Case Study: Risk Adjustment – 2nd Level Review

HHS-HCC score increased from 3.89 to 4.4 across ACA members

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Client Background and Context

National Health Plan with 3.5M+ members. The Fortune 500 client found gaps in their coding & claims data collection/submission process for a subset of their ACA population. The client wanted to ensure accurate & complete code capture with compliance and quality.

Solution

2nd level review through NLP and certified coders on charts previously reviewed by another vendor

Leveraged flexible solutions for chart review in entirety to validate conditions, find deletions & identify missed conditions

Accurate HHS-HCC risk scores for appropriate reimbursement

Impact Delivered

13% higher risk factors conditions identified (HHS-HCC risk score increased from 3.89 to 4.4) from Level 1 to Level 2

12% increase in conditions from first level review of reviewed member population

ACA: Affordable Care Act
HHS-HCC: Health & Human Services - Hierarchical Condition Categories