

3M™ M*Modal HCC Management

- Delivers proactive, real-time HCC information to physicians using AI-powered computer-assisted physician documentation (CAPD)
- Helps healthcare organizations improve the accuracy of their HCC risk scores
- Provides summarized clinical evidence for a patient's entire history
- Built to help healthcare organizations improve care quality and financial outcomes

The 3M advantage

With M*Modal now part of 3M, our combined strengths are closing the loop between clinical care and revenue integrity.

3M provides a comprehensive, technology-driven solution that leverages artificial intelligence (AI) to deliver clinical insights to physicians and outpatient clinical documentation integrity (CDI) workflows.

Shift from volume to value, reward high-quality clinical data

The Hierarchical Condition Category (HCC) risk-adjustment model is both important and challenging to healthcare organizations. The Centers for Medicare & Medicaid Services (CMS) is aggressively shifting healthcare payments from traditional volume-based, fee-for-service models to value-based reimbursement (VBR).

In response, healthcare organizations increasingly use HCCs to calculate risk scores and predict potential healthcare costs in multiple VBR programs, including:

- Medicare Advantage Plans
- Medicare shared savings accountable care organizations (ACOs, expected cost)
- Value-based purchasing (VBP, expected cost/efficiency)
- Commercial ACOs/Shared risk arrangements
- Health insurance exchange plans
- States where Medicare/Medicaid Dual Eligible are under managed care
- Risk stratification and cost prediction for population health management

The potential repercussions? Within the HCC framework, healthcare providers assume greater accountability and revenue risk. However, HCCs also incentivize better patient care management by rewarding the gathering and effective application of higher-quality clinical information.

The 3M M*Modal solution

3M M*Modal HCC Management is a comprehensive, technology-driven solution that leverages AI to deliver frontline assistance to physicians so that HCC opportunities aren't missed while documenting the patient encounter. When combined with 3M's outpatient CDI workflow, 3M HCC Management aims to close documented HCC gaps before claims are submitted.

3M HCC Management is built on a single, EHR-integrated, cloud-based platform that uses AI and natural language understanding (NLU) technologies to comb through EHR data and narrative documents to find HCC opportunities. This solution can help providers achieve an accurate risk score based on the same data models used by CMS.

3M™ M*Modal HCC Management

The challenges of capturing and coding under HCCs

In an HCC environment, chart documentation is the critical foundation. HCCs use a risk-adjustment factor (RAF) score that includes patient diagnoses and demographic information. Physicians must document the highest disease categories for each patient's condition as well as demonstrate the patient's conditions were monitored, evaluated, assessed and treated. The severity and stage of clinical conditions like stage IV chronic kidney disease must be captured, because such diagnoses can predict future healthcare needs. Finally, HCCs must be captured every 12 months to receive accurate Medicare Advantage Plan reimbursement.

But all of this documentation is difficult and time-consuming. Physicians and other caregivers may not even know which HCCs are missing before claims are submitted—and then it is usually too late to make corrections. To achieve accurate HCC coding and receive appropriate reimbursement, an organization must capture a complete diagnostic profile of every patient, including all information that impacts a patient's evaluation, care and treatment.

3M's solution: Built to boost care quality and financial outcomes

3M HCC Management streamlines both CDI and clinician workflows to improve documentation accuracy, care quality and financial outcomes. Through a single-access web interface, multiple stakeholders can collaborate on the patient chart and monitor HCC coding, gaining these distinct advantages:

- **Proactive clinician workflow** delivers real-time, automated HCC-related information to physicians during the patient visit, with fully specified notes in the normal EHR documentation workflow. This helps create complete, compliant documentation of chronic conditions.
- **Outpatient CDI workflow** prioritizes patient record reviews based on gaps in patient risk scores and helps identify diagnoses not yet captured on claims for the current year. The solution also leverages NLU to identify HCC opportunities that would otherwise be missed.
- **RAF score management** calculates RAF scores for all patients in a facility's population, helping auditors identify gaps in chronic conditions from year to year. In addition, revenue cycle managers have a clear picture of population RAF scores and gaps, using the same data models applied by CMS.

When organizations understand each patient's complexity, they can improve clinical outcomes. When they focus on improving their risk-adjustment factor (RAF) scores, they can also increase reimbursement.

Call today

For more information on how 3M software and services can assist your organization, contact your 3M sales representative, call us toll-free at **800-367-2447**, or visit us online at **www.3m.com/his**.



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