

Edifecs **PROVIDER RISK ADJUSTMENT** augments EHR-workflows with AI-derived insights that surface risk and condition gaps for clinical evaluation and resolution before claims are submitted, allowing providers to accurately reflect population risk. With our integrated, yet modular approach to risk adjustment and condition suspecting, providers can leverage and improve clinical documentation to optimize care while obtaining complete and accurate government-sponsored program payments. Our differentiated approach to analytics, which includes utilization of unstructured data like that found in the clinical record, increases both the quantity and quality of suspected diagnosis. Equip your care teams with the proper tools and resources to identify and address risk and quality gaps for all patient populations.



- Integrate with existing EHR workflows built around the patient lifecycle
- Improve VBC contract performance with complete and accurate risk capture
- Increase the average per patient volume of suspects by 30% when compared to claims-only programs
- Capture an additional 15% of confirmed conditions over baselines
- Manage risk for multiple APM programs, including Medicaid
- Ensure compliance in documentation, coding, and billing



**A PROSPECTIVE RISK ADJUSTMENT STRATEGY: MODULAR, EHR-INTEGRATED SOLUTIONS AND SERVICES DESIGNED TO ENHANCE CARE AND IMPROVE PAYMENT ACCURACY**

# PROVIDER RISK ADJUSTMENT SUITE

# KEY CAPABILITIES AND FEATURES

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## CAPABILITIES

Improve Diagnosis Identification with Prospective Gap Closure

## FEATURES

Utilize all available patient information for analysis, including unstructured data, which results in universally improved acceptance rates

Surface condition gaps before or during the encounter for clinical validation and review to close gaps prospectively

Reporting and analytics support ongoing education and CDI improvements

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Inform Care and Support Better Patient Outcomes

Identify and stratify patients by risk who require a targeted intervention or qualify for additional care management initiatives

Ensure proper condition documentation that is inclusive of all co-morbidities

Liberate physician to manage suspects in the EHR, streamlining gap closure and documentation

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Receive Complete VBC Payments with Accurate Coding

Confirm up to 20-25% more valid conditions and identify missed codes to support full funding

Improve RAF score accuracy by 5-15%

Minimize compliance and audit risk with redaction workflows to address over- or under-coded claims

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Boost Productivity with Integrated Workflows

Leverage our solution across all contracts, payers, populations, and EHR systems

Utilize the entire care team for risk capture throughout the patient encounter before, during, or after a visit

Optimize coder efficiency through a prioritized case list, resulting in up to a 4X increase in productivity

Work more effectively with payer risk adjustment teams

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Optimize ROI while Reducing IT Infrastructure

Decrease infrastructure and hosting costs by leveraging SaaS solutions

Efficiency gains from eliminating multiple, redundant processes

Use Edifecs-managed software updates to maintain compliance

Ensure security and certifications (including HITRUST)