

WHITE PAPER

ACCURATE RISK ADJUSTMENT IS IMPOSSIBLE FOR 3 IN 10 PATIENTS

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PHYSICIANS DON'T HAVE THE FULL PICTURE

Consider John Doe, a 65-year-old male with stage 4 chronic kidney disease (CKD). During a recent visit with a nephrologist, he was also diagnosed with secondary hyperparathyroidism. The following year, John's primary care physician (PCP) was not aware of the secondary diagnosis and the nephrologist's main concern remained CKD. As a result, hyperparathyroidism was not recaptured or properly addressed.

Everyone loses here. John's PCP is making treatment decisions without critical information and is not fully reimbursed. If unaddressed, hyperparathyroidism could lead to other health problems down the road.

Connective Health makes sure this does not happen.

THE PROBLEM

3 IN 10 PATIENTS ARE LIKE JOHN

100M US lives are managed under risk-based payment systems, which means accurate risk adjustment at the point of care is critical. However doctors are not coders. They need help completing the picture to accurately document conditions, in a way that avoids burnout and detracting from clinical work.

- Patients seek treatment across different settings which do not always share information in a usable way
- 80% of clinical information is unstructured and not available via traditional solutions
- 30% of chronic conditions are not put on a claim

SOLUTION

MORE ACCURATE RISK ADJUSTMENT AND LESS CHART CHASING

Connective Health helps doctors treat patients and improve outcomes with clinical data interoperability (not claims) and artificial intelligence.

The solution is a brief patient summary a doctor can quickly absorb, underpinned by best-in-class data interoperability and artificial intelligence.

- 70% of patients have had records outside of primary care within 90 days
- 17 active diagnoses per patient on average, 11 are chronic
- 20% increased risk adjustment accuracy



CLIENTS

THE SOLUTION IS SOMETHING PHYSICIANS ACTUALLY ENJOY USING



"I love it. It tells me the story of the patient since I last saw them, which they expect me to know."

-Joel Diamond, MD Primary Care (Pittsburgh)



"It was great to see the ER visit and follow on dermatology appointments. I knew my patient had a serious skin condition, but this fills in the picture."

-Christopher Perkins, MD Primary Care (Boston)