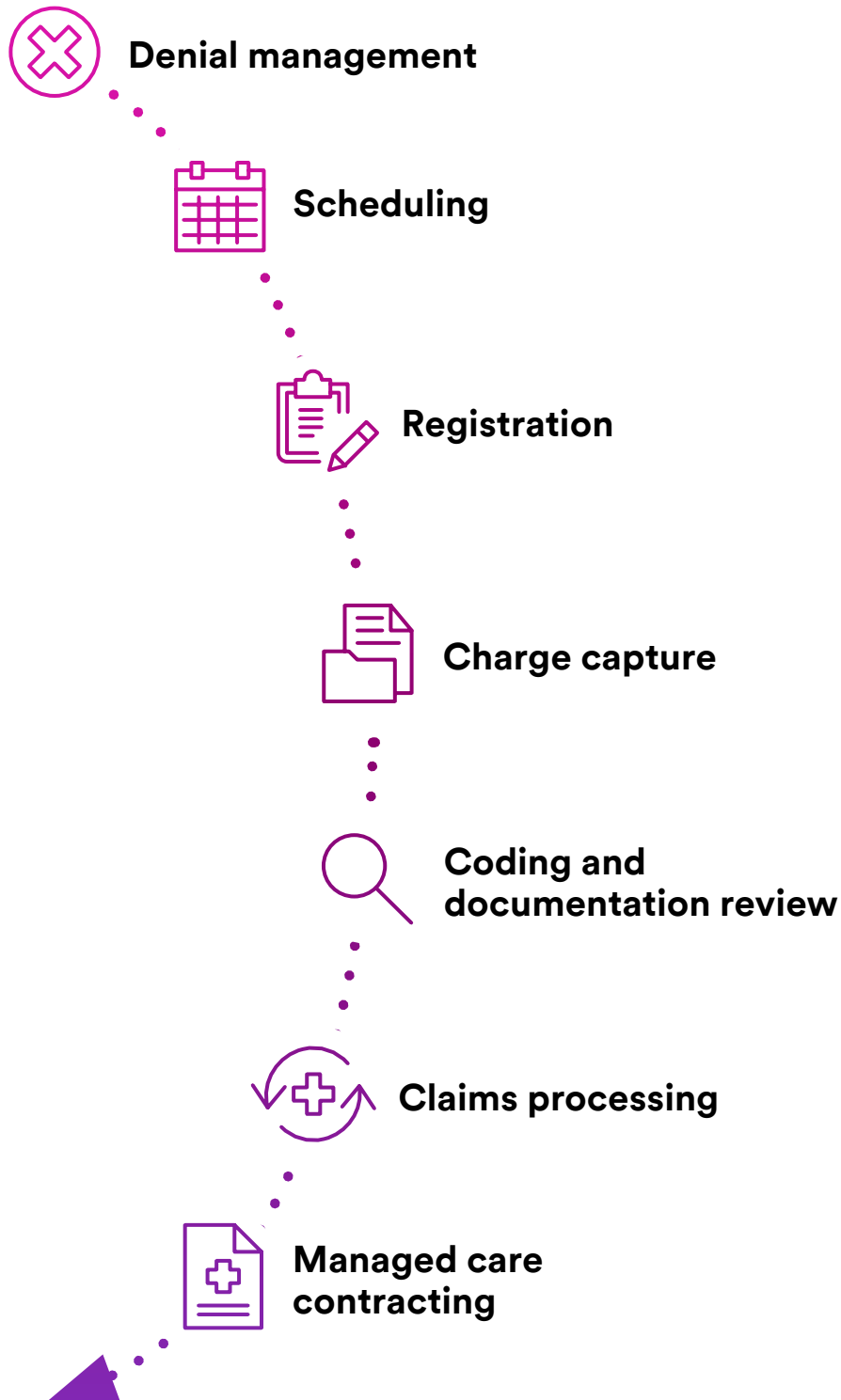3M
Science.
Applied to Life.™

3M Health Information Systems

3M™ Core Grouping Software

Delivering value-added software to your EHR's revenue cycle and analytic workflows

Denial management

Scheduling

Registration

Charge capture

Coding and
documentation review

Claims processing

Managed care
contracting

Healthcare IT systems
are the **heart and soul** of
revenue cycle workflows.

But often they depend
on supplemental third-
party software to **fully
manage** regulatory and
payment requirements.

Not to mention the
content healthcare
organizations want and
need for benchmarking,
quality improvement
and analytics.

What's missing from your outpatient revenue cycle system?

- Medical necessity checking?

- Patient classification?

- Reimbursement calculation?

- Edits and advice consistent with coding best practice and payer rules?

- Data files and coding crosswalks?

Fear not. 3M can help.

We offer PC-and cloud-based delivery of content that enhances your existing systems.

Called **grouper applications**, these are software apps that classify and process patient data or "group" it.

Depending on what content is licensed and how it is used, our grouper apps can be used to:

- Assign patient classification for ambulatory care

- Evaluate the accuracy and completeness of claims data

- Validate medical necessity for outpatient care (or flag and explain medical necessity failures)

- Identify potential coding errors or gaps in documentation

- Calculate accurate reimbursement estimates

How do 3M grouper apps work within another system?

