Clinical NLP MEATs Risk Adjustment

Presented By:

Amy Campbell, RN, MSM, CCDS-O, *Clinical Documentation Improvement Director*— **Wolters Kluwer, Health Language**Melissa James, CPC, CPMA, CRC, *Risk Adjustment SME, Senior Consultant, Coding Specialist*— **Wolters Kluwer, Health Language**





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.

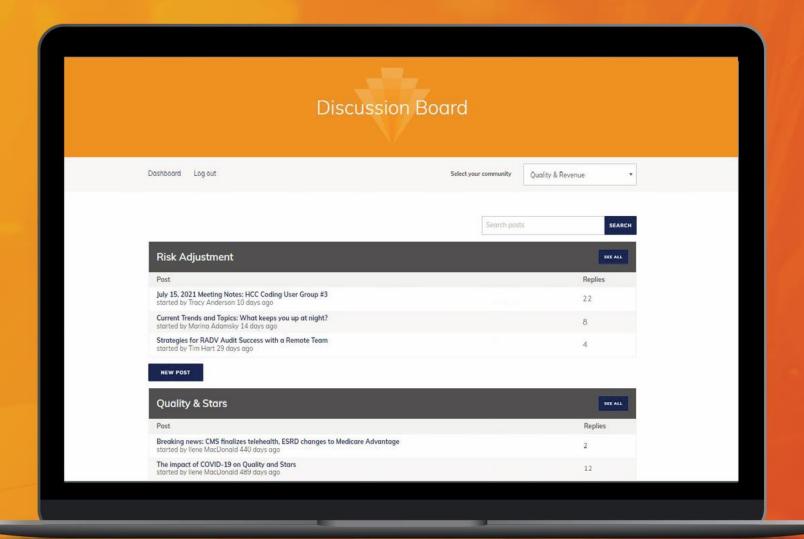
ONE ASSOCIATION THREE COMMUNITIES







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ASK YOUR QUESTIONS IN OUR DISCUSSION BOARD

Today's presenters:



Amy Campbell, RN, MSM, CCDS-O

Clinical Documentation Improvement Director

Wolters Kluwer, Health Language



Melissa James CPC, CPMA, CRC

Risk Adjustment & Coding Specialist, Senior Consultant

Wolters Kluwer, Health Language





Today's agenda

- Top challenges in Risk Adjustment Coding Operations
- Existing computer assisted automated coding technology used today
- Shortfalls of current technology
- How the right technology can improve both retrospective and prospective risk adjustment workflows
- How to get started

Top challenges in risk adjustment coding operations

- CMS Final Rule on repayment methodologies-delayed (again) until 2/01/2023
- Rate and pace of RADV/OIG audits

REMEMBER: ROI is not just an increased RAF, it is also about staying out of the headlines!



SURVEY QUESTION #1

Is your organization using technology to address these challenges?

- 1. No we do not use technology; no plans to
- 2. No we do not use technology; plan to in the future
- 3. Yes we use a coding tool, but not NLP
- 4. Yes we use technology with NLP
- 5. Not sure?

Common shortfalls of current risk adjustment workflows

ARE YOU USING THE WRONG TOOL?

- Workflow challenges
- Is 95% accuracy good enough?
- Leveraging technology
 - Areas of risk
 - Opportunity
- Dangers of bad technology
- Bridging the communication divide



SURVEY QUESTION #2

If you're using NLP technology for chart review and risk adjustment workflows, what's your opinion? Where do you stand?

- a) Love it, makes my job easier!
- b) Returns too much noise, doesn't save time
- c) Don't trust it, it misses diagnoses
- d) Hate it, waste of money!
- e) We don't use it

Physical Examination:

- Vitals: BP 135/90, R 13, P 80 and irregularly irregular, Weight 167 lbs., Height 5'6"
- HENT: unremarkable
- Neck: supple
- Lungs: clear to auscultation
- CVS: heart regular rhythm, no murmurs. Mild ankle edema. Pedal pulses 1+ bilaterally
- Abdomen: soft
- Musculoskeletal: Normal strength and gait
- Neurological: oriented times three, normal speech, no weakness in extremities, monofilament foot sensation test notable for decreased sensation on the left.

