



3M™ Coding and Reimbursement System

- Provides a sophisticated, easy-to-learn tool for accurate, complete, and compliant coding and grouping
- Allows coders a way to combine professional talents and skills with powerful expert logic developed by 3M experts and clinicians
- Helps coders quickly resolve coding problems using a robust array of coding, grouping, and reimbursement components
- Available in a Microsoft® Windows® or a web-based application

The 3M advantage

- Proven coding and documentation experience and expertise
- Expert, proprietary logic identifies CCs and MCCs in the coding path
- Expert nosology and compliance edits and call support
- 3M coding customers average a one percent increase in their case mix index compared to competitive coding systems

Quality begins with quality data

Today, coding the patient record focuses on far more than securing appropriate reimbursement. Accurate coding is also at the core of the decision-making processes that can affect every level of an organization. Changes made to improve quality throughout the hospital are based largely on data supplied by the health information management (HIM) department. In many respects, the decisions you make to effectively manage your organization all rely on accurate coding.

Keeping up with the ever-changing rules and regulations of health care is difficult. Understanding clinical conditions, classification guidelines, and payer and Medicare payment methodologies and then applying them consistently over a vast range of patient encounters and other variables are formidable challenges. What coders need is a flexible tool that works the way they work—allowing direct coding for routine procedures, yet employing consistent rules and expert logic to aid the coding process when necessary.

Designed for the coding workflow

The 3M Coding and Reimbursement System is designed to provide appropriate support for beginning to expert level coders. The system guides the coder through the coding process, covering the full range of situations from complex oncology treatments to repetitive or typical patient encounters. At any time, the coder can view the comprehensive selection of online references to clarify the situation and make the appropriate decision.

PRE-RELEASE INFORMATION

3M introduces computer-assisted coding

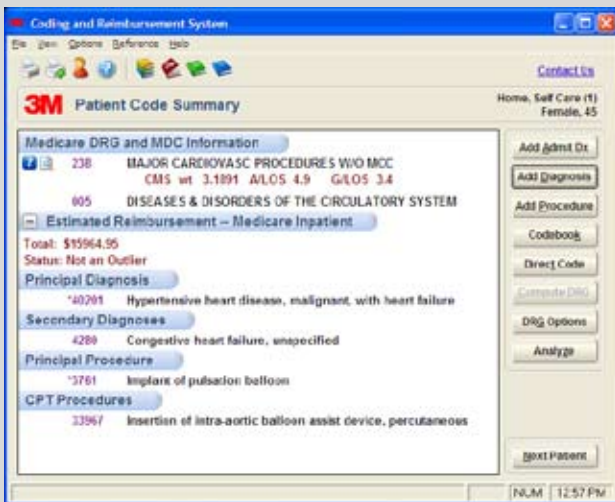
3M has been improving coder productivity for more than 25 years with the advancements found in our Microsoft® Windows® and web-based editions of the 3M Coding and Reimbursement System. Now 3M is taking coder productivity to the next level with the introduction of the 3M™ Codefinder™

Computer-Assisted Edition. This new software analyzes and interprets text-based clinical documentation to identify the codes that need a coder's review. It is integrated with the 3M Coding and Reimbursement System and allows the coder to validate, edit, and perform final code assignment in a single, easy-to-use desktop view.



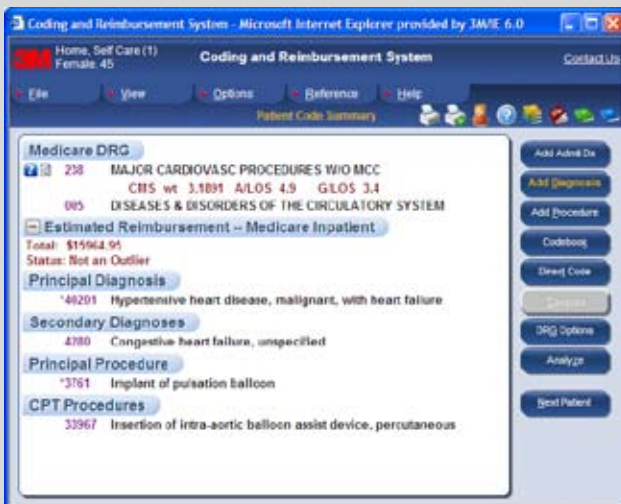
3M™ Coding and Reimbursement System options: Microsoft® Windows® or on the Web

Microsoft® Windows®-based application



Web-based application

The same great 3M Coding and Reimbursement System is also available in a web-based application.



Powerful components

3M™ Codefinder™ Software—Helps you manage the complex rules and terminology of ICD-9-CM coding, following all the mandated rules, principles, and guidelines.

