



Breaking down ACO data silos with AI-driven prospective risk



Speaker overview

Empowering your success in value-based care



Matt Lambert, MD

Chief Medical Officer



Anthony Polizzi

Solution Architect



Reveleer at a glance

One platform for endless possibility

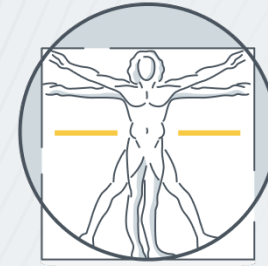
Our platform consolidates every piece of data you capture to power a growing suite of solutions, eliminating the need for multiple vendors and systems and ensuring improved functional integration.

Adapting to changing rules

As we approach 2030, when all Medicare beneficiaries will be treated under value-based care models, Reveleer models are built to keep your organization current with the latest rules from CMS.

Built for the real world

Drawing on 15 years of experience, Reveleer built its platform to solve for the practical challenges raised by our health plans and provider partners on the front lines of value-based care.



66
Million Covered
Lives

97%

Customer
Retention



79
Customers

What you'll learn today



How to leverage AI to unify fragmented HIE, EHR, and Claims data for complete patient risk profiles.



Ways to standardize risk adjustment and gap closure within provider workflows.



How to improve provider collaboration using real-time, actionable insights in the EHR.



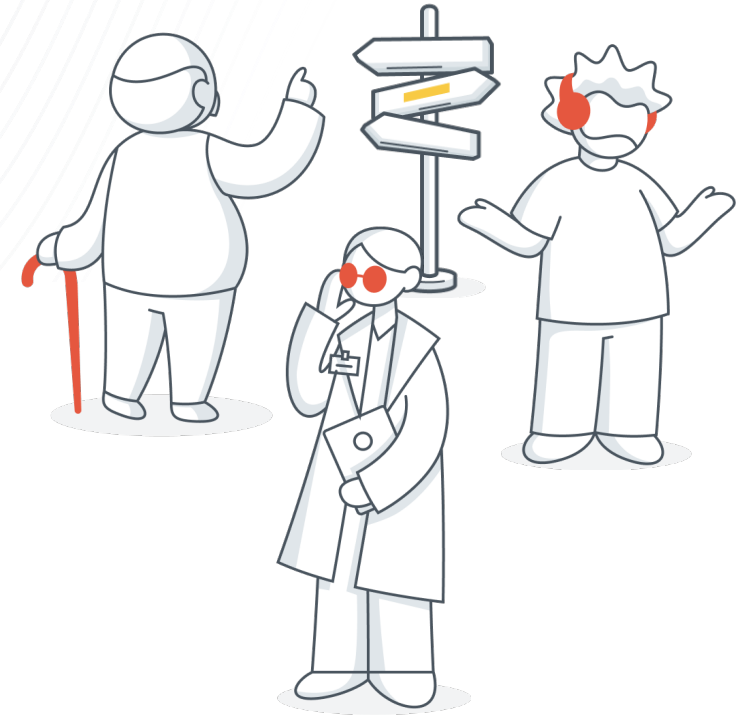
Techniques to enhance diagnosis accuracy by validating suspected conditions and reducing false positives.



Polling question #1

Which of the following best describes your current challenge with prospective risk adjustment in your ACO? *(Select one)*

- A. Fragmented data across multiple EHRs/HIEs
- B. Lack of standardized risk adjustment workflows
- C. Limited provider engagement or adoption
- D. Difficulty identifying and validating suspected conditions
- E. Inaccurate or incomplete diagnosis capture
- F. No current challenges



The evolving landscape for Accountable Care Organizations (ACOs)



