

Target ICD-10 Risks and Accelerate Your Transition

The migration from ICD-9 to ICD-10 has forced the modification of many health plan business processes and policies, including benefits, provider contracting and medical management. Even after the transition date, health plans will need to continuously assess and manage financial and operational impacts in order to maintain neutrality.

The Edifecs Impact Analytics solution lets health plans embrace an iterative approach to analytics. It helps them identify and quantify real-world risk both during the migration to ICD-10 and after the transition. Using business intelligence tools, Edifecs helps leading organizations use their own data, standard and organization-specific ICD-9 to ICD-10 maps and MS- and APR-DRG groupers to compare results. With neutrality the aim, the insight gained helps organizations understand the real picture of what providers bill in ICD-10 in comparison with how claims had been coded in ICD-9. Businesses can anticipate smoother operations through the transition by actively managing these provider results today.

WHY EDIFECES IMPACT ANALYTICS?

- Leverage historical data to understand financial and operational risks in ICD-10.
- Employ an iterative approach to refine impact analysis from adjusting CMS GEMs and custom code maps through all phases of ICD-10 transition.
- Visualize MS- and APR-DRG assignments, DRG shifts and associated financial risks by codes, lines of business, types of providers and other variables.
- Continuously manage high-variance DRGs with providers to maintain neutrality after the transition.
- Use interactive dashboards to identify risks and visualize impacts.

Capabilities

Before and after the transition to ICD-10, Impact Analytics enables health plans to use an iterative approach to effectively refine code maps, including CMS GEMs and organization-specific maps, and identify financial variances. By running the same data through both MS and APR groupers and comparing results by codes, DRGs, lines of business, and other dimensions, organizations can better manage financial, operational and relationship risks.

EDIFECES ICD-10 IMPACT ANALYTICS:

- Compares ICD-10 claims to their ICD-9 values for analysis of financial impact by provider, code, DRG and other dimensions.
- Imports paid claims history in HIPAA or proprietary formats.
- Provides various interactive dashboards for executives, project leaders and business analysts to visualize risk on ongoing basis.
- Displays MS- and APR-DRG-mapping complexity and risks based on historical institutional claims data for comparison and analysis.
- Presents options including forward, backward and consolidated forward-and-backward mappings.
- Offers easy-to-use tools to load maps from other sources, analyze and refine current maps or create new ones.
- Analyzes mapping complexity and risk by pivoting data, overlaying filters and automatically identifying codes with high billings, frequency or complexity.
- Shows mapping options using an interactive visual diagram that depicts the combinations available for each code.
- Supports reporting needs and ongoing changes for APR- and MS-DRG groupers.
- Exports data in a standard format for use in other tools, including Edifecs Code Management and Test Management, Microsoft Excel and other applications.

Benefits

As shown in the following table, Edifecs ICD-10 Impact Analytics accelerates successful migration and helps mitigate the financial risks to neutrality following the transition.

BENEFITS	SUPPORTING FEATURES
Accelerate ICD-10 analysis, reducing cost and time	<ul style="list-style-type: none"> Visualize MS- and APR-DRG assignment risks by codes, lines of business, provider specialties, provider facilities and other dimensions. Automate analysis and visualization of historical data to eliminate manual activities, shorten analysis cycle and lessen use of billable resources. Use dashboards showing historical claim experience and mapping classifications to understand mapping complexity at code level to pinpoint especially risky areas, and thus identify most important migration activities.
Help prioritize work required to transition critical functional areas to ICD-10	<ul style="list-style-type: none"> Identify individual providers or provider categories posing high risk for payment variation in the ICD-10 environment based on diagnosis/procedure codes or MS- and APR-DRGs. Help disease teams set priorities by identifying procedure and diagnosis codes with many possible permutations in ICD-10. Assist claim adjudication remediation and configuration teams in setting priorities by identifying the procedure and diagnosis codes that contain many possible permutations in ICD-10. Help quality improvement and medical policy teams revise their programs, documentation and reporting by identifying the ICD-9 codes in current medical policies that will have a large number of possible permutations in ICD-10.
Mitigate financial risk of ICD-10 migration and highlight path to financial neutrality and policy parity	<ul style="list-style-type: none"> Import claim history from production data in all HIPAA and custom formats (as well as proprietary claims) to ensure financial analysis relevant to individual customer's experience, market and practices. Automatically identify codes with highest financial risk of over- or underpayment based on billed and paid amounts, frequency of use and mapping complexity. Use iterative approach to refine code maps and relations and identify financial variances. Automatically identify MS- and APR-DRGs with the highest financial risk of over- or underpayment based on changes in ICD code to MS- and APR-DRG assignments. Analyze mapping complexity and risk, filtering by disease.
Maintain neutrality post ICD-10 transition using your own benchmark data	<ul style="list-style-type: none"> Analyze and compare MS- and APR-DRG assignments, DRG shifts and associated financial risk by codes, lines of business, providers and other dimensions. Continuously assess predicted versus actual provider coding behavior and manage common expectations for reimbursement. Upload organization-specific, new or revised maps to quickly assess the impact of new grouper versions on an ongoing basis.

Table 1: Benefits and Features of Edifecs ICD-10 Impact Analytics



An industry leader since 1996, Edifecs provides healthcare software solutions that improve operational performance by streamlining the exchange of information among health plans, hospitals, and other healthcare organizations, while enabling compliance with current mandates such as HIPAA, Operating Rules and ICD-10. Today, more than 250 healthcare customers use Edifecs technology to unify transactions from any information channel source and input mechanism, while automating manual business processes such as enrollment, claims and payments management. Edifecs is currently recognized as one of the 100 Fastest Growing Private Companies in the state of Washington, 100 Best Places to Work in the state of Washington, an Inc. 5000 fastest-growing private company and one of the 500 Fastest Growing Companies in North America by Deloitte. Edifecs is headquartered in Bellevue, WA. For more information, please visit <http://www.edifecs.com>