



Health Language®

Code Group Manager

Increase accuracy of quality reporting and analytics with centralized data management and governance of clinical concepts

Code Group Manager is a web-based software application that simplifies the management of clinical, billing, or other administrative codes that are grouped together as value sets for use in quality measures, clinical decision support rules, and population cohorts. It lets you streamline data management so you can improve analytics and accelerate your population health initiatives.

With Code Group Manager, you can:

Ensure Accuracy with your Quality Measures and Reporting

- Save time by centralizing your content and gain visibility into how updates impact your PQRS, CQM, and ACO Quality Measures.
- Increase your reimbursement or payment adjustment and potentially reduce the risk of future funding loss.
- Improve the accuracy of your reporting while enabling effective data governance.
- Understand the impact to your measures, CDS rules, and population health cohorts when the underlying standard code systems are updated.

Improve your Care Management Programs

- Accurately represent your population cohorts in your care management programs.
- Reduce the risk of revenue loss with inaccurate population definitions.

Improve clinical decision support

- Increase clinician satisfaction with accurate clinical decision support rules.
- Reduce alert fatigue by defining a concise set of governed and meaningful triggers based on actual code groups.

Key Features

Ensure a Single Source of Terminology Truth

Feel confident in the accuracy of your data and streamline your workflow.

- Enable reuse and reduce duplication of efforts across the enterprise by centrally managing all local and standard code groups.
- Integrate your code groups into your clinical and IT applications using our suite of APIs, including the ability to export to CSV and XLS files.
- Increase the accuracy of your code groups through the creation of a single, integrated and trusted source of truth.

Collaborate Across Your Enterprise

- Collaboratively develop and review code groups associated with quality measures or other collections of code groups.
- Reduce overhead and align code group definitions, intended use, and versioning across departments and systems.
- Author code groups using sophisticated rules-based algorithms to create code groups from scratch or customize existing definitions.
- Collaborate with tools such as email notifications, in-line commenting, and version history so you can easily review and approve changes.
- Build transparency across your enterprise with read-only access to code groups for stakeholders including clinicians, administrators, and analysts.

Improve Your Data Governance

Health Language aggregates all of your content updates from the world's leading terminology standards bodies.

- Increase terminology governance with roles-based access and support for version control, audit trail, and change log.
- Alert subscribers when new code group revisions are available so care management application and population cohort definitions can be updated.
- Reduce maintenance and ensure accuracy with impact reports, which notify authors of new or invalidated codes so authors can quickly update impacted code groups.

Health Language

Terminology management solutions from Health Language can unlock your healthcare data to help you maximize reimbursement, meet regulatory compliance, improve operational efficiencies, and enhance patient care. Health Language provides powerful data solutions that can be customized to your organization's needs.

Health Language solutions are designed to support health IT vendors, payers, health systems, HIEs, research and government organizations to improve search and documentation, support reference data management, enable interoperability and data normalization, improve quality measure reporting, maximize revenue cycle management, meet Meaningful Use compliance, and enhance analytics.

Code Group Content Bundle

Content bundle includes value sets that support CMS Clinical Quality Measures, ACO Measures, PQRS Measures, and AHRQ Clinical Classification System and allows you to customize the value sets for your own analytic initiatives.

Save time and ensure accuracy with over 500 regular content updates (impacting more than 2,000 value sets) in cooperation with the standards release schedules.

Health Language offers the only complete cloud-based solution with a full suite of applications that let you model, map, group, search, and distribute data throughout your enterprise.

Need access to content quickly? You can be up and running on the latest content and applications less than two weeks after signing your contract.