Avoid rework so you can check up on your patients, not your documentation.

Hospital staff burnout is fueled by documentation rework and retrospective queries and burnout leads to an exponential rise in medical errors, denials, and increased costs.

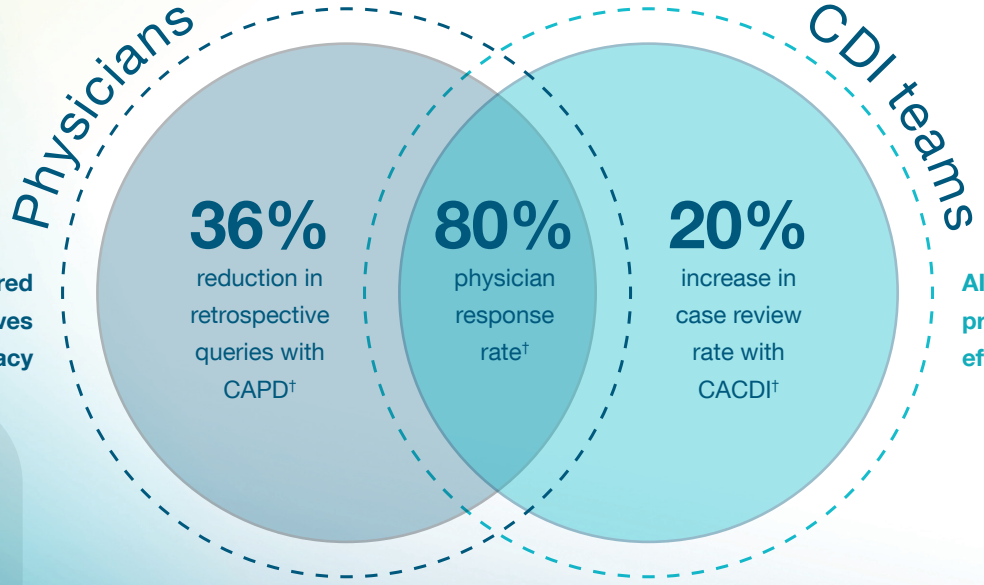
200% increase in medical errors as a result of burnout[1]

15 minutes spent by physicians reviewing every retrospective query[2]

26% of all surgical cases are delayed up to 30 days due to coding queries[3]

64% of Medicare FFS improper payments are attributable to insufficient documentation[4]

Computer-assisted solutions provide in-workflow guidance with the right information to support clinical quality initiatives, reimbursement and regulatory requirements.



AI-powered guidance improves accuracy

AI-powered prioritization improves effectiveness

Powered by AI. Built for outcomes.

Delightful provider experience

93% of clinicians state that Nuance makes it easier to quickly capture the complete patient story†

86% surgical CAPD voluntary adoption rate†

Optimized and utilized EHR

100M clicks eliminated a day†

<90 secs to create compliant notes†

Quality integrity

36% improvement in capture of extreme Severity of Illness (SOI)†

24% improvement in capture of extreme Risk of Mortality (ROM)†

Financial integrity

54% improved reimbursement accuracy†

39% increased accuracy of expected length of stay†

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For more information, visit nuance.com/go/healthcareai

Diagnosis specificity

Patient notes are analyzed for diagnosis specificity and real-time CAPD advice is presented so that the encounter can be ICD-10 or HCC coded, impacting DNFB and risk adjustment and identifying potential HACs.

"We were impressed with Nuance's proven ability to enable us to deliver significant financial return and improved quality metrics through its CAPD solutions. Nuance's superior technology, commitment to innovation and strategic development relationship with Epic, were key factors in our decision."

Kory Hudson, MBA, RHIA, CPHIMS
Director of Information Systems, Singing River Health System

"As a physician, I think the real value of the solution is that it's not disruptive. If you are going to ask a question to clarify something ask me when I'm in the note, not an hour or a day later. If I've moved on, the question is an interruption in my day."

Dr. Ehab Hanna, CMIO
Universal Health Services

Clinical guidance

All encounter data is analyzed for supporting clinical evidence and undocumented diagnoses and CAPD presents in-workflow clinical clarifications that impact principal diagnosis and severity.

Specialty workflows

Provider specific workflows address the unique documentation requirements for specialists, such as surgeons and radiologists, ensuring sufficient detail for appropriate reimbursement and quality reporting.

"With Vincari Surgical CAPD, my operative note is complete before I even speak to the patient's family. Every time."

Benjamin J Ditty, MD, Neurosurgeon
Greensboro Specialty Surgical Center

"We considered other vendors during the selection process, but felt the Nuance CACDI technology and overall CDI services were a better fit, especially from a data and analytics perspective."

David Parker, CIO
Magnolia Regional Health Center

CDS efficiency and productivity

Computer-assisted solutions impact CDS review rates so teams can cover more cases, initiate more impact clarifications and expand beyond Medicare to commercial payers.

More to explore!

With Nuance's full portfolio of AI-powered solutions and services, care teams will no longer relive their days serving technology, but rather better serve their patients and themselves. For more information, visit nuance.com/go/healthcareai.

Sources

1. American Medical Association. *Joy in Medicine Physician well-being: A discussion on burnout and achieving joy in practice.* AMA SL2: Share, Listen, Speak, Learn Series. December 2017. Webinar.
2. Based on analysis of Nuance client data. March 2018.
3. Based on analysis of Vincari Surgical CAPD client data. March 2018.
4. U.S. Department of Health and Human Services. *2017 Medicare Fee-for-Service Supplemental Payment Data.* January 2018. HHS, www.hhs.gov/afr.

†: Nuance client outcomes analyzed as of March 1, 2018.
Additional source information on file and available upon request.

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