

Improve care quality and risk adjustment at the point of decision making.

Patient-focused, just-in-time intervention management engages providers.

Healthcare organizations face a compelling combination of challenges: providing comprehensive care and disease management across the continuum of care while maintaining financial viability in a dynamic, value-based environment. And with the new care and payment models supported by Medicare Advantage plans, Accountable Care Organizations, and others, providers shoulder more accountability and financial risk today.

With a shift toward outpatient care, effective population health management strategies become even more essential to your success, but many providers lack the resources to proactively identify and assess high-risk patients as well as the ability to improve the quality of clinical documentation.

Optimizing patient outcomes amid a changing landscape

The Nuance® Quality and Risk Adjustment platform offers patient-focused, just-in-time intervention management that enables:

- Proactive targeting of chronic conditions with high-risk patient scheduling
- Efficient presentation of opportunities to providers
- Improved documentation of care
- Enhanced communication between caregivers
- Improved HCC capture rates
- Greater accuracy of Risk Adjustment Factor (RAF) scores

In-workflow intelligence delivers context-aware, personalized clinical guidance at the point of decision making. This approach ultimately leads to better planning, treatment, and patient care, as well as appropriate reimbursement.

With Nuance Quality and Risk Adjustment, physicians and coders can capture a broader picture of each patient's chronic conditions, looking beyond the obvious to create a more coordinated, proactive, and compliant practice.

Engaging and supporting your providers with a comprehensive approach

The journey to value-based care is different for every organization, and requires a strategic partner that can provide enterprise-wide value throughout your journey. Nuance Quality and Risk Adjustment solutions make sense of both structured and unstructured health information and bring that highly curated insight to providers, engaging them in their own workflows.

Help providers improve documentation quality without compromising patient care

- Integrates seamlessly with your electronic health record (EHR) so physicians can focus on patients and not the technology
- Helps ensure providers document requirements for HCC coding and achieve accurate RAF scores
- Ensures no conditions are missed by recapturing suspected HCCs
- Drives better care and appropriate reimbursement through complete capture of diagnosis, complications, and comorbidities (CC/MCC)
- Automates extraction of diagnosis codes to save time and ensure the right codes make it to the claims—the first time, every time

Experience makes the difference

Nuance's heritage builds on decades of clinical expertise, technology innovation, and experience with EHR workflows that are designed to improve provider engagement. We have direct and successful experience in the HCC coding environment, including proven strategies for provider change management, compensation, and leadership planning.

Automating complex risk adjustment coding processes is enabled through machine learning, natural language processing (NLP) technology, sophisticated rules engines, and a rich medical taxonomy. These combine to help improve documentation quality by identifying inaccurate or missing condition codes in patient data, as well as by making evidence-based code recommendations. In short, clinicians and professional coders can quickly close coding gaps at the point of care.

Nuance Quality and Risk Adjustment solution features

Automated chart review	Artificial intelligence (AI) drives the proactive evaluation of patient data, including structured and unstructured data and prior claims, evidence of chronic/risk-adjusted conditions, and other quality improvement opportunities.
In-workflow advice	Computer-assisted physician documentation (CAPD) brings in-workflow clinical guidance to accurately identify and document all relevant conditions at the point of care to find suspected HCCs, to add greater specificity, and to search for alternative diagnoses. Extracted codes facilitate charge capture workflow so appropriate codes are included in the claim.
Analytics and coding workspace	Population health and HCC specialists can review opportunities and launch campaigns to improve patient outcomes and improve the accuracy of RAF scores, as well as monitor and improve overall program performance. Coding teams can also automatically identify and extract diagnosis codes from patient documentation to facilitate charge capture.
Process improvement and education services	Through training, demonstrations, and coaching, our experienced consultants help your team establish a mutual understanding of the program and implications of value-based care, including Medicare Access and CHIP Reauthorization Act (MACRA) and CMS Star Ratings. We will help facilitate the establishment of a governance/steering committee to help keep your program on track.
Change management and provider alignment	Change management strategies and meaningful incentive programs encourage provider acceptance and participation to support MACRA and new payment models in alignment with organizational goals.
Program health checks and continuing education	Measure your team's success in having a positive impact on risk adjustment and quality scores through quarterly performance reviews and ongoing education.

A win for patient care: streamlining risk adjustment coding through better documentation

- Uncover missed condition codes and documentation gaps
- Engage physicians with in-workflow solutions and actionable clinical guidance
- Increase coding accuracy and efficiency to improve productivity by 2-3X
- Identify high-risk patients and improve care planning and outcomes
- Improve risk score accuracy by 15-20%
- Ensure more accurate reimbursements and reduce denials

To learn how Nuance Quality and Risk Adjustment can ease the clinical documentation burden for your care teams and improve the accuracy of risk adjustment performance, please call 1-877-805-5902 or visit nuance.com/healthcare.

About Nuance Communications, Inc.

Nuance Communications, Inc. is a leading provider of voice and language solutions for businesses and consumers around the world. Its technologies, applications and services make the user experience more compelling by transforming the way people interact with devices and systems. Every day, millions of users and thousands of businesses experience Nuance's proven applications. For more information, visit www.nuance.com/healthcare or call 1-877-805-5902. Connect with us through the healthcare blog, [What's next](#), [Twitter](#) and [Facebook](#).

