



Maximize quality performance and streamline medical review processes



Performing a high-quality review and analysis of medical records is critical to maximizing quality performance and HEDIS® rates

It takes an expansive retrieval network that leverages multiple collection methods including fax, on-site collection and electronic health records (EHR) connectivity to optimize collection efforts while minimizing provider abrasion. Optum provides a comprehensive Medical Record Review solution that includes outreach, program management, medical record retrieval, abstraction, over-read and medical record review validation support to help achieve industry-leading accuracy standards.

Our hybrid sampling process undergoes annual NCQA Certification with yearly changes defined by regulatory publications. This approach derives hybrid rate compliance for certified results and validated rating. It allows health plans to demonstrate their care management and may help win business from employers and state governments.

As hybrid retrospective seasons are moving towards retirement in HEDIS MY2029, our products have already shifted our focus on year-round prospective actions, major shifts on evaluation of opportunities to sustain and improve Health Plan Ratings or CMS Star Ratings impacted by retirement of hybrid retrospective seasonal work and the hybrid lift lost.

Our team has medical record review capabilities beyond HEDIS®, stretching through CMS Adult and Child Core measurement for State regulatory requirements and programs. As our team monitors the changing landscape of a merged approach on quality measurement between NCQA and CMS in Universal Foundation, our products will follow these changes. Optum can help deliver value for your organization through our high-quality medical record review solution.



From detailed quality review upon retrieval of the charts, to on-demand reports generated through our chart review platform, Optum provides a transparent and comprehensive business model that supports a turnkey, end-to-end-process.

Leveraging close provider relationships to efficiently maximize data retrieval

Optum maintains close working relationships with 100,000 physician practices across the country, leveraging an internal network of field-based associates who foster these relationships throughout the year.

This proactive approach to creating strong relationships minimizes provider abrasion and helps achieve consistently high record retrieval rates.

Focusing on accuracy as part of abstraction, and providing support during the audit process

While it's critical to efficiently and thoroughly abstract each data element from each record, we also focus our efforts on gathering data that is accurate and in accordance with the auditor expectations. Our discipline extends to creating audit reports and standing by each medical record during the audit process.

Applying a clinical perspective to extensive reviews

Optum reviews the records to make critical clinical connections that may help improve outcomes. We have a robust quality oversight program to ensure highest levels of accuracy and completeness.

Through this industry-leading discipline, we can be confident the medical records are abstracted consistently with exceptional precision.

Creating a robust repository of reviewed records for future use

At each retrospective season's conclusion, the records are transferred to you and are available for future use as imputed claims as your new administrative data source. Clients value the ability to access these records easily for risk adjustment review, NCQA accreditation audits, use in future seasons and many other purposes that eliminate the need to go back to providers for more retrieval.

Prospective medical record review includes claims data conversion and audit support within our product. Your member rosters and auditor requests can be tracked within our tool for traceability, monitoring, and alignment on your road to a successful Primary Source Verification auditor approval.

Providing real-time visibility and access

Our chart review platform enables you to see how the season is progressing. Know exactly where the chart is in the medical record review process. Take a granular look at a particular record, conduct your own over-read, add notations on a record and update provider contact information, among other useful features to manage the medical record review process. With this transparent platform, you have full access to the process and the data.

Support of state measures as well as health plan custom measures¹:

90% national retrieval rates

3M+ records abstracted through March 2025²

100K+ physician practices and relationships across the country

99% target accuracy for abstraction teams with 98% minimum³

Ensure a timely, high-quality medical record review and analysis

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1. Past results are not a guarantee of future performance.
2. Count represents all abstraction for Quality for retrospective and prospective services.
3. Optum outperforms targeted accuracy at 99%+ annually.

