

Improving Care with Better Data:

How One Payer Enhanced Star Ratings and Risk Adjustment Through Clinical Data Integration

Executive Summary

The largest health insurer in one Southeastern state set out to maximize its Star Ratings, close care gaps, and ensure proper risk adjustment reimbursements. Recognizing the need for comprehensive clinical data to supplement claims information, they partnered with MediVu Inc. to improve data quality, reduce administrative burden, and enhance

provider relationships. This case study illustrates how MediVu's clinical data exchange, data normalization, and partnership mindset helped them overcome data integration challenges, resulting in improved Star Ratings, accurate risk adjustment and reimbursement, enhanced member outcomes, and

operational efficiency — all while fostering a strong partnership with providers.

"We would not be a 4-Star plan if we did not have our connections. All the connections we have — ADT, lab, medical records - all that comes in and plays a significant role in our scoring." — Manager, Provider Interoperability

Payer Stats

Members: >2.5 million Providers: >15,000 Employees: >3,000

Star Rating: 4.5

Background

Dedicated to offering comprehensive healthcare coverage at affordable rates, this leading health insurer continuously seeks innovative solutions to enhance data management and care coordination.

As they were working to improve Star Ratings and risk adjustments, they realized claims data simply does not provide sufficient information to maximize performance against CMS requirements. Supplementing their claims data with clinical data – for instance, lab results from the medical record – would allow them to better coach members, maximize Star Ratings and receive proper reimbursement. More complete data would also allow them to be responsive to new mandates from CMS.

They formed a centralized team for clinical data and established several partnerships with EHRs and third-party data exchange companies to help gather this additional data.

The Challenge

Almost every department – health management, risk management, value-based quality, provider analytics, marketing, and others – leverages clinical data now. Unfortunately, the data they received was insufficient in numerous ways.

Inconsistent Data Quality: Data gathered from various sources did not contain all the necessary information leading to gaps in care management and incomplete information for HEDIS and Star Rating measures.

Risk Adjustment Issues: Diagnosis codes need to be reported to CMS every 12 months to receive proper reimbursement, even for chronic or permanent conditions. Obtaining and maintaining diagnosis codes was a key pain point.

Provider Workflow Interruptions: Gathering this critical data was a manual and time-intensive process for both the payer and providers. They needed to minimize disruptions to provider workflows.



The Solution

They initiated an RFP process to find a better solution. Having heard positive feedback from a peer at another payer, they invited MediVu to participate. After a thorough evaluation, they selected MediVu as a partner for comprehensive clinical data exchange.

Key components of the solution included:

Clinical Document Exchange: MediVu retrieves clinical records (CCDs, C-CDAs, SDOH, USCDI, etc.) from providers automatically, saving both payers' and providers' precious time. Records can be retrieved when encounters are closed, for a roster of members or individually on demand.

Data Integration and Normalization: MediVu helps integrate data from multiple sources, such as CCDAs, lab results, and ADT feeds, into a structured, unified format, allowing the payer to close care gaps and support care coordination. Knowing that every provider EHR set-up is differently, they sought a solution that could easily connect using a variety of data integration approaches such as HL7, FHIR, API, CCD, X12... regardless of connection type, MediVu's advanced data normalization capabilities ensured the data was clean, complete, and usable.

Risk Adjustment Support: By delivering structured data and making it human-readable, MediVu helped ensure accurate diagnosis coding, which led to improved CMS reimbursements.

Provider Engagement: MediVu handles provider onboarding.

"One thing that you [MediVu] bring to the table is making that connectivity easy for both the hospital / provider and for us. So, you're really taking the brunt of that work, and making it much easier." — Clinical Data Manager

"The key to scaling is normalization. That's what MediVu does, it helps normalize the data so that we can consume it in a single, consistent format, instead of dealing with 15-30 different ways to handle data." - Clinical Data Manager

"It's more than just normalization - the data augmentation MediVu is able to provide with the technology stack that you have is also critical."



The Results

The partnership with MediVu resulted in significant benefits:

Improved Star Ratings and Care Gap Closure: MediVu's comprehensive data integration contributed to their ability to maintain a stable 4.5 Star Rating. Data sources such as ADTs and lab results were instrumental in closing care gaps and improving care coordination.

Accurate Risk Adjustment and Financial Impact: Improved documentation and coding accuracy resulted in better CMS reimbursements and financial stability. Specifically, thanks to MediVu, they are no longer chasing diagnosis codes for members with chronic conditions to ensure proper reimbursement each year.

Star Ratings are important. But risk adjustment is just as, and in some cases more, important because that's the reimbursement... if we don't see the documentation in there to properly code, it leaves us providing services for that member but not being reimbursed appropriately." – Manager, Provider Interoperability

Operational Efficiency: MediVu's rapid implementation time, superior data quality, and proactive data monitoring significantly reduced administrative burden. The normalization process alone is a huge time saver – not having to handle that internally allows developers to be deployed on other tasks.

"Implementation time with MediVu is shorter. When we provide feedback, we get results fast. ... The time savings for you normalizing it [the data] versus me having to do custom code is huge." - Clinical Data Manager

Enhanced Care: Care managers gained access to comprehensive clinical data, improving member support and health outcomes. The comprehensive clinical data that MediVu provides is used for care coordination, disease management and getting members enrolled in specific programs to improve their care.

Provider Relationships: The streamlined data integration process reduced administrative burdens on providers, allowing them to focus more on patient care while being scored more accurately (cost and quality). It also eased the outreach burden because MediVu manages aspects of provider communication.

Partnership: Most important of all, they feel like they have a partner on their side – someone who is responsive to feedback.

"The customer relations side is huge.

It's one of the strongest we have within our vendor community"

- Clinical Data Manager





Moving forward, the payer plans to expand its use of MediVu's solutions to further improve data connectivity inside and outside of their home state and continue enhancing member outcomes.

Conclusion

The collaboration between the payer and MediVu highlights the transformative power of advanced clinical data integration in the healthcare industry. By supplementing claims data with clean, comprehensive clinical information, the payer was able to address key operational challenges, improve care coordination, and enhance overall member outcomes. MediVu's data normalization capabilities, efficient provider onboarding, and comprehensive clinical document exchange contributed to the payer's ability to achieve its strategic goals, including top Star Ratings and accurate risk adjustment. Most importantly, they found a true partner in MediVu—one that not only understands their needs but actively works with them to overcome challenges and support continued success. This partnership serves as a model for other health insurers seeking to enhance member care, streamline operations, and achieve better financial outcomes through effective data integration.

"The cost savings of collecting clinical data (as opposed to chart chasers) is quantifiable."

- Clinical Data Manager