Increasing pressure to deliver better outcomes with financial accountability






Shift to prospective risk models requires more proactive approaches

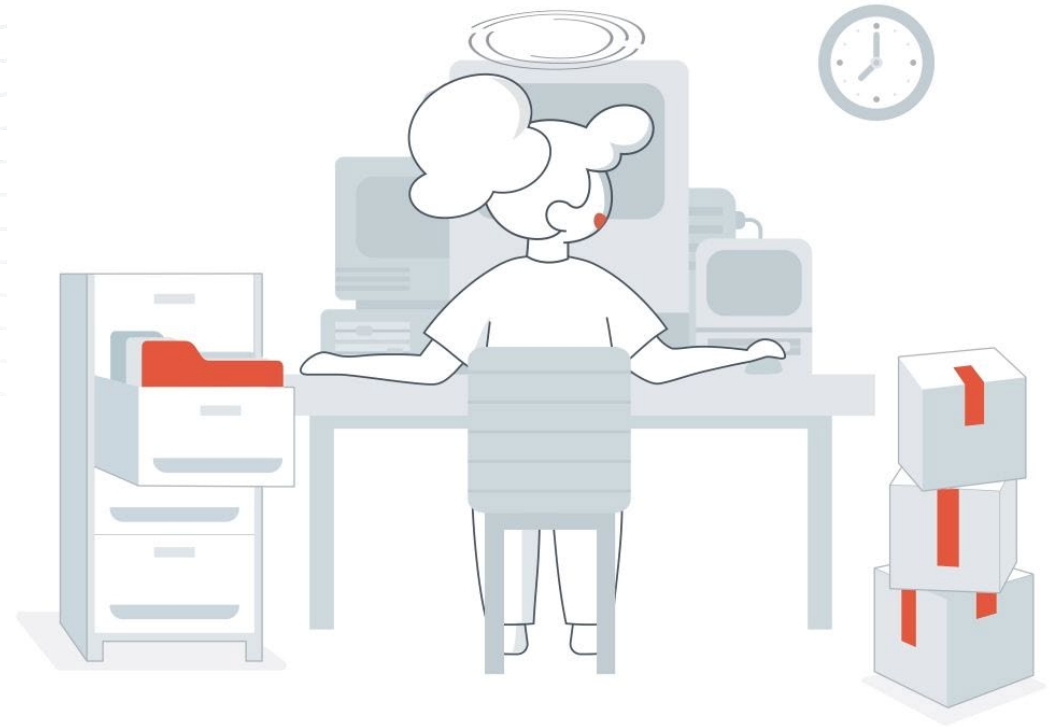


Success hinges on timely, accurate risk capture across diverse providers

“Over **53% of Traditional Medicare** beneficiaries—14.8 million people—are in accountable care relationships as of 2025, marking the **largest annual growth** since tracking began¹.”

Fragmentation and data silos challenges

-  91% of ACOs use multiple EHR systems, with 37% operating 16 or more²
-  Healthcare data silos cost the global economy \$3.1 trillion annually³
-  Data silos lead to missed diagnoses, under-reported risk, and preventable hospital stays



The impact on ACO risk adjustment



Missed diagnoses or inaccurate coding = lost revenue and increased audit risk



Lack of visibility into patient health status hinders care coordination and documentation accuracy



