

3MSM CodeRyteSM CodeCompleteSM Auditing Service

- Uncovers areas of compliance risk in your medical and professional coding to help prevent lost reimbursement
- Checks your organization's compliance accuracy for appropriate reimbursement
- Serves as a training tool for your coding staff

Manage coding quality and compliance

3M CodeRyte CodeComplete Auditing Service is an outsourced auditing solution that provides healthcare organizations with an independent review of their records and coding results.

Led by 3M's talented team of certified, professional coders, the service can help:

- Decrease compliance risk
- Improve coding quality
- Identify areas that cause rework, write-offs and lost reimbursement

How often should you perform audits?

The Office of Inspector General (OIG) and The Centers for Medicare & Medicaid Services (CMS) recommend regular independent coding reviews by an outside, independent party with appropriate expertise. However, they don't specify how often or when coding audits should be performed.

At 3M, we recommend quarterly audits to help clients obtain an unbiased evaluation of their coding accuracy and compliance with federal and state regulations.

When 3M works together with clients, we can help identify coding errors and regulatory updates that need to be incorporated into the organization's coding guidelines.

Let 3M do the heavy lifting

3M CodeRyte CodeComplete Auditing Service offers 3MSM CodeRyteSM CodeAssistSM clients an objective review and in-depth analysis of their medical and professional coding. The service also looks into an organization's adherence to CMS requirements and client coding guidelines.

The service integrates software, note audits, data analysis and education provided by a 3M coding and auditing expert in the selected medical specialties. The review validates compliance with CPT®, ICD and evaluation and management (E/M) coding levels.

As a result of the audit, the client can see where coding and regulatory errors occurred, which helps them update their own coding guidelines for greater accuracy going forward.

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Our audit process, simplified

Stage 1. 3M decides on an appropriate number of records to audit based on the unique attributes of our clients' organizations.



Stage 2. 3M's team of professional coders set up the audit environment within the 3MSM CodeRyteSM CodeAssistSM System.



Stage 3. Records and notes are randomly pulled from the system and audited.



Stage 4. After the initial review, 3M then provides quarterly audit reports via teleconference to our clients. In these reports, we explain our findings, analysis and any patterns of coding issues.

Please note: The scope of the professional service is limited solely to the accuracy of the CPT[®] and ICD codes assigned by client coders based on the documentation presented in each note. The professional services are limited to the auditing of notes coded by the client.

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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