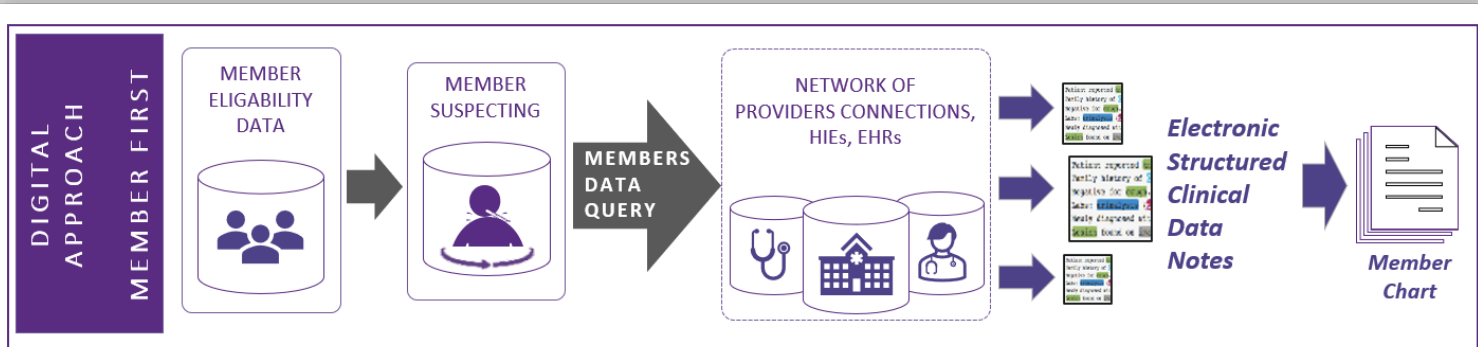
DIGITAL DIRECT™
BUNDLE SOLUTION

Delivery of enhanced structured clinical data with normalized SDoH attributes



DIGITAL DIRECT™
MEMBER LOCATOR

Member querying and electronic data collection across multi-network digital sources



Client Data Required

Membership data file.
Required fields: Member First and Last Name, DOB, Gender, and Member home address.
Can also include new members to the plan.

Workflow

Querying entire digital network by utilizing member demographic information.
The solution is extracting any codable encounter visit within the requested dates range

