Dynamic Healthcare Systems is the premier business partner for the management and administration of Government-sponsored Health Plans.

Our extensive industry experience is why Dynamic Healthcare Systems is chosen as the “Partner of Choice” by those participating in the complex compliance requirements and regulations of Medicare, Medicaid, and the Exchange Marketplace.

Our risk adjustment oversight program is designed to provide clients with a comprehensive view of their program gaps related to data governance, revenue management forecasting, and suspect targeting.

Government-sponsored Health Plans understand that the success of healthcare reform is dependent on the science of risk adjustment.

Accurate payment methodologies are critical to creating an environment where Health Plans compete on the basis of efficiency and quality of care. This competitive environment is necessary to reduce unsustainable growth in the cost of care, and risk adjustment is central to it.

Those Health Plans leveraging risk adjustment programs and systems must audit their operations to ensure and enforce coding “integrity” – that is consistent use of diagnosis and procedure codes to elevate member care.

Government-sponsored programs best practices include a rigorous risk adjustment oversight strategy that involves continuous data evaluation, advanced suspect targeting algorithms, and payment model optimization methods.

Dynamic’s Risk Adjustment Program Management and Assessment Services Include:

- V.22 Financial Modeling and Revenue Forecasting
- CMS Overpayment Inspection
- Suspect Targeting
- Data Governance (RAPS to EDS Parallel Insight)
- Revenue Optimization

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The CMS-HCC risk adjustment model is responsible for prospectively estimating a member’s future predicted costs ensuring more accurate Health Plan compensation to support member’s healthcare needs. While there is a clear risk when HCCs are tied to a Health Plan’s revenue, there are other important facets of HCCs that Health Plans should consider. Higher HCC capture has shown a correlation to improved long-term population health management. Additionally enhanced documentation of HCCs leads to optimized clinical care management by providing higher quality information regarding members.

Dynamic’s suspect targeting services include:

- Clinical and business analytics targeting missing HCC categories and/or diagnosis codes
- Assigning algorithms and stratifying suspect conditions
- Identifying relevant medical records for re-coding
- Targeted membership and provider prioritization

In addition to our Voyager software, we offer several programs which allow Plans to leverage the expertise of our experienced team of healthcare professionals and are designed to provide clients with a deep understanding of their program gaps, as well as a clear plan to reach their desired goals. Areas of expertise include Risk Adjustment, Reconciliation, Compliance and Quality Measures.

Data Governance (RAPS To EDS Parallel Insight)

With the onset of electronic health records, e-prescribing, and various Health Plan reimbursement methodologies, data governance has become more critical than ever. Data governance best practices ensure that a set of rules and a framework exists to ensure data is accurate, complete, not duplicated, and treated appropriately – especially when dealing with government agencies.

The collection of RAPS and EDS data within a Health Plan should be streamlined to ensure accurate payment for Medicare Advantage (MA) Health Plans.

Dynamic’s RAPS and EDS data governance services include:

- Current RAPS filtering and encounter data ETL methodology review
- Evaluation and documentation, in clear business terms, of comprehensive dataflow and coding logic
- Reconciliation and discrepancy management (operational, filter, technology, and data gaps)
- Categorizing clusters which are newly eligible or previously submitted and now suspect
- Comparative analysis of RAPS to EDS outcomes – data quality metrics
- Executive and financial summary including assessments and recommended improvements to data governance practices

Revenue Optimization

With the advent of the Affordable Care Act (ACA), risk adjustment now extends to group health insurance participants in the marketplace. With increasing revenue pressures, Health Plans must employ enhanced risk adjustment program strategies.

Dynamic’s risk adjustment program oversight services creates and/or assesses Health Plan risk adjustment strategies and provides plans with objective, third-party insights into their operations.

Dynamic’s revenue optimization services include a comprehensive inspection of a Health Plan’s risk adjustment program and strategy as well as:

- Conducting client specific analysis on Dx clusters submitted and prioritization of Dx cluster suspects
- Prioritization for HCC targeting and an updated chart review strategy
- Strategy assessment executive summary report including 3 year strategy preparation