

# UPMC and Health Fidelity Partnership a Win-Win for Risk Adjustment

When Health Fidelity was founded, the tech startup's goal was to provide organizations with a best-in-class clinical natural language processing (NLP) and inference platform. The company's tech could be used to analyze vast amounts of unstructured data and then provide customers with clinical and financial insights. It was a solid solution built on impressive technology but required a partner to validate and operationalize many of the company's early claims.

Around that same time, integrated health system, UPMC and its payer division, the UPMC Health Plan, were experiencing an influx of new Medicare Advantage enrollments. When coupled with the roll out of additional Affordable Care Act (ACA) product lines, UPMC's risk adjustment coders simply couldn't keep up with the overwhelming workload. The health system knew that its current process of manually reviewing charts and identifying risk conditions meant a fragmented workflow and poor productivity. It needed a better way to manage risk.

## Choosing Health Fidelity

UPMC began searching for solutions with the understanding that it would need to embrace a more comprehensive, data-driven approach built on a modern technology platform. That would include using tools such as NLP to help better manage coder workflows and improve productivity.

The search led UPMC directly to Health Fidelity, first as a customer and later as a strategic investor.

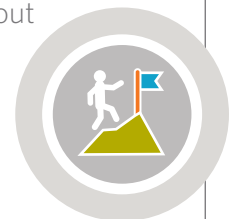
As a customer, the UPMC Health Plan tested Health Fidelity's approach to optimizing risk adjustment on the payer side: applying NLP insights from clinical and administrative data to direct coder retrospective reviews within a single, integrated application.

Using Health Fidelity, the Health Plan has increased coder productivity and added approximately \$200M in revenue since 2013. These successes led UPMC to work more closely with Health Fidelity, this time as a strategic investor.

## Gaining More Than Capital

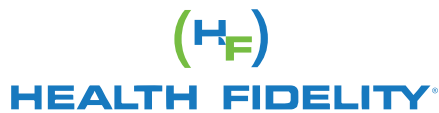
UPMC's investment in Health Fidelity has been much more than just funding. Health Fidelity gained a true partner that offers inside access to resources on both the payer and provider side. This includes the ability to tap into clinical staff, leverage available data, and access UPMC's "living laboratory" to test out new or refine existing products.

The partnership has allowed Health Fidelity to get a closer look at and address specific needs on the payer side, but it's also one of the reasons behind their current risk innovation aimed at supporting providers in the transition to value-based care contracting.



## Helping Providers Tackle Risk Adjustment

Today, Health Fidelity and UPMC are working on refining solutions to help providers better capture and record patient risk. Health Fidelity's NLP technology is once again at the heart of the process with clinical insights and information from UPMC providers helping to shape the solution. Together, both organizations aim to improve patient care as well as help ensure providers are properly reimbursed for their services.



healthfidelity.com

Company Focus: **Comprehensive Risk Adjustment Solutions**

Headquarters: **San Mateo, CA**

Year Founded: **2011**

Health Fidelity launched in 2011 as a technology start-up providing a best-in-class clinical Natural Language Processing (NLP) technology and inference platform.

Today, Health Fidelity delivers comprehensive, scalable risk adjustment solutions for organizations participating in Medicare Advantage, ACA, Medicaid, and Medicare ACO programs. Health Fidelity is the only solution in the market that utilizes NLP to extract valuable insights from medical charts, changing the way risk is identified, quantified, and managed to enhance operational, clinical, and financial outcomes.

**Key Benefits:**

- **Find more** – Coding enabled by NLP technology accurately identifies HCCs that are commonly missed with manual, human-only reviews.
- **Spend less** – A combination of technology and services enables superior results at a lower cost.
- **Take control** – A 360° view of risk adjustment provides clear insights that illuminate the improvements required to maximize financial impact.
- **Improve compliance** – Eliminate audit risk by identifying previously submitted conditions without sufficient supporting evidence.

Health Fidelity's solutions are available to meet the needs of both Health Plans and Providers.



**FOR HEALTH PLANS**

Using Health Fidelity, health plans can leverage NLP technology-enabled solutions to optimize or supplement their existing risk adjustment operations. Organizations can achieve better compliance, realize greater efficiencies, and maximize value through improved identification of risk-bearing conditions.



**FOR PROVIDERS**

Health Fidelity's solutions for risk-bearing providers have been specifically developed to deliver value without disruption to existing clinical workflows. A flexible suite of services and technology can be tailored to meet the needs of any risk-bearing provider, regardless of size or risk-share maturity. Organizations can adopt solutions in a phased approach to help make the most of available resources in optimizing for financial and patient care success.