

EDGE AUDIT SERVICES

BENEFITS

- Ensures compliance with ACA reinsurance and risk-adjustment programs
- Reduces staff and resource burden
- Helps you proactively understand and optimize your risk
- Eases risk concerns by combining industry-leading data management and analytics with proven healthcare actuarial consulting and risk-modeling

FEATURES

- Helps you maintain compliance with continually evolving HHS requirements and standard protocols
- Includes risk models from Wakely Consulting Group, the premier risk-adjustment services firm
- Provides an electronic industry standards review of the most recent 12 months of paid medical claims
- Identifies improvement opportunities and gaps in data

Audit and Risk Optimization Services — The Keys to Compliance

Implementing an edge server is only the first step in readying for the Affordable Care Act's Reinsurance (ACA1341) and Risk Adjustment (ACA1343) programs.

To ensure success, it's important for health plans to review their claims for accuracy before submitting them to the Department of Health and Human Services (HHS).

Once health plans are fully compliant in submitting clean claims and enrollment data that meets HHS technical requirements, then the next steps of determining payment recovery and optimizing risk can begin.

To provide health plans with support for this process, Truven Health Analytics,[™] together with Wakely Consulting Group Inc., offers edge audit services — complete with both a claims audit feature and complete risk-optimization services.

The Truven Health/Wakely Consulting partnership combines industry-leading data management and analytics with proven healthcare actuarial consulting and risk-modeling capabilities for an unequalled edge services solution.

Claims Pre-Audit

In this first step, Truven Health reviews your claims for accuracy before they go to the edge server for HHS access.

Pre-audit services include:

- Conducting an electronic industry standards review of the most recent 12 months of paid medical claims
- Ensuring compliance with industry standard protocols such as the National Correct Coding Initiative (NCCI)
- Identifying providers with inaccurate or inconsistent billing patterns that most impact risk scores

Edge Services Audit

The next steps in our process help to ensure that you're ready to meet the HHS data and technical requirements.

Services include:

- Evaluating process and data gaps and identifying improvement opportunities
- Analyzing files against HHS requirements and standard processes
- Validating source code maps to the appropriate HHS dataset and ensuring XML file passes HHS requirements

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- Ensuring continuity of data from health plan source system(s) to HHS XML files
- Comparing Truven Health findings with health plan results and providing actionable recommendations
- Identifying errors
- Analyzing reinsurance calculations
- Analyzing your plan's internal risk-score calculations

Risk Optimization

To mitigate financial risk and understand drivers to “break-even” in the HHS risk-adjustment calculations, we also provide risk-optimization services.

These services combine unmatched knowledge, information, and analytic power with an advanced set of actuarial and predictive models, and include:

- Predicting areas for risk-score optimization with clinical information from your providers
- Identifying individuals whose conditions may not be completely reflected in the claims data
- Developing a target list of physicians with coding opportunities

FOR MORE INFORMATION

To learn how we can help you meet the HHS edge server requirements and more, send an email to healthplan@truvenhealth.com, call **+1.734.913.3000**, or visit truvenhealth.com/healthplan.



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ABOUT TRUVEN HEALTH ANALYTICS

Truven Health Analytics delivers unbiased information, analytic tools, benchmarks, and services to the healthcare industry. Hospitals, government agencies, employers, health plans, clinicians, pharmaceutical, and medical device companies have relied on us for more than 30 years. We combine our deep clinical, financial, and healthcare management expertise with innovative technology platforms and information assets to make healthcare better by collaborating with our customers to uncover and realize opportunities for improving quality, efficiency, and outcomes. With more than 2,000 employees globally, we have major offices in Ann Arbor, Mich.; Chicago; and Denver. Advantage Suite, Micromedex, ActionOI, MarketScan, and 100 Top Hospitals are registered trademarks or trademarks of Truven Health Analytics.

ABOUT WAKELY CONSULTING GROUP

Wakely Consulting Group is an actuarial and healthcare reform consulting firm providing a broad array of services to the medical and healthcare sectors. Our experts include nationally recognized thought leaders in important topics related to healthcare reform such as risk adjustment, exchanges, pricing, and product design. We serve clients nationally through our offices in Denver, Clearwater, Minneapolis, Boston, and Louisville. Wakely.com | 720.226.9800

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