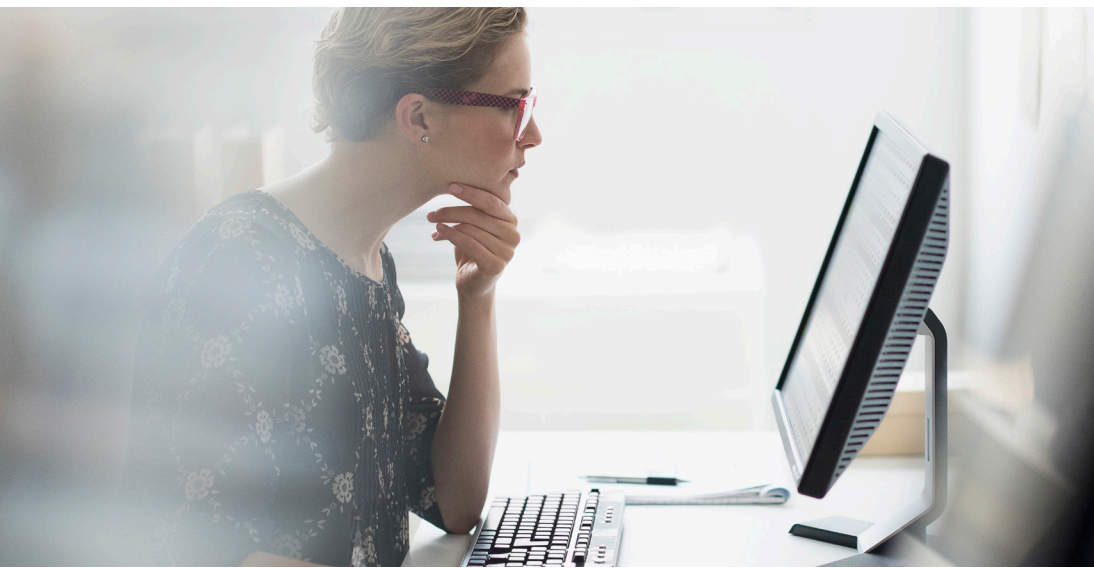




## Transform CDI, coding and auditing using one clinically intelligent platform



### Clinical documentation improvement and coding will always be complex and challenging.

Changing payment models and regulatory requirements, incompatible technologies and inaccurate source data all play a part in the challenge to “get it right up front.” At the same time, it’s imperative to get it right. Your organization relies on complete and accurate clinical documentation and coding to support appropriate reimbursement, revenue cycle efficiency and quality reporting.

A complex challenge requires a sophisticated solution. Technology powered by clinical intelligence and workflow automation can reveal documentation discrepancies, suggest appropriate coding, and help reduce the risk of denials. The right solution supports accuracy and efficiency to drive positive results as you make the shift to value-based reimbursement.

## The intelligent solution

The Optum® Enterprise Computer-Assisted Coding (CAC) and CDI 3D platform is an advanced solution driven by patented natural language processing (NLP) that addresses these complex challenges. Its various components support and automate improved coding and CDI operations for hospitals and health systems. Using clinical intelligence, the technology provides comprehensive, continuous case review for all payers and identifies cases with potential documentation deficiencies, quality events and clinical validation opportunities. It also suggests appropriate codes to accurately reflect the level of care provided and support appropriate revenue.

A truly integrated solution for CAC CDI and auditing, our platform combines the information and tools your team needs to successfully:

- Improve documentation and coding accuracy
- Broaden the scope of documentation review
- Identify cases with potential documentation gaps
- Detect potential quality events
- Discover clinical validation opportunities
- Capture comprehensive coding and incorporate appropriate edits
- Provide accurate quality reporting
- Improve auditing efficiency
- Reduce claim denials

The Optum CAC and CDI 3D platform provides the capabilities your organization needs to positively impact both financial and operational results.



