



# Risk identification and capture

The value of complete hierarchical condition categories documentation.

Complete hierarchical condition categories (HCC) documentation is crucial for emerging risk-adjusted payment models. It accurately captures the clinical complexity of a patient population, leading to appropriate reimbursement and effective cost and quality management of patient care. We partner with organizations to design a risk identification and capture (RIC) strategy that engages patients, empowers clinicians and uses technology to facilitate accurate chronic condition documentation at the point of care. Our approach incorporates industry expertise and best practices to help health care organizations and providers demonstrate a complete and clinically supported picture of patient complexity to generate desired results in the vital aspect of value-based care.

## Optum RIC services offered

- Program evaluation and strategy
- Program management
- Training and education
- Advanced suspecting
- Point of care inform and assist tools
- Reporting and analytics
- Ongoing program performance support and optimization
- Natural language processing
- Annual wellness visits (AWV) – value-based care (VBC) support
- Preventive services optimization, care management
- Coding services

## Proven success in a risk-adjustment environment

**Over 16K**

providers currently using RIC point-of-care solution

**89.7%**

median chronic RAF gap closed in 2022 for solution users

**\$277M increase**

in care funding across 18 members of the cohort in first year

## RIC services overview



### Program evaluation and strategy

Through the lens of analytics and industry experience, our team reviews all aspects of how health care organizations are approaching value-based care and risk adjustment. We use that information to recommend a strategy for developing or supplementing current efforts. This analysis can assist health care organizations determine their ability to take or manage risk within their populations.



### Advanced suspecting

Advanced suspecting helps identify risk adjustable conditions that may have gone unmanaged or undocumented. When combining advanced suspecting with EHR technology enablement, organizations can ensure better care for their patients, optimize risk and quality performance, and reduce costs through operational efficiency.



### Program management

With years of experience and deep knowledge in risk adjustment, we assist our clients by managing their programs on an interim basis. We understand the complex skills and experiences required to successfully implement and manage a full-scale RIC program, and we leverage our expertise to help organizations achieve their goals. Our support allows organizations to focus on delivering quality care while we handle the complexities of risk management.



### Point-of-care inform and assist tools

We offer innovative tools that are embedded within the EHR to help providers and care teams to successfully identify and document risk adjustable HCCs during in-person encounters between the patient and provider. In-scope populations and health plans can be defined by the organization and the logic for showing HCCs can be specific to the specialty of the provider. From tools to promote problem list cleanup to minimally compliant risk adjustment documentation prompts, our solution focuses on effectively and efficiently supporting the provider workflow.



### Training and education

Investing in education and training for your providers and clinical documentation integrity teams ensures that they have the knowledge and tools needed to effectively participate in your risk adjustment program. This can lead to improved patient outcomes, reduced costs and increased financial stability for your organization. Education and training are key components that we provide either as part of the implementation of the RIC technology or as a stand-alone service to your teams.



### Reporting and analytics

Perhaps one of the most powerful tools available with the risk identification and capture solution technology is the ability to report and provide analytics related to multiple key performance indicators and programmatic success. Our proprietary analytics platform helps teams identify and manage multiple indicators of success in a comprehensive risk adjustment program, powered by information from within their internal systems and benchmarked against industry performance.

## RIC services overview



### Ongoing program performance support and optimization

Our solution support does not end with technology implementation – our experts are here to support you in monitoring and growing your commitment to the quality of care for your patients. Our combined industry expertise in program management, technology, risk adjustment and change management gives you access to resources rarely seen within the market. Our team has supported the cohort through many regulatory changes related to risk adjustment over the past 9 years, and we bring that ongoing experience to support your program.



### Natural language processing for retrospective, suspecting, or pre-encounter and post-encounter

Natural language processing provides valuable documentation and coding insights throughout the risk adjustment lifecycle. Each stage (pre-encounter, point of care, post-encounter and retrospective review) offers the opportunity for NLP integration to improve workflow efficiency and support documentation accuracy.



### Complimentary value based care support – annual wellness visits and preventive services optimization, care management

Our comprehensive solution is ideal for a value-based strategy. It includes technology tools that support the optimization of your organization's approach to Medicare annual wellness visits and preventive services visits to engage and understand the complex nature of your patient population. Even following an in-person visit, the ongoing management of chronic conditions that require additional support and information can be digitally enabled to provide comprehensive services. Ask us about additional approaches that can contribute to building and sustaining your value-based approach.



### Coding services

When it comes to clinical documentation, it is crucial to achieve coding accuracy because that is what drives your organization's reimbursement, efficient revenue cycles and quality reporting. Optum helps organizations achieve maximum benefits as we possess in-depth knowledge and expertise in this arena. We provide the right team to partner with organizations to deliver the value and results that value-based care programs need for success in risk adjustment coding. Our various services include, but are not limited to, program assessment and roadmap, staff augmentation, coding, provider education and audit support.

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[Connect with an expert](#)  
to see how the risk  
identification and  
capture program can  
help your organization.



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