3M grouper applications process patient records either in batches or individually.

- **3M™ Core Grouping Software** is a stand-alone, PC-based product that you install and use in a Microsoft® Windows® environment. The output can then be uploaded directly through interfaces to your billing or claims processing systems or into a data warehouse.

Read more here

As rules for outpatient care become more complex, medical necessity content becomes more important.

Some vendors simply expand fields for longer ICD-10 codes and import tables from Medicare and its contractors. 3M tests the rules to improve accuracy and provides edits to help users correct "failures." Furthermore, we have **a large team of subject matter experts**—including RNs, nosologistsand medical necessity specialists—to help answer customer questions.

We currently have all available, ICD-10-ready content for Medicare local and national coverage determinations (LCDs and NCDs). And we'll continue updating regulatory content well after the ICD-10 implementation.

3M medical necessity content is available in **3M™ Core Grouping Software**. Additional medical necessity content is contained in the **3M™ Ambulatory Revenue Management System** and the

3M™ Medical Necessity Dictionaries for Medicare Parts A and B, which can be embedded in any revenue cycle software that has medical necessity checking enabled (e.g., registration and scheduling). The 3M dictionaries allow systems to reference the same consistent information before, during and after services and across an enterprise for better compliance.

3M™ Core Grouping Software can also be used for benchmarking and analytics, too.

In addition to outpatient content for revenue cycle management, 3M delivers public and proprietary methodologies that stratify patient populations for benchmarking and analytics.

Our methodologies can:

- Assign patient classification for inpatient care, including MS-DRGs and 3M™ All Patient Refined DRG Classification System (3M APR DRGs)

- Assign episodes of care and patient health status

- Identify patient safety issues, such as preventable readmissions, complications and ambulatory care-sensitive conditions

- Measure patient severity of illness and risk of mortality

- Calculate actual and expected costs of care based on patient acuity

So what does this look like in action?

When one **integrated delivery network** invested in an enterprise-wide EMR, its legacy data presented both an opportunity and a challenge. An opportunity in that the claims data could be aggregated into a data warehouse for benchmarking and analytics. A challenge in that the patient data represented populations across several states who were members of different commercial health plans in addition to Medicare and Medicaid.

Across the board, the legacy grouped data was inconsistent, representing widely different payment systems.

The IDN chose to standardize around one classification system to risk-adjust inpatient claims—**3M™ APR DRG Classification System**. The arrangement lets the IDN stratify all legacy claims data for comparisons and consistent evaluation of cost and quality.

What content is most commonly licensed?

- **Inpatient groupers**
  - Medicare MS-DRGs
  - TRICARE Inpatient
  - 3M™ APR DRG Software
- **Outpatient groupers**
  - Ambulatory Payment Classifications (APCs)
  - TRICARE Outpatient
  - 3M™ Enhanced Ambulatory Patient Groups (EAPGs)
- **Reimbursement calculation software for more than 30 commercial and state Medicaid payers**
- **Additional public groupers**
  - Medicare inpatient psychiatric (IP)
  - Renal dialysis
  - Long-term acute care (LTAC)
  - Ambulatory surgery center (ASC)
  - Medicare inpatient rehabilitation facility (IRF)

But wait, 3M offers even more content …

- **Medical necessity content, proprietary**
  - Dictionaries
- **Quality/patient safety groupers, proprietary**
  - 3M™ Potentially Preventable Readmissions (PPRs)
  - 3M™ Potentially Preventable Complications (PPCs)
  - 3M™ Population-focused Preventables Software for:
    › Potentially preventable admissions (PPAs)
    › Potentially preventable ED visits (PPVs)
    › Potentially preventable ancillary services (PPS)
- **Health status proprietary grouper**
  - 3M™ Clinical Risk Grouping (CRG) Software
- **Episode grouper, proprietary**
  - 3M™ Patient-focused Episodes (PFE) Software

3M drives
the standards
with 30 years
of experience.

Our story stands because of:

- A strong clinical history

- The most comprehensive proprietary grouping and preventable events software portfolio on the market

- Both industry-standard (public) and industry-accepted (proprietary) methodologies

- Flexible delivery options including stand-alone computing, embedded content or cloud-based access

- Unmatched service and support

3M's coding, classification and medical necessity experience sets the industry standard.

Why?

For one, we invest significantly in our staff of economists, clinical professionals, nosologists and medical necessity specialists.

Our depth and knowledge translates to convenience for our business partners and their customers.

Finally, an **independent comparison** of grouper content vendors rated us as the top vendor overall, notably for batch processing, PC and web integration, reputation and customer service.

Choosing the right content partner gives you the control to respond quickly to industry demands and manage regulatory and payment requirements.

As a 3M customer, you get the **up-to-date regulatory data and logic you need**, maintained and supported by 3M Health Information Systems and our 30+ years of expertise in editing, grouping and reimbursement methodologies.

To see our entire suite of health information products and solutions, contact a 3M sales representative at **800-367-2447**, or visit us at **www.3m.com/his**.

3M