



3M Consulting Services — Overview

- Comprised of healthcare professionals and industry experts, including hospital executives; HIM specialists in coding, billing, and reimbursement; registered nurses; operations experts; ancillary department managers; physician practice managers; physicians; and certified public accountants
- Focuses on serving hospitals, physician groups, and law firms with a variety of programs that meet inpatient, outpatient, revenue management, and compliance needs
- Offers an internal quality assurance and regulatory compliance program incorporating all key elements outlined in the Office of Inspector General's compliance program for various healthcare providers

Outpatient services

3M™ APC Assurance™ Program can help hospitals improve cash flow, prevent denials and delayed payments, and achieve accurate payment. We promote the accuracy and integrity of outpatient billing for compliance with Centers for Medicare and Medicaid Services (CMS) regulations.

3M™ APC Oversight can assist your organization in grouping APCs, estimating costs and reimbursement, analyzing and reporting on outpatient claims data, and minimizing compliance risks. 3M consultants extract APC claims data from your billing system and assess critical areas in coding, charging, and billing that negatively impact reimbursement. 3M-defined reports graphically display areas for improving reimbursement, processes, and compliance under OPSS.

3M™ APC Oversight Trial is an introductory package that allows hospitals to experience the full benefits of 3M APC Oversight during a 90-day trial period.

3M™ APC Support Services support hospitals by providing access to 3M outpatient payment specialists via phone, fax, and email. Available on a yearly retainer basis, this service answers questions on hospital outpatient coding and billing issues.

3M™ Chagemaster Services can help hospitals achieve appropriate payment in compliance with CMS regulations through accurate, complete, and compliant coding and billing. Our goal is to increase the accuracy and timeliness of Medicare and other payer reimbursement while focusing on process improvement opportunities under APCs.

3M™ Charging and Billing Process Review assesses current charging and billing processes in your outpatient service areas. We conduct interviews and review existing policies and procedures to identify process improvements.

3M™ Outpatient Coding Validation Service evaluates coding accuracy based on medical record documentation. Our analysis identifies performance improvement opportunities by service line through application of current federal regulations and coding guidelines. We also deliver focused education on the issues identified during our review.

3M Consulting Physician Services can help organizations receive accurate payment and assess documentation, coding, and billing practices for professional services. We provide education on payment rules, monitor performance, measure improvement, and offer customized training.

3M Consulting Litigation and Compliance Support Services are customized based on the needs of clients and/or counsel in carrying out reviews or investigations pertaining to coding, billing, reimbursement, or internal compliance monitoring. We also provide assistance in validating third-party findings and recoupment assessments, assistance with self disclosures, and education to correct internal deficiencies.



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3M™ ARMS OCE Edit Education assists hospital coders, ancillary clinical personnel involved in the charge process, and billing staff in using the 3M™ Ambulatory Revenue Management Software. Customized, two-day educational sessions address charge process issues and edits resulting from process deficiencies.

3M™ ARMS Workflow Engineering Program focuses on improving outpatient coding and billing through solution-driven process mapping. Key deliverables include an “is” map (representation of current processes) and a “should” map (process change recommendations) to help integrate the 3M Ambulatory Revenue Management Software.

Inpatient services

3M™ Educational Seminar is a one-day, on-site introduction to 3M™ APR DRGs. 3M experts provide education on 3M APR DRG methodology, data analysis, and clinical examples. We include a data comparison to peer facilities, an executive exit conference, and recommendations. **3M™ APR Bridge Service** assists hospitals that have already implemented a concurrent documentation improvement program and need assistance in implementing 3M APR DRGs into their concurrent process.

3M™ Data Conversion Services assist hospitals that need to map historical data to the current 3M APR DRG grouping methodology to provide comparable data. We can also assist hospitals in converting their existing and historical ICD-9-CM coded data into Medicare Severity DRGs (MS-DRGs) to support analysis and performance measurement under that methodology.

3M™ DRG Validation Services provide comprehensive coding reviews to determine what information can be legitimately coded and reported for MS-DRG (or other DRG systems) reimbursement or 3M APR DRG assignment to reflect accurate severity-of-illness and risk-of-mortality outcomes. We highlight areas that can be reported with additional documentation and quantify the impact to MS-DRG (or other DRG systems) and to 3M APR DRG outcomes.

3M™ APR Ready Services can assist new or existing users of the 3M™ Benchmarking with Analytics product better understand the 3M APR DRG methodology and the impact of coding and documentation, as well as how the quality of care can impact outcomes and how users can begin to use the data to facilitate organizational changes.

3M™ Acceleration Services “jump start” an organization’s education program and assist appropriate personnel in understanding and implementing the 3M™ APR DRG Classification System. Service includes a chart review to assess the impact of accurate coding and documentation.

3M™ DRG Assurance™ Program with the new leave-behind software component, the **3M™ Clinical Documentation Improvement System**, supports an organization in improving documentation and coding to appropriately reflect patient acuity. The benefits of this service include accurate assignment of MS-DRGs or other DRG systems for CMS payment; accurate reflection of severity-of-illness and risk-of-mortality outcomes; and assistance in preparing for a severity-adjustment payment methodology.

3M™ DRG Financial Impact Analysis assists hospitals in estimating the financial impact associated with proposed CMS rules that apply to 3M APR DRG issues. Using the hospital’s current CMS discharge data, we provide a detailed analysis of the final and proposed changes.

3M™ Audit Expert Report Card is a review of your historical data and a presentation of the findings. We examine real-life examples in a coaching session with your facility, identify compliance exposure, and recommend steps for improvement.

3M™ Solutions to Excellence™ Program focuses on training personnel to improve clinical documentation and outcomes. Objectives include improved case mix index, quality outcomes at high-volume service lines, and improved overall data integrity.

3M™ HIM Operational Review Services can assist your organization in conducting a comprehensive, in-depth analysis of HIM operations and processes to identify gaps where efficiency and productivity could be improved. We help improve coding processes as well as HIM staff and coder productivity to positively impact accounts receivable.

Call today

For more information on how our solutions can assist your organization, contact your 3M sales representative, call us toll-free at **800-367-2447**, or visit us online at **www.3Mhis.com**.



Health Information Systems

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