Risk capture and quality performance reporting



Incomplete or delayed data

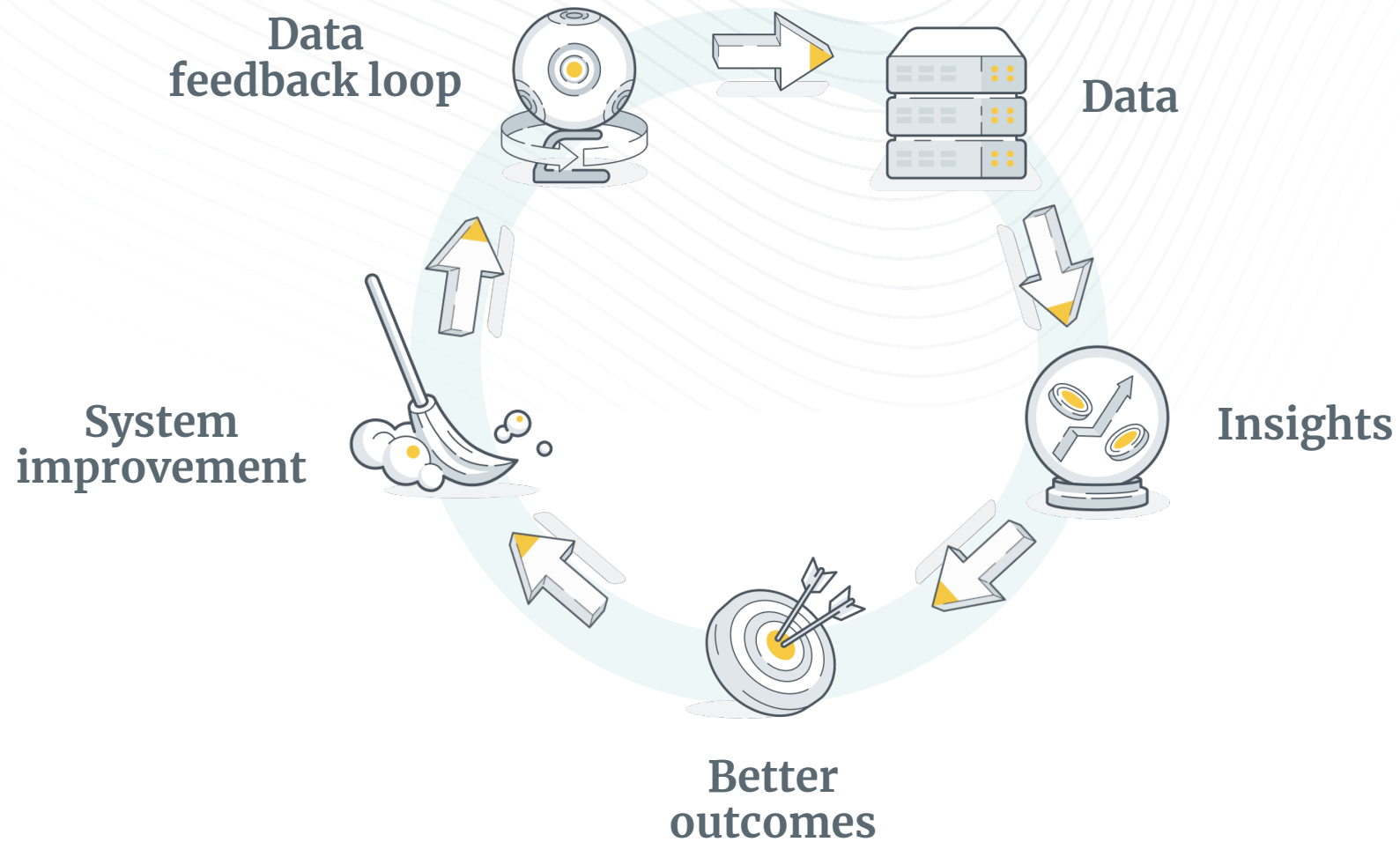


Introducing an AI-driven approach



AI aggregates and analyzes data across systems, detects gaps and trends, and creates comprehensive, real-time patient risk profiles.

Unifying fragmented data



Polling Question #2

What stage is your organization at in adopting AI for prospective risk adjustment? *(Select one)*





- A. Fully implemented
- B. In pilot or early adoption phase
- C. Planning to implement in the next 6-12 months
- D. No plans to adopt AI
- E. Not sure

