



3M™ Physician Coding and Reimbursement System

- Guides coders of all levels through each step of the coding process with logic-based algorithms that can help facilitate appropriate edits, modifiers, and complete codes
- Leads to accurate physician reimbursement with reduced denials, delayed payments, and fewer compliance errors
- Integrates with existing practice management or billing systems to help reduce duplication of effort, decrease opportunities for error, and speed reimbursement

The 3M advantage

The 3M Physician Coding and Reimbursement System delivers innovative technology so your organization can accurately code physician services quickly and efficiently, resulting in cleaner claims with fewer delays and denials.

Driven by expert logic, this software provides serious tools for assigning and editing codes and serves as a critical component of your physician infrastructure for standardizing coding, improving accuracy, and helping protect against compliance risk.

Appropriate reimbursement begins with complete coding

Proper reimbursement depends on accurate and complete coding. Since the early 1980s, clinical coding has become increasingly complex, and the rules a coder must know continue to expand. Staying ahead of changing clinical conditions, evolving classification guidelines, and revised payer and Medicare payment methodologies, and then applying them consistently over a vast range of patient encounters and other variables are formidable challenges for even the most experienced coder. The 3M Physician Coding and Reimbursement System arms coders with a powerful professional solution that can help ensure accurate, complete and compliant coding.

As higher operating costs consume a larger portion of medical revenues, hospitals and physicians turn to 3M for help with their professional coding. The 3M Physician Coding and Reimbursement System is driven by expert logic and backed by more than 20 years of experience. 3M provides the world's most popular coding tools to code services and procedures quickly and accurately — to help make sure you're reimbursed in full and on time.

Get reimbursed for all the services you provide

It is estimated that between five and 25 percent of physician payments are delayed or denied due to coding errors. The shortage of qualified coders contributes to the challenge of maintaining accurate and consistent coding. The 3M Physician Coding and Reimbursement System takes the guesswork out of the coding process, helping reduce denials, delays, and training time so that you get paid.

The 3M solution

The 3M Physician Coding and Reimbursement System is a powerful tool that helps coders produce complete, accurate, and compliant CPT®, HCPCS, and ICD-9-CM codes. The system is designed to provide appropriate support for beginning to expert level coders by guiding the coder through the coding

3M™ Physician Coding and Reimbursement System

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.

Our combined research, regulatory expertise, expert technology, and ongoing technical and nosology support are designed to help generate coded records that are accurate, complete, and compliant. **3M Consulting Services** also offers assessment and process improvement services to address specific organizational needs.

Features and benefits

- Guides the coder through logic-driven coding paths created by the experienced 3M Nosology Team
- Includes National Correct Coding Initiative (NCCI) edits and prompts the coder to check code combinations based on the physician-specific CCI list of bundled and mutually exclusive codes (these edits are driven by the date of service)
- Enables the coder to link the CPT® code to an ICD-9-CM code for billing
- Calculates each code's reimbursement based on the most recent RBRVS regulation
- Provides a crosswalk from surgical to anesthesia CPT® codes
- Recommends use of unique, physician-specific modifiers where appropriate
- Provides global fee period indicators for reference

Optional add-on software modules

- **3M™ Connections Software** — Links the 3M Physician Coding and Reimbursement System to your practice management or billing systems
- **3M™ Coding Reference Software** — Links to the coding session and provides online access to standard coding references, including:
 - *AHA's Coding Clinic for ICD-9-CM*
 - *AMA's CPT® Assistant*
 - *Clinical Pharmacology*
 - *Dorland's Medical Dictionary and Elsevier's Anatomy Plates*
- **3M™ Coding Reference Plus Software** — Extends the 3M Coding Reference Software with these additional references:
 - *AHA's Coding Clinic for HCPCS*
 - *Anesthesia Crosswalk*
 - *Coders' Desk Reference from Ingenix®*
 - *DRG Definitions Manual*
 - *Dr. Z's Interventional Radiology Coding Reference*
 - *Dictionary of Medical Acronyms & Abbreviations*
 - *Faye Brown's ICD-9-CM Coding Handbook*
 - *ICD-10-PCS Reference Manual*
 - *The Merck Manual of Diagnosis and Therapy*
 - *Mosby's Diagnostic and Laboratory Test Reference*
 - *Mosby's Survival Guide to Medical Abbreviations & Acronyms, Prefixes & Suffixes, Symbols, Greek Alphabet*

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**.



Health Information Systems

575 West Murray Boulevard
Salt Lake City, UT 84123
U.S.A.
800 367 2447
www.3Mhis.com

3M is a trademark of 3M Company.
CPT is a registered trademark of
the American Medical Association.
Ingenix is a registered trademark
of Ingenix, Inc.

Please recycle. Printed in U.S.A.
© 3M 2009. All rights reserved.
Published 06/09
70-2009-9070-6