



RESPONSIBLE AI: CLINICAL DECISION MAKING

Anna's Collaborative, Ethical Intelligence

Overview

Amid recent investigations into a major healthcare organization and heightened scrutiny of AI use in Medicare Advantage (MA) denials, PAA emphasizes the importance of transparent and accountable AI systems in healthcare. These allegations around the organization's indiscriminate use of AI highlight the necessity for ethical AI practices. Starting in 2024, the Centers for Medicare & Medicaid Services (CMS) will impose restrictions on AI tools for coverage determinations in MA plans, a move PAA supports and commends for promoting responsible use of collaborative intelligence.

The referenced health plan and its subsidiary face criticisms of Utilization Management practices that differ sharply from PAA's collaborative approach with health plans to enhance patient outcomes.⁴ Specifically, PAA's software solution complements physicians' decisions on SNF admission or continued stay coverage, leveraging clinical data for informed decision-making while streamlining administrative tasks.

Collaborative, Ethical Intelligence

The Anna™ platform empowers both payors and providers to efficiently manage patients through real-time alerts and clinical insights derived from documentation.

Anna's™ AI and Machine Learning (ML) enhance resource optimization **by enabling clinicians to review clinical documentation more efficiently, offering data-driven recommendations for optimal care transitions.** Clinicians inform and glean insights from our algorithms, using their judgment to interpret AI insights, ensuring Anna™ complements rather than replaces clinician decision-making. This collaborative intelligence aligns with our commitment to reducing clinician administrative burden and advancing healthcare innovation.

PAA upholds ethical, patient-centric intelligence with key principles:



Reliability: Employing continuous AI Quality Improvement (AI-QI) and clinical validation measures, PAA ensures data integrity and usability.



Transparency: Managing data throughout its lifecycle, PAA adheres to data governance principles, covering collection, storage, analysis, and sharing with stakeholders.



Fairness: Applying social determinants of health, PAA addresses equity gaps, calibrating models to eliminate bias based on age and gender.



Privacy: Protecting sensitive patient information, PAA deidentifies and anonymizes all datasets used in AI models.

GET IN TOUCH

O: 469.444.7407

sales@paanalytics.com
www.paanalytics.com

400 E. Las Colinas Blvd Suite 300-48
Irving, TX 75039



PAA ALGORITHMS & CLINICAL METRICS



CLAIM

“They are looking at patients in terms of their statistics. They are not looking at the patients we see.”¹

PAA algorithms evaluate various patient data factors including: Demographic (e.g., age, gender) Clinical Data (e.g., ICDs) Social Determinants of Health (e.g., geography statistics, household measures, support at home) Clinical Documentation (e.g., clinician assessments and evaluations, treatment, and therapy notes).

CLAIM

“... private insurers repeatedly strayed beyond Medicare’s detailed set of rules. Instead, they use internally developed criteria to delay or deny care.”¹

PAA incorporates CMS Chapter 8 criteria within our framework for consistent collection of pertinent patient information that informs SNF recommendations. This assists providers in understanding the CMS criteria for SNF admission and trains them to identify and submit the necessary documents to support the clinical decision. PAA continually works with health plan partners to understand the documented clinical elements that impact the determination and updates the software to bring that information to the forefront for consistent application of CMS criteria.

CLAIM

“That’s aggregating data and using an algorithm to make a decision that has nothing to do with the individual themselves, which is problematic and antithetical to Medicare policy.”²

PAA’s algorithms incorporate patient-level details through:

- Reading individual health records
- Integrating patient specific SDOH factors
- Utilizing available diagnosis codes for patient-level recommendations

These factors differentiate patients, accounting for needs that cannot be detected in basic clinical data metrics alone.

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PAA ALGORITHMS & PRESERVICE RECOMMENDATIONS™



CLAIM

Use of AI denials “[...] often delaying treatment of seriously ill patients...”¹

After a hospital stay, patients may require SNF and often their skilled needs are obvious. PAA assists providers in obtaining SNF authorizations faster for that subset of patients by quickly identifying those that clearly meet criteria for SNF care. This results in rapid approval for appropriate patients admitting to SNF as soon as clinically appropriate with the decision made by the care providers and without administrative delays.

CLAIM

“...the problem with algorithm-based recommendations is that they are too rigid and broad, and in the end fail to support personalized care or better outcomes.”²

PAA's preservice product identifies patients who are mostly likely to require SNF following a hospital stay based on patient-level factors. If the algorithm is unable to immediately identify the need for skilled care, it guides providers towards submitting their patient's necessary clinical information for timely review by a clinical decision maker at the health plan.

CLAIM

Algorithms meant to be suggestive “end up being a hard and-fast rule.”¹

PAA's recommendations will either display as ‘SNF Recommended,’ or ‘Unable to Recommend SNF.’ The latter response does not suggest the patient does not require SNF or that the health plan is likely to deny the request. It means that there was not enough data to support the rapid approval pathway and the UM team will complete a standard clinical criteria-based case review according to the health plan's internal processes. PAA reiterates that payor partners are required to have internal processes for case reviews and consistent use of established criteria for all cases in which further review is required.

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PAA ALGORITHMS & SNF CONCURRENT MANAGEMENT™



CLAIM

“But even patients who win authorization for nursing home care must reckon with algorithms that insurers and care managers like naviHealth use to help decide how long they are entitled to stay.”³

PAA does provide SNFs with an estimated length of stay. The length of stay is a recommendation, but the final length of stay determinations are made by the health plan clinician and Physicians overseeing the care.

- ▶ According to a recent investigation, variations in SNF lengths of stay are driven by SNF's unique practice patterns.³ PAA provides the tools for payors and providers to set and track performance goals, identify areas of opportunity through facility-driven quality metrics, and improve how patients experience SNF care.

CLAIM

“[...] unregulated predictive algorithms... pinpoint the precise moment when they can plausibly cut off payment for an older patient's treatment.”¹

PAA's tools rely on end-user input to account for patient variables in addition to the primary condition which may extend the stay. This system allows payors and providers to understand total patient needs, factors complicating the recovery course, and adequate, timely discharge planning. Our product accommodates payors and providers in adjusting SNF length of stay at any point during a SNF admission.

1. “Denied by AI: How Medicare Advantage plans use algorithms to cut off care for seniors in need.” (March 13, 2023). STAT+. <https://www.statnews.com/2023/03/13/medicare-advantage-plans-denialartificial-intelligence/>

2. “AI used by Medicare Advantage blamed for increased denial of nursing home services.” (March 13, 2023). Skilled Nursing News. <https://skillednursingnews.com/2023/03/ai-use-by-medicare-advantageblamed-for-increased-denial-of-nursing-home-services/>

3. Milliman White Paper. (2021). Variability in average length of stay for skilled nursing facilities— Opportunities exist for more efficient management [White Paper]. https://us.milliman.com/-/media/milliman/pdfs/2021-articles/1-21-21_variation_in_snf_alos_for_medicare_beneficiaries.ashx

4. “UnitedHealth faces lawsuit over AI, Medicare Advantage care denials” (November 15th, 2023). Beckers Healthcare UnitedHealth faces lawsuit over AI, Medicare Advantage care denials (beckerspayer.com)

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