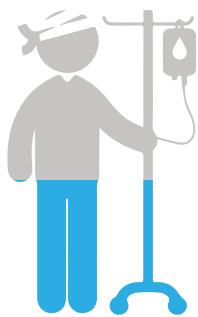


WHO IS THE RISK ADJUSTMENT STAR?

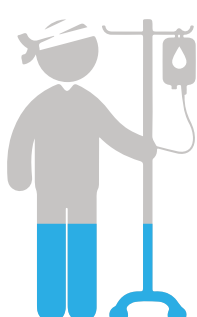
Survey reveals how well are healthcare organizations addressing their risk adjustment challenges and who really owns risk adjustment.

1 PERCENTAGE OF ORGANIZATIONS PRODUCING HCCS

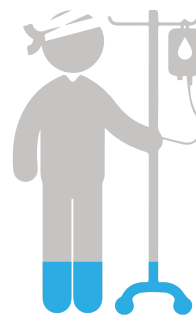
48%



34%



16%



40% To 50% Patients/Members coded

60% to 70% Patients/Members coded

Over 70% Patients/Members coded

While HCC codes are a critical component of risk adjustment, healthcare organizations seem to be woefully behind in documenting these codes for their patients. In fact, very few organizations have managed to produce HCCs for more than 70% of their patients or members.

2 EXTENT OF PAYER AND PROVIDER COLLABORATION.

50%



Average

17%



Excellent

17%



Needs Improvement

17%



N/A

In addition to obtaining HCC codes for more patients, healthcare organizations could improve risk adjustment through better payer and provider collaboration. Currently, however, organizations are mostly likely to report only “average” collaboration.

3 DEPARTMENT THAT OWNS “RISK ADJUSTMENT”.

37%



Shared / Multiple

23%



Risk Adjustment

18%



Quality

18%



Finance / Revenue

Risk adjustment has a significant impact on how much healthcare organizations are ultimately paid. As such, risk adjustment should be a team effort. Perplexingly, though, the majority of respondents indicated that risk adjustment at their organizations is handled by a single department.

SOURCE: SCIO Health Analytics’ webinar titled “The Risk Adjustment Rallying Cry”.