Assessment

- · Hypertension: better controlled on current regimen
- Diabetes control improving with better adherence to diet.
- Paroxysmal atrial fibrilation now on Xarelto and Tikosyn (Dofetilide) due to elevated stroke risk.
 Managed by cardiology.
- Type 2 diabetes mellitus with diabetic chronic kidney disease
- Chronic kidney disease, stage 3b. eGFR remains stable. Will optimize treatment for DM and HTN.
- · Diabetic polyneuropathy, mild
- Lupus erythematosus, no active disease. Will repeat ESR in two months.

Plan

- Continue current medications
- Follow-up with cardiology for management of <u>atrial fibrillation</u> and anticoagulation.
- Emphasize need for strict adherence to ADA diet
- Referral to podiatry to prevent potential skin lesions
- Return to clinic in 4 weeks or as needed
- Neurology referral

Technology Evolution

How can it enable coder workflow



What if you had the right technology to transform risk adjustment...

... your tool surfaced the clinical indicators for each diagnosis

...you could choose which clinical indicators were attached to the conditions you coded

...charts were organized appropriately to streamline your workflow

The Coder Workbench does it all.





CHART TABLE OF CONTENTS

Table of Contents Q Search Sort by: Newest First 02/27/2021 Progress Note Outpatient · Review Of Systems · Social History Physical Exam Assessment Plan Progress Note Outpatient 01/19/2021 · History Of Present Illness · Review Of Systems Social History · Physical Exam · Assessment Plan Progress Note Outpatient 01/03/2021 · Review Of Systems · Social History

SURFACED DIAGNOSES & CLINICAL INDICATORS

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PRE-POPULATED DIAGNOSIS CARD

Paroxysmal atrial fibrilation		
ICD-10 Code *		
148.0 Paroxysmal atrial fibrillation		
Refine	☐ Gu	idelines
Note Type	Encounter Date	
Progress Note Outpatie	02/27/2021	1
Provider Type		
e.g. Physician		~
Richard Rodriguez, MD	Signature	
Supporting Documentation	n	
Recommended \vee		
MedicationStatement:	Xarelto	
MedicationStatement:	Tikosyn	
Condition: irregular he	eartbeats	
MedicationStatement:	Xarelto	
MedicationStatement:	Tikosyn	
Condition: irregularly irregular		
MedicationStatement: Xarelto		
☐ MedicationStatement: Tikosyn		

Prospective risk adjustment is founded in retrospective risk adjustment

- What is prospective risk adjustment?
- How does an organization get started in this "newer" frontier?
- Queries must be compliant
 - If unsure reference: <u>ACDIS/AHIMA Guidelines for Achieving</u> <u>a Compliant Query Practice—2022 Update</u>
- Consider pre-drop tactics to ensure accuracy



The Coder Workbench was designed to be a springboard for other workflows

Leverage the right technology to ensure successful risk adjustment programs



EXTRACT

Clinically trained NLP with embedded coding intelligence extracts clinical insights from unstructured data



ORGANIZE

Coder Workbench organizes
the medical chart,
facilitating a streamlined
coder review workflow



ACCELERATE

Perform accelerated record review for retrospective and prospective risk adjustment workflows

Correct for the future with the Health Language Coder Workbench

THANK YOU!

Please reach out, we'd love to connect with you!



Amy Campbell, RN, MSM, CCDS-O
Clinical Documentation Improvement Director
Wolters Kluwer, Health Language
Amy.Campbell@WoltersKluwer.com



Melissa James CPC, CPMA, CRC

Risk Adjustment SME & Coding Specialist, Senior

Consultant, Wolters Kluwer, Health Language

Melissa.James@WoltersKluwer.com

EVENTS & PRESENTATIONS COMING UP:

RISE Risk Adjustment Forum

November 28-30th in Scottsdale, AZ

Panel Presentation: A Perspective from the Plan Level: Engaging your

Provider to Improve Documentation

RISE Sponsored Webinar

December 8th

More information coming soon!

Visit our website to learn more about Health Language Risk Adjustment Solutions!