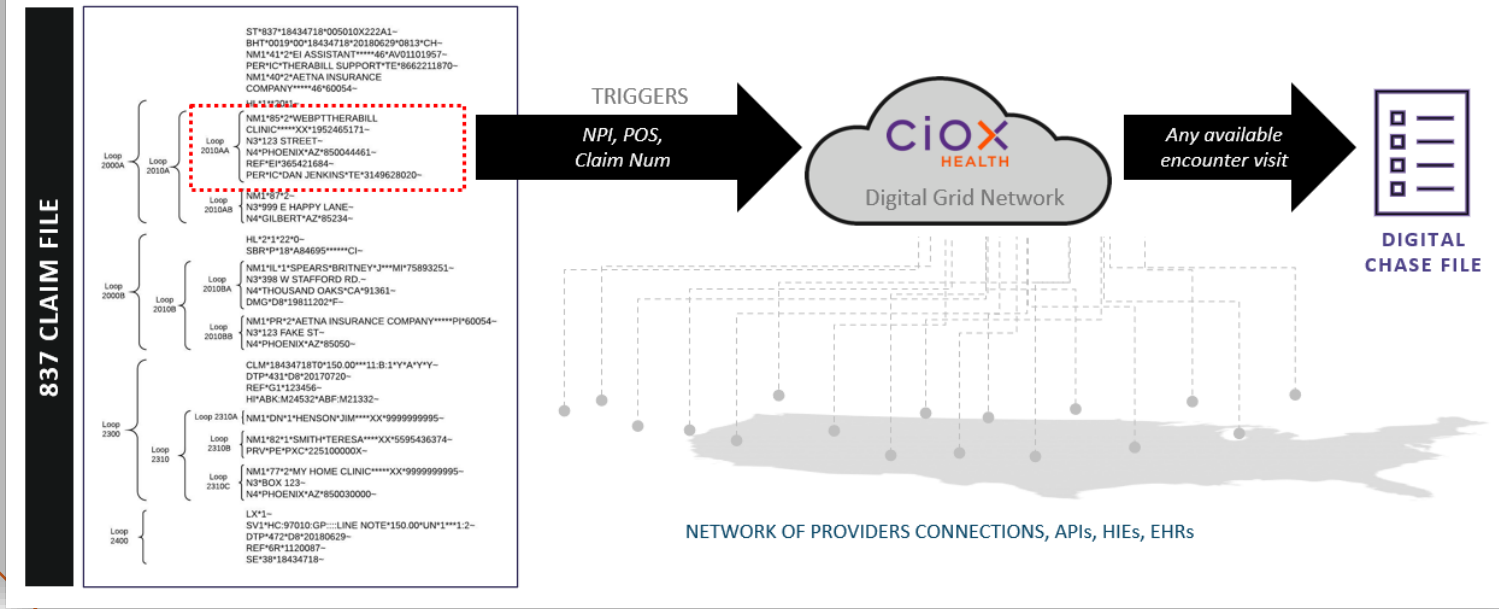
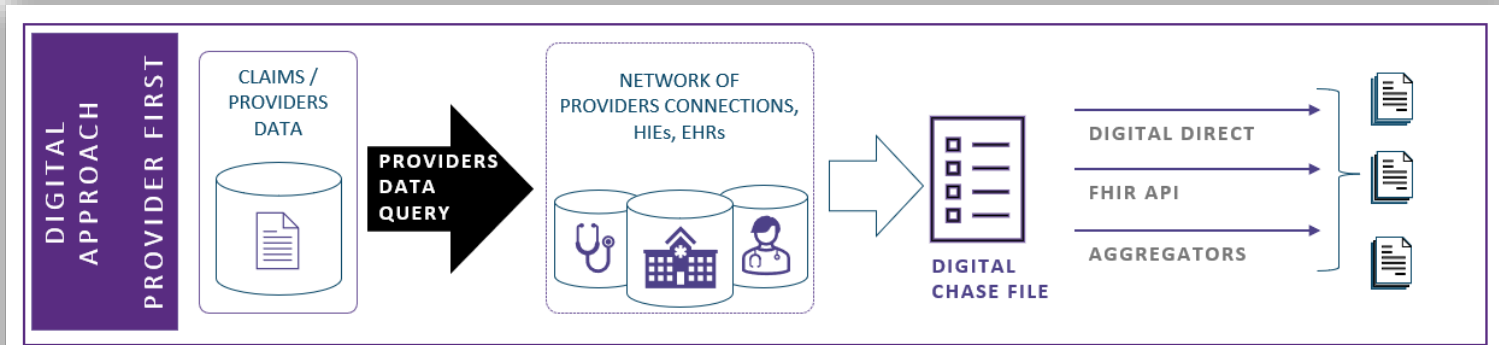
Value Proposition

- Collection of data for new members without historical claims information
- Collection of data for members which were not included in the suspecting/targeting list
- Collection of data for members which the traditional effort has been exhausted



DIGITAL DIRECT™ PROVIDER LOCATOR

Claims or Provider engine to identify existing digital connections



Client Data Required

Claims or provider data file

Required fields: Provider demographic information + NPI

Additional not required fields: Claim number, TIN, etc. .

Workflow

Pre-matching of provider electronic connections to maximize utilization of digital charts

The solution analyzes providers demographic data and links to the applicable digital solution and EMR platform

Value Proposition

Maximizing the number of collected charts from providers with existing connections.