3M™ DRGfinder™ Software—Provides accurate MS-DRG grouping capabilities for Medicare as well as indications if a code is an MCC or a CC. Also includes MCE and proprietary 3M edits.

3M™ HCPCS/CPTfinder Software—Helps you determine the standard five-digit code for procedures and services for outpatients.

3M™ Clinical Analyzer Software—Provides accurate DRG assignment after it has been computed by analyzing the record and prompting for often-overlooked diagnoses and procedures.

3M™ Reimbursement Calculation Software—Calculates instantly the reimbursement based on formulas that use appropriate national and hospital-specific variables. It includes Medicare inpatient and outpatient formulas and accommodates various other payer groupers using the same codes.

3M™ APCfinder™ Software (optional)—Calculates Ambulatory Payment Classifications (APCs) incorporating outpatient prospective payment system regulations for editing, grouping, and reimbursement. It also includes estimated payment for APCs, fee schedules, and beneficiary co-payments and provides APC grouping and reimbursement capabilities for Medicare as well as OCE, NCCI and proprietary 3M edits.

3M Advanced Analyzer Software (optional)—Is the capstone of the 3M™ Coding and Reimbursement System, assisting coders in picking up the specificity in clinical documentation. 3M Advanced Analyzer helps coders obtain the most precise and comprehensive set of ICD-9-CM codes by providing suggestions for frequently missed codes that impact MS-DRG assignment, as well as severity of illness and risk of mortality—important quality metrics.

3M: The ICD-10 experts are ready

Under a contract with the Centers for Medicare and Medicaid Services (CMS), 3M developed ICD-10-PCS and the official crosswalk between ICD-9-CM and ICD-10-CM/ICD-10-PCS. With more than a decade of experience in developing and implementing ICD-10-based coding and grouping products for our international clients, we're ready to help with products, education and training, program management, and consulting services for a smooth transition.

3M is prepared to deliver “ICD-10 Ready” products and services before the implementation deadline and will offer additional solutions—mapping, trending and education—for an efficient and effective transition. The 3M Clinical Research and Nosology Support departments are staffed with experts who can help your organization throughout the transition.

Inspires coder confidence

The shortage of qualified coders requires organizations to identify ways to maintain coding accuracy and consistency. The 3M™ Coding and Reimbursement System gives coders the support and confidence they need to follow correct coding rules and guidelines. In addition, screen-specific help and secondary how-to windows answer questions about navigation and software functionality.

The information required for quality coding is vast and always changing, usually requiring a variety of manuals scattered throughout the HIM department. The following references are available right where coders need them to expedite the coding process:

- *ICD-9-CM Index and Tabular*
- *Physician's Current Procedural Terminology*

References from A to Dr. Z's

Because specific coding references play such an important part in today's coding process, we offer additional online references in the optional 3M™ Coding Reference Software. References include:

- *AHA's Coding Clinic*
- *AMA's CPT® Assistant*
- *Clinical Pharmacology*
- *Dorland's Medical Dictionary and Elsevier's Anatomy Plates*

Another optional component, the 3M™ Coding Reference Plus Software, adds these references:

- *Coders' Desk Reference from Ingenix®*
- *AHA's Coding Clinic for HCPCS*
- *Faye Brown's ICD-9-CM Coding Handbook*
- *Dr. Z's Interventional Radiology Coding Reference*
- *The Merck Manual of Diagnosis and Therapy*
- *Dictionary of Medical Acronyms & Abbreviations*
- *Mosby's Diagnostic and Laboratory Test Reference*

- *Anesthesia Crosswalk*
- *DRG Definitions Manual*
- *ICD-10-PCS Reference Manual*

Our customers say it best

We hear over and over again that 3M's customer support is what sets us apart from the rest. We are proud of the comprehensive customer support we provide before, during, and after the sale. Our support includes installation and training as well as ongoing coding support from 3M nosologists and software support from our technical staff.

3M is your trusted business partner

Since the early 1980s, 3M Health Information Systems has developed market-leading solutions to help improve your organization's financial health. The 3M Coding and Reimbursement System is a key component in generating more accurate coding, quality data for decision support, and full, appropriate reimbursement.

3M has developed proprietary tools and services to help you code completely and accurately, providing your facility with the most accurate case mix index for complete and appropriate reimbursement. 3M supports grouping and reimbursement configurations for over 50 federal, state, and commercial payer and reporting organizations.

3M works closely with the American Hospital Association (AHA), the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), the Agency for Healthcare Research and Quality (AHRQ), the National Center for Health Statistics (NCHS), various state agencies, and professional associations. Our customers can count on receiving software that incorporates the latest regulations, rules, and guidelines for greater accuracy and consistency. Plus, we know a complete solution is more than software alone, so we offer 3M Consulting Services, online interactive software training, and support services.

Call today

For more information on how 3M 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**.



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