

InterQual® AutoReview

Drive efficient and proactive case management with our blend of AI, automation, and evidence

Case management today is often reactive, manual, and inefficient. Clinical data can be hard to find and is often available after decisions are made. Manual processes, such as conducting medical necessity reviews, are time-consuming and prone to error. The result is ineffective use of staff time and expertise and costly utilization decisions.

InterQual AutoReview with predictive analytics is a cloud-based solution designed to resolve these inefficiencies. The solution applies AI to real-time clinical data extracted from the EHR to give case managers advance insights. InterQual AutoReview also uses robotic process automation to automate the InterQual medical review process, using relevant clinical data to create, populate, and complete medical reviews.

Our unique blend of AI, automation, and evidence helps case managers be more efficient, proactive, and insights-driven to improve clinical and financial outcomes. Automation eliminates 75% of the work required¹ for the initial medical review process. Real-time predictions are delivered when it matters most and are continuously updated throughout the patient's stay.

Real-Time Clinical Data Extraction

Our EHR Hub extracts structured and unstructured clinical data from leading EHR solutions to support robotic process automation of medical necessity reviews and patient-specific predictive analytics.

Robotic Process Automation

The solution extracts, analyzes, and maps structured and unstructured data from your EHR to codified, evidence-based InterQual Criteria to create an auto-populated medical necessity review. The auto-populated review embeds actual clinical values for each criteria point, providing transparent, defensible documentation to help reduce your denials.

Natural Language Processing

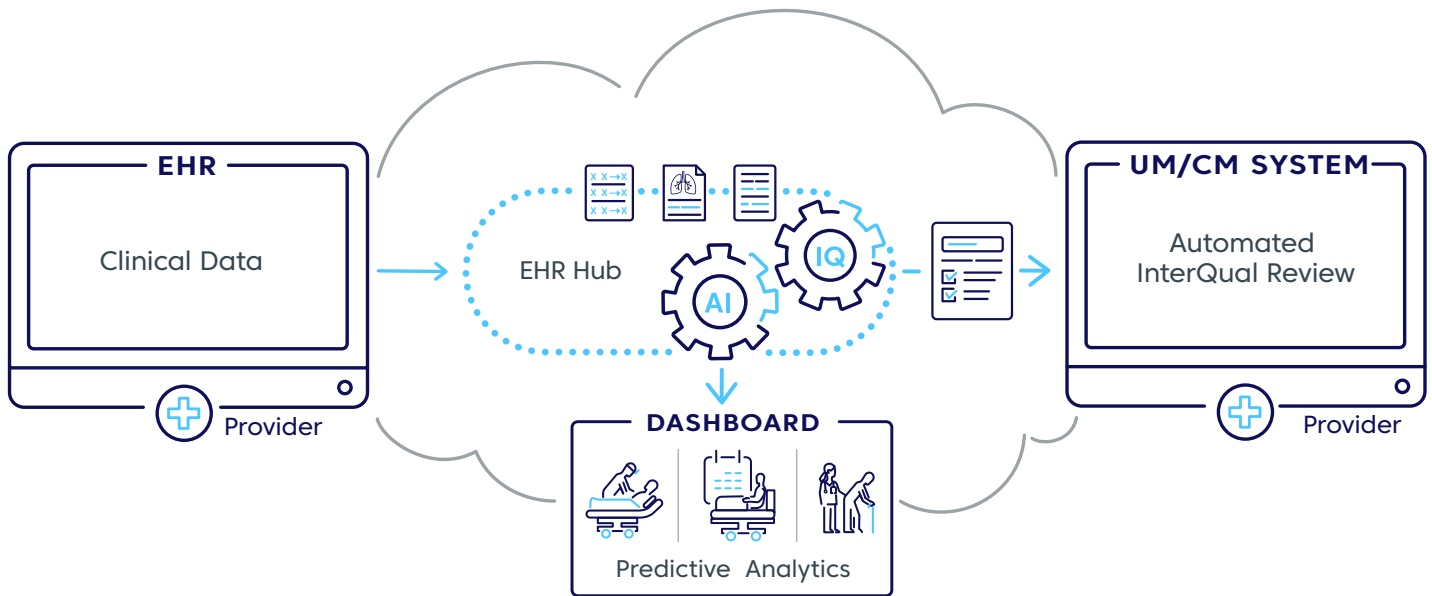
Many critical pieces of clinical information are stored in free text, such as imaging narratives. Natural Language Processing models extract discrete clinical data from this text to complete specific criteria points within the InterQual review.

AI-Driven Predictive Analytics

Patient-specific clinical data collection begins the moment the patient enters the ED. This data is fed into predictive models, which provide insights on level of care and length of stay. A confidence level is included with the prediction and can be used to prioritize patients who require additional clinical or administrative focus. Models are accessible via a flexible, web-based dashboard and are updated hourly.

Requirements

Customers must use InterQual Medical Review Service in one of our integrated alliance partner case management systems and have a participating Epic or Cerner EHR.



InterQual AutoReview seamlessly integrates with the EHR to streamline the utilization management process.



Automated Medical Reviews

Upon the patient’s diagnosis, InterQual AutoReview automatically populates the InterQual Episode Day 1 medical necessity review with real-time data from the EHR. Reviews are delivered to the InterQual Medical Review Service and integrated into your case management workflow.

Automated reviews eliminate manual data-entry errors and contain the clinical values extracted from the EHR. The result is an accurate medical review that provides transparent, defensible documentation to help reduce denials.



Level of Care Prediction

As soon as the patient record is created, the dashboard reflects the level of care probability for observation or inpatient placement. Leveraging patient-specific insights and evidence-based criteria can help your hospital decrease medical necessity denials and Code 44s, and improve inpatient conversion rates.

Length of Stay Predictions

Our AI model uses patient-specific clinical data to provide length of stay predictions, updated hourly based on the patient’s current clinical attributes. Predictions take comorbidities and other complicating factors into account.



Short-Stay Prediction

Provides a prediction and confidence level as to whether a patient will require hospitalization for greater or less than two midnights. This helps case managers identify short-stay inpatient cases, which can pose a denial risk even if inpatient criteria is met.



Long-Stay Prediction

Provides a prediction and confidence level as to whether a patient will stay greater or less than five midnights. This enables case managers to identify patients who exceed the benchmark length of stay, support timely discussions with care teams and payers, and allows for advance coordination of discharge services—all impact your organization’s average length of stay (ALOS).

¹ Change Healthcare 2019 analysis of beta test results at a large hospital.