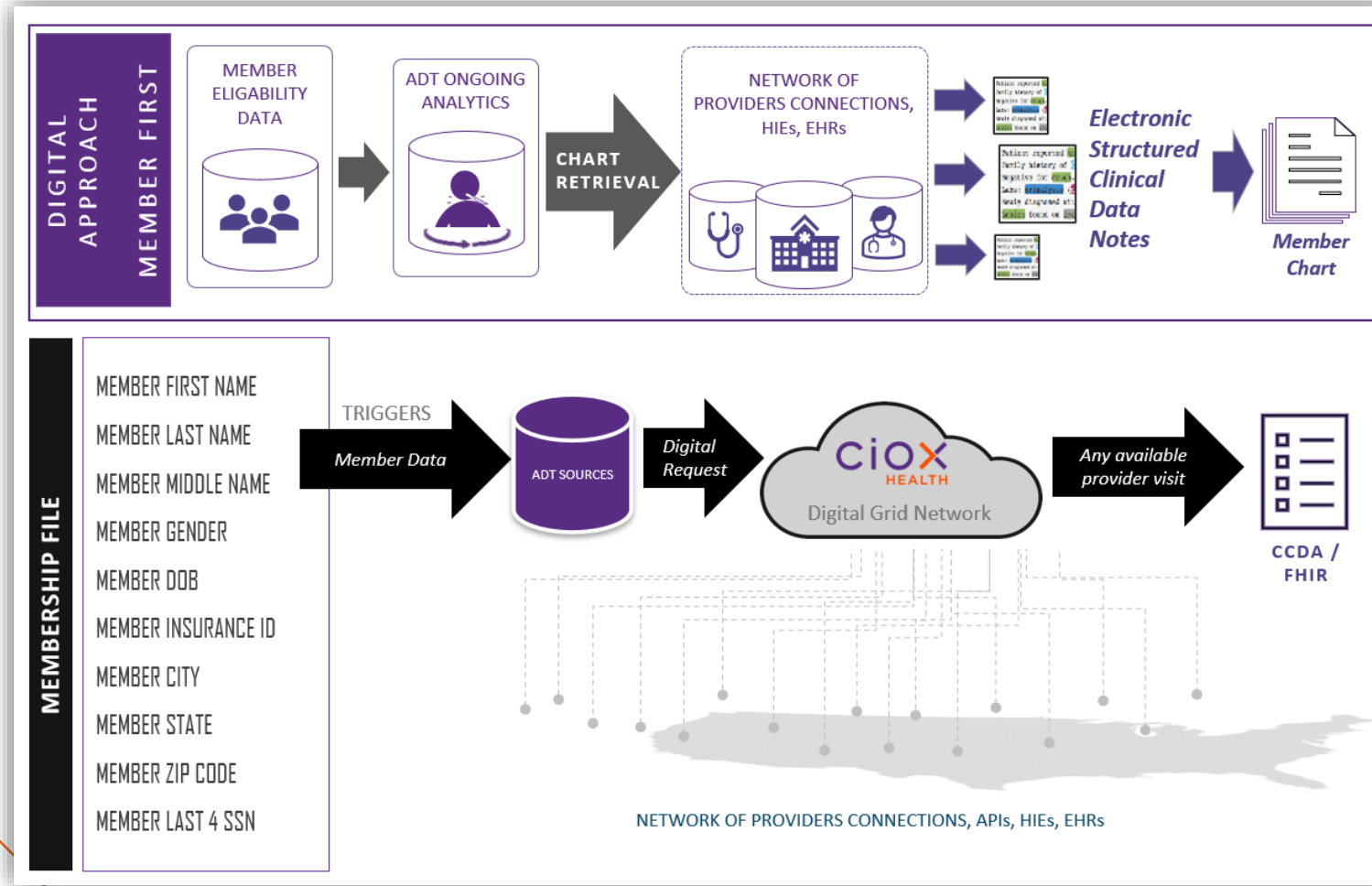
Reducing the need to retrieve charts from “hard-to-get” provider offices.

Can be run before any other traditional retrieval campaigns is being initiated



DIGITAL DIRECT™
DIGITAL STREAM

Near real-time clinical data extraction, post member's encounter utilizing ADTs, triggers and claim matching algorithm



