R1®

Increase quality ratings, volume and reimbursement by improving clinical documentation

The R1-end-to-end revenue cycle management solution is a high-performance blend of technology, operations expertise and talent. By designing revenue cycle solutions from the patient's perspective, we help our clients improve satisfaction, reduce cost, and streamline RCM workflows.

» **Up to 70% productivity improvement**

» **3-12% CMI improvement**

» **2-3x more collaboration with providers**

» **Up to 60% net revenue improvement**

R1 Clinical Documentation Integrity (CDI)

Medical schools provide little-to-no education on the importance of documentation in the acute care hospital – yet it affects everything from reimbursement to medical necessity and quality scores. Because coding guidelines and regulations are extremely complex and change regularly, it is essential that healthcare networks have CDI experts that can work with physicians to ensure their clinical language will get translated into the appropriate ICD-10 codes.

The R1 CDI Solution focuses on ensuring accurate coding on every claim, clinically validating high-risk diagnoses, and facilitating interdepartmental collaboration between coding and physicians. The R1 approach involves a thorough assessment of the organization, processes and tools utilized to support CDI, and the subsequent implementation of coding and billing for inpatient and outpatient services:

- Interviews with executive, operational and departmental leadership and staff
- Data analysis and competency testing of teams
- Process and workflow observations, nursing units and department tours
- Reviews and audits of patient accounts, medical records and charts
- Analysis of interfaces, systems, tools, vendor utilization and reporting
- Review of financial trends, capital requirements and strategic cost drivers

Bridge the gap between the clinical documentation and the codified record

The R1 CDI Solution Pillars for success:

Defined and Shared Mission: R1 helps clients create a clear and well-defined CDI mission statement allowing all team members to have a universal understanding of their purpose within the organization.

Optimally Staffed: R1 works with clients to develop a process for determining the optimal staffing structure based on their unique targets and goals.

Key Relationships: R1 has developed a proven and standardized approach to ensure the development of constructive relationships between coding, physicians, finance and CDI teams.

Process Flow: R1 analyzes each client's existing HIM, EMR and CDI resources to ensure optimal return on their technology and staffing investments.

Education: R1 creates an educational roadmap based on a competency exam to focus on areas of opportunity identified and deliver it in an interactive and easy-to-digest format. When needed, R1 will provide certified CDI specialists to work patient queues remotely, delivering significant ROI.

Accountability: R1 data management and analytics track individual and team performance to provide the transparency needed to effectively manage productivity.

Revenue cycle solutions designed from a patient's perspective.

The R1 end-to-end revenue cycle management solution is a high performance blend of technology, operations expertise and humanity.

Access
Accuracy
Assurance

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ORDER TO INTAKE	CARE TO CLAIM	CLAIM TO PAYMENT
• Scheduling	• Level of Care	• Billing
• Pre-Registration	• Case Management	• Denials Management
• Clearance	• Utilization Review	• Customer Service
• Financial Counseling	• Charge Optimization	• Reconciliation
• Online/In-Person Arrival	• Coding	
	• Acuity Capture	

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