



MiraMed

A GLOBAL SERVICES COMPANY



Risk Adjustment Solutions

Risk Adjustment Audit Validation and Reporting Services

Risk adjustment is a growing source of untapped profit potential; however, meeting CMS's reimbursement requirements necessitate intensive resources. The guidelines associated with risk documentation standards require the submission of meticulously chosen and verified data for the risk scoring of patients (i.e., patient health risk profiles).

The payer has the responsibility to provide the risk score information to CMS. The payers, in turn, are dependent on the physicians to diagnose and properly link the document for each high risk patient according to a strict protocol of necessary information needed for reimbursement. Working together, MiraMed can aid organizations, providers and health plans in understanding and providing the required documentation according to the various risk model methodologies (e.g., Medicaid HCC model, commercial exchange HCC model, CMS-HCC model, HHS-HCC model, etc.)

MiraMed provides:

- Prospective Risk-Adjusted Data Validation (RADV) Auditing
- Retrospective Risk-Adjusted Data Validation Auditing
- Risk Adjustment Educational Programs (CMS-HCC, HHS-HCC, Commercial Exchange and Medicaid Managed Care)
- Physician Scorecards Tracking Annual Wellness Visit Completion
- Member Outreach And Community Outreach to aid in the development of programs and services that will close any gaps that threaten quality care for all patients
- Annual Healthcare Cost Assessment Program

MiraMed, in response to the increasingly complex regulatory landscape that organizations or hospitals, providers and health plans are facing, chooses to focus on responsiveness to all clients' needs, providing accurate processes to navigate the risk adjustment domain and all its variable risk adjustment models and to ensure that the patients, providers and health plans collaborate and partner together for a healthier global world.

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