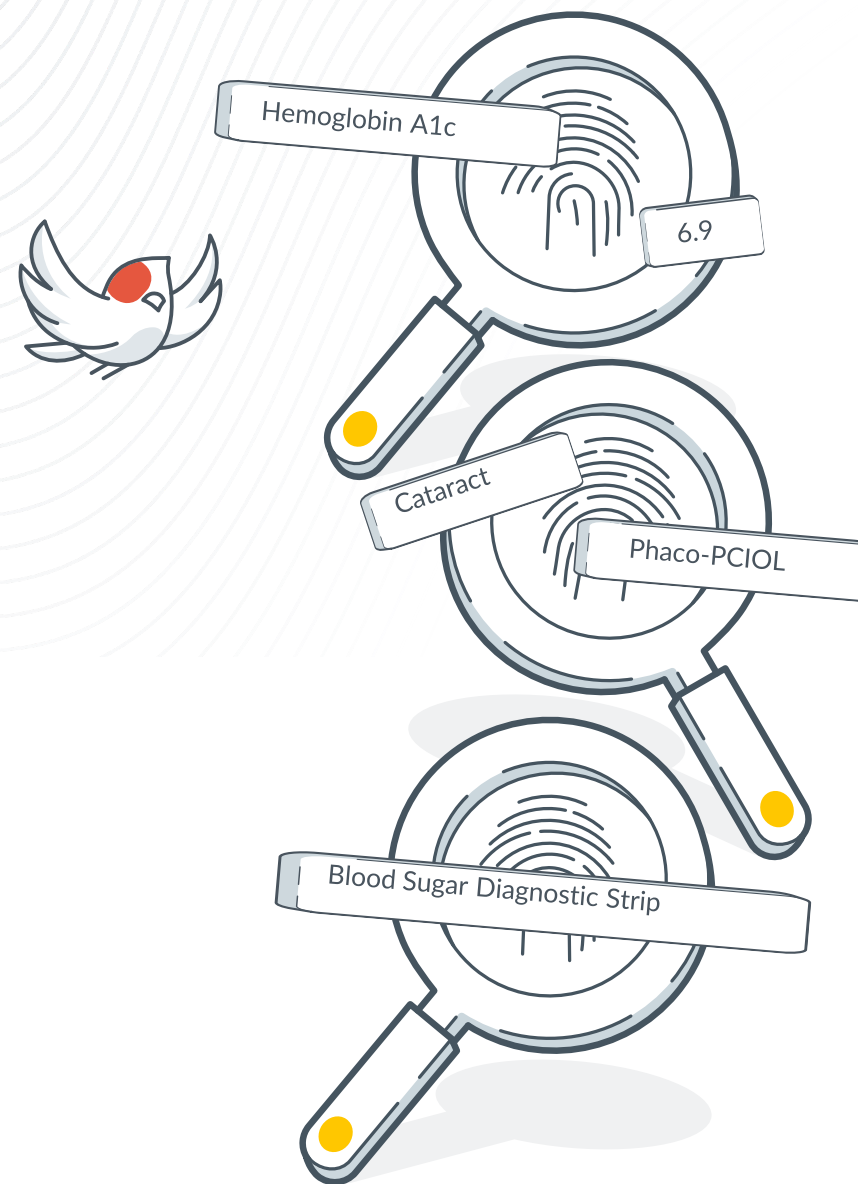


Unifying clinical insights

Example 1

AI-powered NLP detection of diagnosis and quality gaps derived from the full scope of aggregated data

-  Recaptured diagnoses
-  Net-new suspected diagnoses
-  Quality gaps
-  Evidence-linked suspecting



Enhancing accuracy and compliance



Example 2

Post-visit summary is automatically generated after each encounter for validation and submissions



Ensure billing accuracy



Seamlessly query providers



Clarify with confidence

The screenshot displays a medical record interface with several sections: 'Notes', 'Activities', 'Conditions', 'Potential Opportunities', and 'Query Status'. A circular callout highlights the 'Conditions' section, which lists several medical conditions with green checkmarks indicating they are verified. The conditions listed are:

- ✓ Essential (primary) hypertension I10
- ✓ Pure hypercholesterolemia, unspecified E78.00
- ✓ (HCC 37) Type 2 diabetes mellitus with diabetic polyneuropathy E11.42
- ✓ (HCC 37) Type 2 diabetes mellitus with diabetic chronic kidney disease E11.22
- ✓ (HCC 329) Chronic kidney disease, stage 3a N18.31
- ✓ (HCC 280) Chronic obstructive pulmonary disease, unspecified J44.9

Below the 'Conditions' section, the 'Potential Opportunities' section lists:





- 18) Morbid (severe) obesity due to excess calories
- 7.2 (09/12/2024)

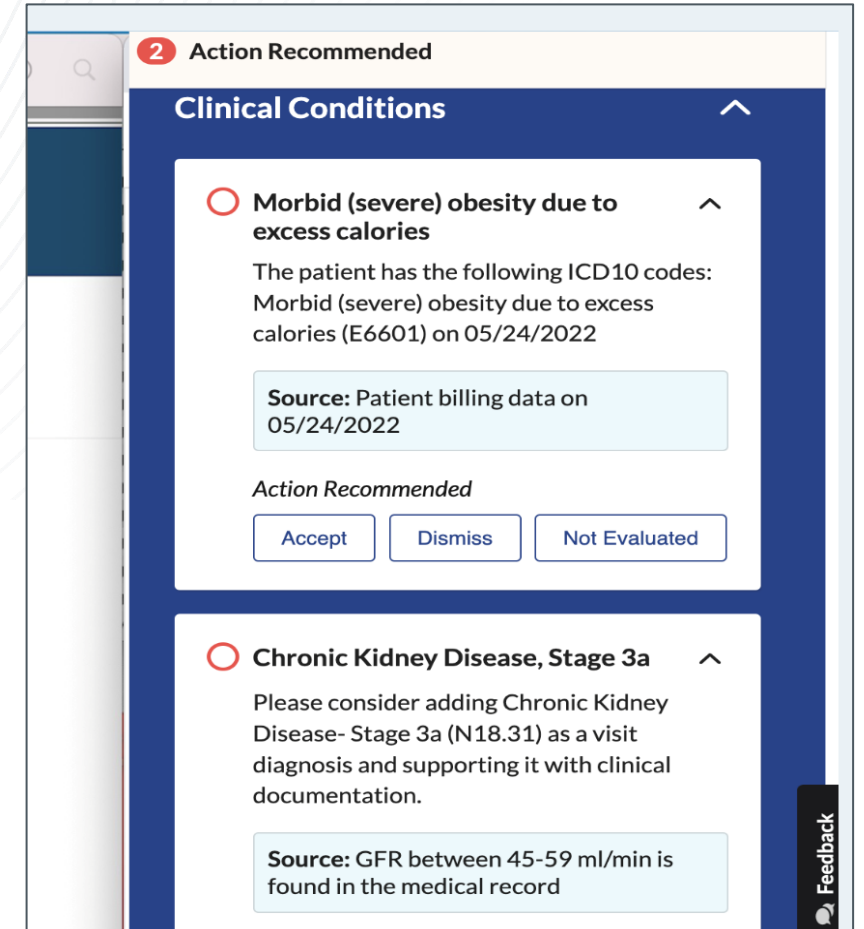
The 'Query Status' section includes radio buttons for 'Query Outstanding', 'Query Response Received', and 'Query Response Not Received'. Below this, the 'On Claim' section has radio buttons for 'Yes' and 'No'. The 'Reportable' section also has radio buttons for 'Yes' and 'No'. A 'Submit' button is located at the bottom right of the form.

