

CARADIGM[®] UTILIZATION & FINANCIAL ANALYTICS

DATA SHEET



Overview

The Caradigm[®] Utilization & Financial Analytics solution (UFA) enables healthcare delivery organizations to identify and understand opportunities for financial improvement, trend performance and perform comparative analysis, through deep analytics, reporting and performance metrics. UFA leverages aggregated data to provide cross-organization analysis of care delivery and cost trends, and enables users to take action on insights that have been discovered.



Caradigm analytics solutions are designed to provide deep insight into patients, populations, processes and performance, helping hospitals and health systems understand risk and the actions needed for effective population health management.

Since the advent of healthcare reform, the US has experienced rapid growth in the number of accountable care organizations (ACOs) — those within the programs under the Center for Medicare and Medicaid Services (CMS) as well as commercial ACOs. These ACOs often earn a portion of shared savings by keeping utilization and cost below set benchmarks while meeting quality targets. Additionally, clinically integrated networks (CINs) face similar challenges in understanding utilization and cost across the care continuum.

In order to manage utilization and costs, provider organizations need to better understand the population they serve. A relatively small set of high-cost, high-utilization patients/members can generate a disproportionately high level of medical expenses. Organizations that can effectively identify, target and address the needs of these patients/members will be better able to optimize changing reimbursement. IT solutions that include utilization analytics for contracted populations will be needed to achieve these goals.

Key Features

- Rich underlying data asset, updated in real time
- Analytic views of integrated clinical and claims data
- Comprehensive and configurable dashboards with multiple dimensions
- Per-member-per-month costs across the entire organization
- Drill-down navigation from a population view to individual patient to take appropriate action
- Performance reporting — ED utilization, readmission, length of stay and post-acute
- Patient reporting — condition analysis, medical cost and pharmacy cost

Key Benefits

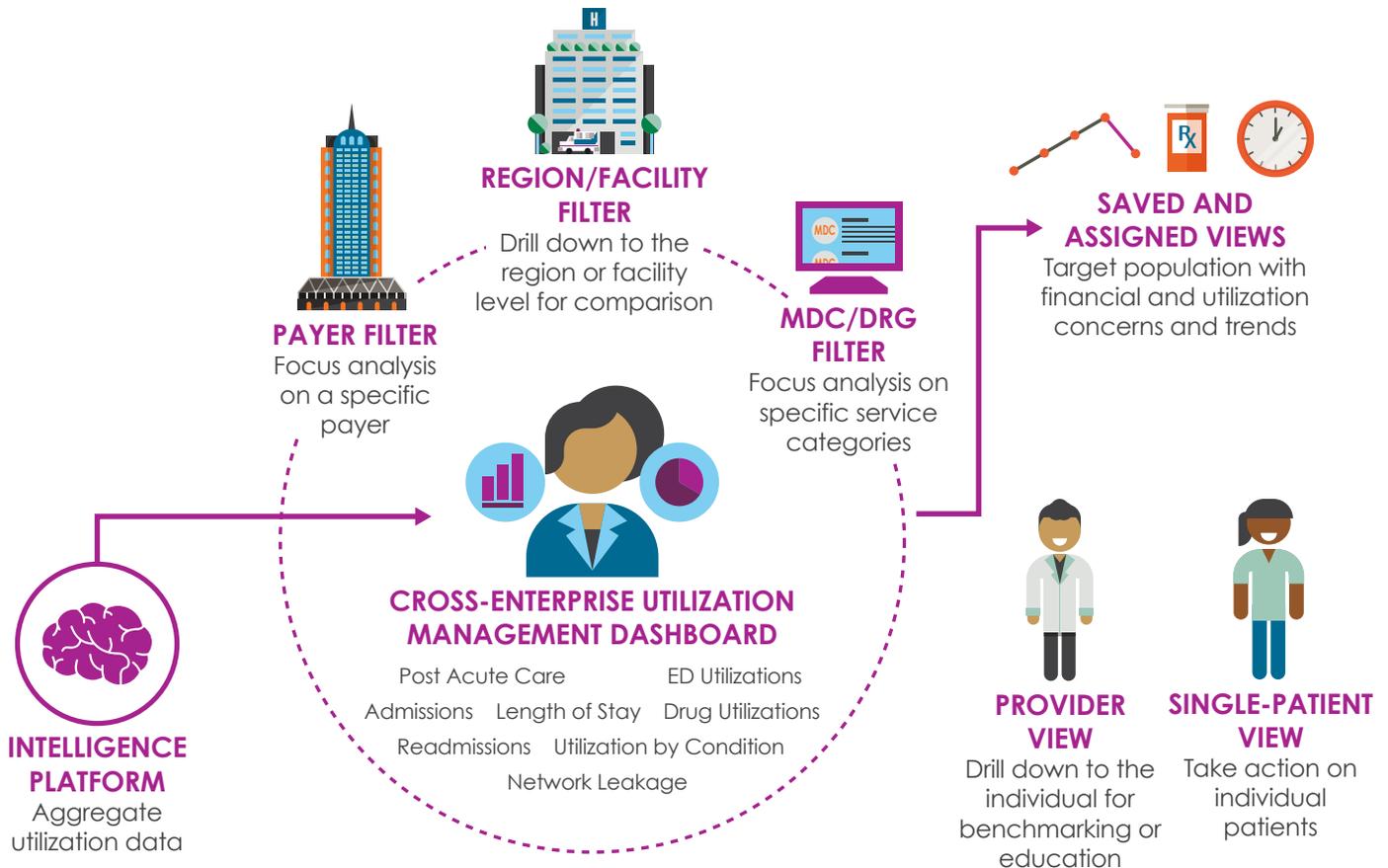
- Combine and normalize information from across the healthcare community
- Reveal utilization and cost patterns across populations, care settings, networks, and payers, and take proactive action on practices that contribute to cost outcomes
- Trend, analyze and act on the utilization metrics most important to your organization
- Better understand and manage contracts
- Identify patients receiving care beyond your organization and steer them back into your cost containment network
- Identify proactive opportunities for utilization improvement
- Better manage financial risk and high-utilization populations



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How it Works

Utilization & Financial Analytics' single aggregated view of utilization data across many clinical and financial systems provides a simple dashboard to quickly understand the "operational health" of the organization.



Summary

Caradigm Utilization & Financial Analytics delivers a single aggregated view of utilization and cost data across many clinical and financial systems to quickly understand the "operational health" of care delivery, spanning the organization. The application is part of the Caradigm portfolio for population health, meeting the needs of organizations looking for one partner with core capabilities: data control, healthcare analytics, and care coordination and engagement. With a robust platform and comprehensive suite of applications, Caradigm enables the cross-boundary collaboration necessary to transform care.

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About Caradigm

Caradigm is a healthcare analytics and population health company dedicated to helping organizations improve care, reduce costs and manage risk through the strategic, timely and compliant use of data generated across the healthcare continuum.