

Medical Necessity Compliance Service



Adapting utilization review in an evolving regulatory environment

With uncertainty about when auditors will resume regular medical necessity reviews — and how long the look-back period will be — hospitals face an uncertain future. Added to this anxiety is continuing confusion about how to interpret the Two-Midnight Rule. Without accurately determining medical necessity for every case, hospitals risk non-compliance, denials and audit sanctions.

Optum360® leverages our extensive and industry-leading medical necessity experience to help our clients secure appropriate reimbursement, withstand auditor scrutiny and comply with the Medicare Conditions of Participation — 7 days a week, 365 days a year.

Defensible second-level medical necessity reviews

Our Medical Necessity Compliance service provides hospitals with a recommendation of the most appropriate care setting (inpatient versus outpatient) for cases that do not meet first-level inpatient criteria. By leveraging conversations between our physician advisors and treating physicians, our recommendations elevate the specificity of medical records to convey the physician's intent, accurately reflect the patient's disease state and support admission determinations.

Our Medical Necessity Compliance team includes hundreds of licensed physicians with an average of 10 years of post-residency experience representing 60+ medical/surgical sub-specialties. Our physician advisors leverage Case AdvisorTM, an Al-powered evidence-based risk stratification platform supported by more than 13 million chart reviews and 20,000 evidence-based medical research articles.

The result is a physician advisor second-level review supported by evidence-based medical research that is consistent with CMS rules and regulations.

Advantages

- Accurately evaluates medical necessity for complex cases and reduces inappropriate denials
- Leverages licensed physician advisors with the education and experience to streamline interactions with treating physicians
- Establishes a consistent UR process to defend against audit scrutiny
- Defends admission recommendations through the first three levels of appeal at no additional charge
- Maximizes the resources of your existing case management teams

Optum Case Advisor

Our Medical Necessity Compliance service is supported by our Al-powered Case Advisor, offering an unmatched combination of automated initial medical necessity assessments, NLP-enhanced physician advisor case reviews and evidence-based medical research. This combination allows for greater efficiency, accuracy and defensibility of medical necessity recommendations.







Evidence-based medical knowledge

Subscription-based pricing offers greater value

Sophisticated technology and high-quality data

- Al-powered case reviews quickly identify clinical risk factors for clearer justification of patient

Complimentary value-added services

Our physician advisor services include a number of value-added services, at no additional cost, to monitor performance, educate your staff, and optimize processes:



Analytics and reporting services



Peer-to-peer physician education



Audit and education reviews



Access to training materials



Strategic business process recommendations



Education and Learning Network

Our value:

Why should your facility partner with Optum360 to improve your medical necessity and denials management processes?



Effective use of resources

Our intelligent UR frees your staff to focus on other high-value objectives.



Predictive insights

Al-powered predictive clinical insights help secure appropriate reimbursement, reduce denials and defend appeals.



Smarter, holistic **UR** process

Our automated process for reviewing all cases allows you to use physician advisors more judiciously.



Improved value

Subscription-based pricing reduces average cost, allowing all cases to be reviewed for more appropriate reimbursement.

Contact us to see how we can improve your organization's revenue cycle.

Contact us to learn more:



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