Embedding into provider workflows

Example 3

Actionable insights delivered directly into the EHR patient chart for provider validation during encounters

-  Deep EHR integration
-  Scalable across networks
-  Insights linked to supporting evidence
-  Streamlined validation within existing clinical workflows



The screenshot displays an EHR interface with a sidebar titled "2 Action Recommended". The sidebar is divided into two sections, each with a red circle icon and a title. The first section is "Clinical Conditions" and contains a red circle icon followed by the text "Morbid (severe) obesity due to excess calories". Below this text is a paragraph: "The patient has the following ICD10 codes: Morbid (severe) obesity due to excess calories (E6601) on 05/24/2022". A light blue box contains the text "Source: Patient billing data on 05/24/2022". Below this is the text "Action Recommended" followed by three buttons: "Accept", "Dismiss", and "Not Evaluated". The second section is "Chronic Kidney Disease, Stage 3a" and contains a red circle icon followed by the text "Chronic Kidney Disease, Stage 3a". Below this text is a paragraph: "Please consider adding Chronic Kidney Disease- Stage 3a (N18.31) as a visit diagnosis and supporting it with clinical documentation." A light blue box contains the text "Source: GFR between 45-59 ml/min is found in the medical record". A vertical "Feedback" button is located on the right side of the sidebar.

Embedded sidebar option

ACO case study – prospective risk

Reveleer generated substantial ROI by increasing RAF accuracy and operational efficiency.

 **0.13**

RAF uplift
opportunity

 **62 %**

of patients had at least one
new HCC reviewed

 **2 weeks**

medical record retrieval
time vs months prior

National Risk-Bearing Provider / 70K Lives / ACO REACH & MSSP



Reveleer's clinical intelligence

Complete, accurate and proactive gap closure at the point-of-care

Clinical data acquisition

External clinical data

Electronic retrieval integration with HIEs and EHR systems nationwide.

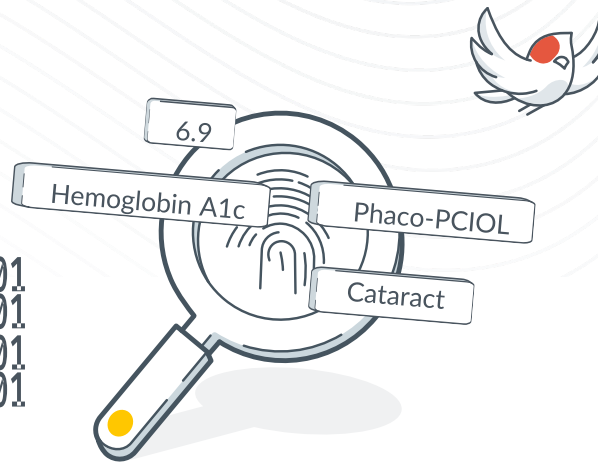
PCP EHR data

Internal clinical data, billing, and unstructured records from the PCP's EHR.

Claims data

Ingestion of historical claims data.

0011010101
0011010101
0011010101
0011010101



AI / NLP applied to identify open diagnosis and quality gaps.

Clinical insights

Clinical workflows

Pre-visit CDI

Targeted diagnosis review and pre-encounter chart prep.

Point of care Gap closure

Curated gaps surfaced during patient encounter in PCP's EHR.

Post-visit Review

Post-visit review ensures claims are RADV compliant.

Key takeaways



AI helps break down data silos to build **unified patient risk profiles**



Embedding workflows into EHRs **drives provider engagement** and documentation accuracy



Prospective risk capture **improves financial performance** and reduces compliance risk



Q & A



Matt Lambert, MD

Chief Medical Officer



Anthony Polizzi

Solution Architect



Next Steps

Learn more about Reveleer's
value-based care platform

reveleer.com/request-demo

Join us at

NAACOS Spring conference

April 22-24 in Baltimore

reveleer.com/naacos



Thank you