### Proof of performance

Optum360 is an industry leader in computer-assisted coding solutions. Over twenty years ago, we introduced the industry's first NLP engine, proven to accurately interpret the meaning and context of medical terminology in electronic health records (EHRs). With a repository of over 10 million medical facts, **Optum NLP processes over 3 million clinical documents every day.** The Enterprise CAC and CDI 3D platform leverages that power in a fully integrated solution that helps hospitals realize the benefits of expanded reviews and greater coding precision.

## The Optum NLP difference

A clinically intelligent NLP and shared platform for coding and CDI is foundational for our product. Optum NLP has the capability to both recognize the definitive documentation of coding as well as the clinical concepts that define conditions and procedures.

NLP for coding recognizes what was clearly stated by the physician in the documentation. In contrast, for CDI, our NLP looks deeper into the supporting evidence — including laboratory results, vital signs, and key findings — to understand what the physician “didn’t say”. This type of artificial intelligence, which we call “automated case finding”, precisely identifies records with documentation weakness, helping CDI specialists zero-in on the most

important opportunities, including the identification of :

- Gaps in documentation / missing diagnoses
- Potential quality events, including conditions that drive exclusions
- Cases at risk for clinical validation denials

Case finding is fully transparent, enabling more meaningful queries by connecting CDI opportunities to the supporting evidence in the medical record.

Our patented clinical NLP technology unifies CDI case finding and code assignment to elevate documentation clarity, reduce denials and achieve appropriate reimbursement.



### Augment your Coding Staff

Optum360® Coding Services help organizations overcome staffing challenges and achieve efficient, consistent and compliant coding. Powered by industry leading technology, our industry-certified coders help promote coding compliance while improving appropriate revenue realization that accurately reflects the services provided and resources used.

## Seamless CDI, coding and auditing

The Enterprise CAC and CDI 3D platform is a comprehensive solution designed to work together as a single answer to hospitals' coding, clinical documentation improvement and auditing needs. It comprises CAC, coding and reimbursement tools, integrated reference content, infusion charging algorithms and automated auditing and CDI capabilities on a shared platform. Coders, auditors and CDI staff benefit from working in a unified solution with all the information and resources needed to facilitate communication, improve compliance and boost efficiency.

The platform also helps you manage coding and CDI operations. The executive dashboard details coding and CDI productivity and results, and provides a flexible set of reports that help you track productivity, billed charts and audit trails. It also allows you to monitor telecommuter activity and presence in the application.

### Optum Enterprise CAC

Optum Enterprise CAC leverages advanced NLP technology to understand clinical documentation, capture comprehensive diagnosis and procedure codes, and apply robust coding edits to provide more thorough, accurate coding results.

#### Benefits:

- Performs comprehensive code capture to support accurate billing and quality reporting
- Increases consistency among coders of varying experience levels
- Boosts efficiency to help reduce days in A/R and discharged not final billed (DNFB) status
- Improves case mix index (CMI) through more complete and accurate code capture
- Provides coding traceability for improved audit trails
- Supports PCS code assignment with partial code suggestions, decreasing the complexity of inpatient procedure coding

### Optum Coding and Reimbursement Module

The Optum Coding and Reimbursement Module provides easy access to all of our encoder and coding tools to support accurate case completion, including:

- Logic and book encoders
- Clinical and code validity edits
- MCE, OCE, CCI, PSI, HAC and medical necessity indicators
- Automatic grouping and pricing as codes are added, revised or deleted
- Full access to content in the Optum360® Medical Reference Engine

### Optum Audit and Compliance Manager

Optum Audit and Compliance Manager identifies cases at risk for denial and automatically routes them through efficient work flow for review. It enables hospitals to proactively target pre-bill audits, prevent downstream denials and preserve revenue integrity.