Client Data Required

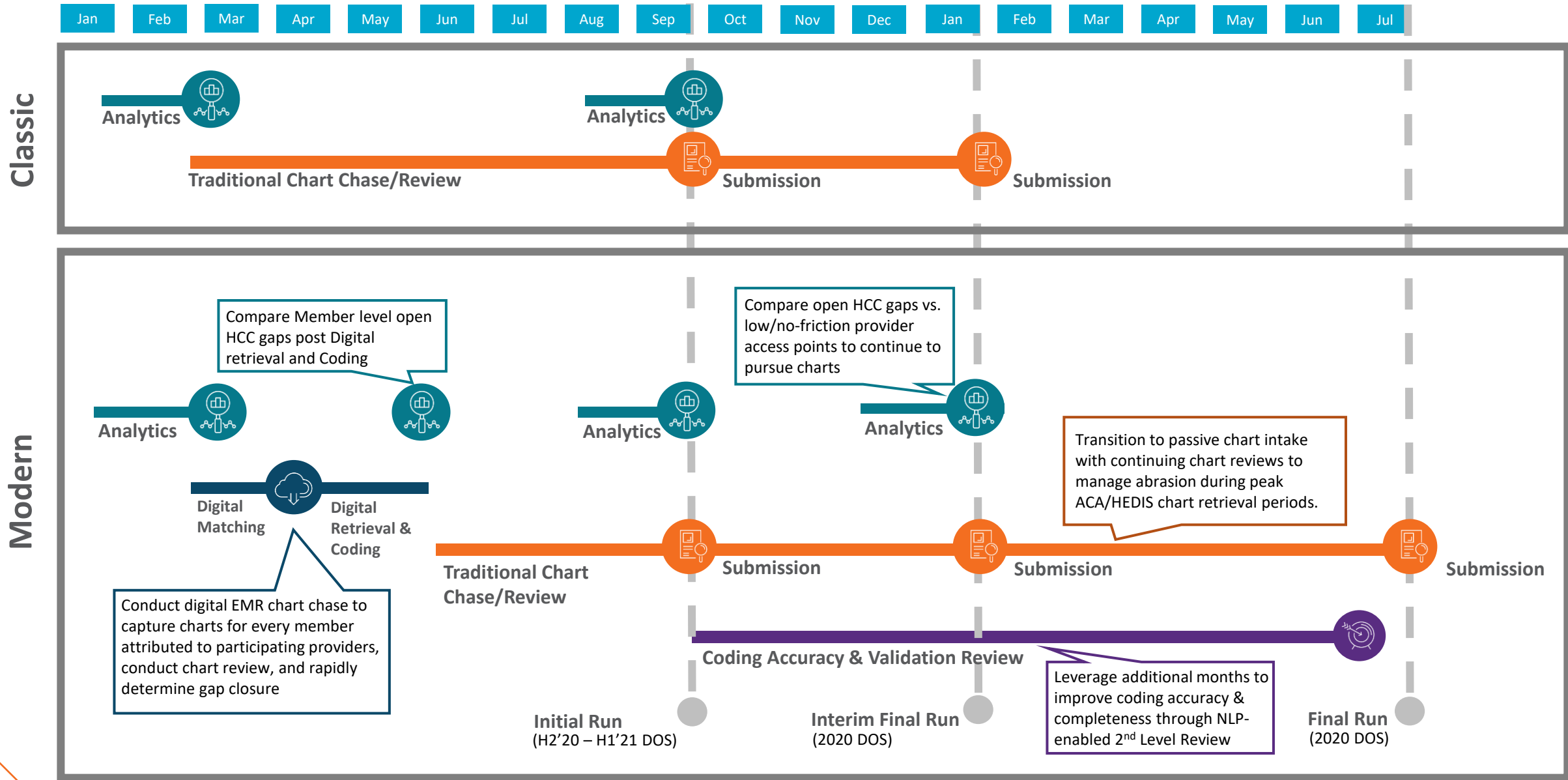
Monthly Membership data file.
Required fields: Member First and Last Name, DOB, Gender, and Member home address.
Can also include new members to the plan.

Workflow

Near real-time Alerts/Triggers solution which identifies patient's visit and extract the medical chart post discharge
The solution supports both inpatient and outpatient visits

Value Proposition

Streaming of patient data post their visit (concurrent vs. retrospective review)
Enabling to identify patient risk, gap in care within the current year (Risk Adjustment, STAR, HEDIS, etc.)
Utilization of clinical data for multi use cases



Key Takeaways

- Digital fulfillment is the preferred methodology of providers and payers should adopt it to reduce provider abrasion and receive better member data
- Digital Direct approach has multiple benefits to payer and provider including reduced manhours, quicker access, greater quality & improved security
- When selecting a vendor for Digital Direct program things to consider: Scale, multi-tier approach, provider & member matching accuracy, experiential provider database

THANK YOU

