

Value

Advantage™

Competing for declining revenue in our industry has become a full-time endeavor. The practical application of MACRA and its revenue cycle implications challenges you to transform existing reimbursement platforms into a value-based focus. This transformation requires shifting workflows to optimize a vast range of infrastructure efficiencies on revenue cycle and devise new care models. Your organization has been proactive, but there is more work to do. Are you ready? We will help you become **ADEPT**SM at the business of health care.

High Level Review. We will first analyze your federal reimbursement incentive initiatives, from PQRS to MU to PCMH, and associated grants programs. Our focus will seek to determine the ROI for each initiative in which your organizations, from health system to ambulatory networks, are participating.

Readiness Assessment. We evaluate your organization's readiness for the various CMS programs available to you within MACRA, identifying any gaps in data collection or workflows. Our focused quantitative analysis provides insight on the current perspective and aids in the decision-making process for determining appropriate value-based programs for your organization.

Within the coming years, your MIPS or APM scores will result in either bonus or penalty payment adjustments. How you move forward from this point will truly affect the longevity of your care delivery network and the communities you serve. There is no score that will not affect your reimbursement. Are you ready? We can help.

We focus on value, so you can focus on care.

V2V Management Solutions | www.v2vms.com | 208.717.3940