#### Benefits:

- Helps identify vulnerable cases at risk for denials and OIG- and RAC-related scrutiny
- Allows customized audit rules to target an organization's specific focus
- Automates key processes to reduce audit completion time
- Improves communication across CDI, coding and auditing disciplines through a shared technology platform
- Provides robust audit analytics around coder and auditor performance as well as audit impacts

### Optum CDI 3D

Optum CDI 3D identifies potential clinical documentation deficiencies at the point of care. Using proprietary clinical algorithms and intelligent case-finding logic, CDI 3D reviews every piece of clinical documentation as it is entered into the EHR. As it identifies cases with clinical or quality clarification opportunities, it prioritizes them for review based on customizable business rules. Your CDI staff can focus on cases with clinically relevant findings or gaps, including clinical validation opportunities, as well as take action to ensure accurate reporting of quality events.

This technology helps you "get it right up front," setting the stage for more accurate and efficient downstream activities. As a result, you can be confident that your documentation and reporting reflects the care provided while ensuring revenue integrity.

#### Benefits:

- Enables documentation improvement concurrent to, and throughout, the patient stay
- Broadens the scope of chart review without adding FTEs
- Identifies gaps in documentation, clinical validation opportunities and potential quality events — including conditions that drive exclusions
- Expedites valid queries for physician review
- Increases coding accuracy
- Reduces the chance of denials and rework
- Supports appropriate reimbursement
- Helps you more accurately report SOI, ROM, CMI and quality measures



### Improve physician engagement with a CDI champion

Optum® On-site Physician Advisor Service (On-site PA) helps support appropriate reimbursement and accurate quality reporting by effectively resolving CDI issues. To support your existing CDI team, On-site PA provides a well-resourced, highly trained, on-premises physician expert to enhance peer-to-peer collaboration that leads to more complete and accurate clinical documentation.

### Optum LYNX Infusion Charging Module

Infusions and injections are governed by a complex set of rules and documentation requirements, making these services a prime target for payer and regulatory agency audits. The Optum LYNX infusion charging algorithm translates those services to the appropriate charging terms, and:

- Helps hospitals calculate appropriate and consistent charges
- Enables coders to stay current on the latest charging rules
- Simplifies interpretation of infusion charging rules

### Optum Workflow Module

The Optum Workflow Module delivers intelligent automation that:

- Includes flexible parameters for building and maintaining work queues
- Prioritizes CDI worklists based on potential impact

- Assigns cases to the appropriate coders based on your customized business rules
- Boosts productivity for both coders and managers

### Optum360 Medical Reference Engine

The integrated Optum360 Medical Reference Engine ensures that coding and CDI professionals have direct access to the most current reference data. It provides easy access to a searchable database including dozens of Optum360 reference books, thousands of Medicare and Medicaid documents, and local and national Medicare policy information, as well as:

- Coders Desk References (diagnoses, HCPCS, procedures, etc.)
- Dr. Z's Medical Coding Series: Interventional Radiology
- CPT Assistant
- AHA Coding Clinic

## Optum360 — Partnering with you now and preparing you for the future

The transition to fee-for-value increases the emphasis on capturing reliable and accurate metrics and appropriately reporting on quality, safety and outcomes. Optum360 solutions provide coding and CDI leaders with new and innovative ways to address today's problems and prepare to meet the continuously changing reimbursement and quality environment demands.

### Performance monitoring maximizes results

We are committed to your success, and our approach includes expert resources to ensure your organization starts strong and achieves maximum benefits. Pre-implementation, we capture baseline analytics and identify areas with opportunity for improvement. We provide your staff with training and go-live support as the foundation for a smooth, successful deployment.

Once you go live, the Optum360 performance monitoring program provides a monthly engagement to review your organization's performance with our CAC and CDI technology, and includes:

- Operational statistics, including physician performance scorecard, to demonstrate measurable activity and results
- Detailed analysis to identify opportunities for optimizing use and processes
- Optum360 experts to support a cycle of assessing, refining and improving operations

**Let Optum360 help your organization tackle demands for accurate, thorough and efficient coding and CDI processes.**



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