3M™ Coding and Reimbursement System Plus

- Provides a sophisticated, easy-to-learn solution for accurate, complete and compliant coding
- Enables easy access to your coded data via reporting tool
- Easily deployed as a web-based application
- Lets you create and drive your own content with custom edits
- Delivers simplified ICD-10-PCS coding with combined logic-based and table-driven workflow

Intuitive coding and decision support

Designed for expert and novice coders alike, the 3M Coding and Reimbursement System Plus (CRS+) offers more of everything you expect from the world’s most popular coding software.

With 3M experts and clinicians delivering consistent regulatory updates and clients providing continuous feedback, 3M CRS+ works the way coders work, with all the latest features to address regulatory requirements and operational demands.

With easy-to-use menus, references and prompts, 3M CRS+ gives coders the functionality they need to code accurately and work productively.

The challenge

Keeping up with the ever-changing rules and regulations of health care is difficult. Understanding and managing regulatory updates, classification guidelines, payment methodologies and the increasing volume of data in the EHR are formidable challenges.

In addition, computer-assisted coding (CAC), natural language processing (NLP), and the increased specificity required for ICD-10 have also become part of the coding landscape, adding to the complexity facing HIM professionals. These technologies have become key factors in the decision-making processes that can affect every level of a healthcare organization.

The 3M solution

Decisions made to improve quality throughout the hospital are based largely on data supplied by the HIM department. New technology and changing regulations have not altered the fact that medical record coding provides the basic foundation of every organization’s data. Today most hospitals in the U.S. depend on the functionality and reliability of 3M’s coding system to build that foundation.

The 3M Coding and Reimbursement System Plus (CRS+) is a sophisticated yet easy-to-use suite of tools that supports coders with powerful coding logic, giving them the confidence of knowing their judgments are backed by 3M experts and nosologists.

3M CRS+ is designed to provide appropriate support for novice 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 appropriate decisions.
3M™ Coding and Reimbursement System Plus (CRS+)

With 3M CRS+, coders have a flexible tool that supports greater productivity—allowing direct coding for routine procedures, yet employing consistent rules and expert logic to help address unique or complex coding issues. For all of these reasons, 3M uses this flagship coding and reimbursement solution as the coding engine for the 3M™ 360 Encompass™ System.

Reporting with 3M CRS+

3M CRS+ adds detailed reporting on your coded data via powerful, yet simple-to-use tools. With it, you can:

- Measure coding impact on case mix index
- Detect productivity issues by coder and case type
- Gauge ICD-10 impact on coders, allowing for training adjustments and workload realignment
- Report on and analyze the impact of new state payment methodologies (e.g., 3M™ APR DRGs)
- Run ICD-10 analysis reports to see reimbursement impact

3M: The coding experts

For over 30 years, 3M has been a leader in coding and reimbursement for U.S. healthcare organizations, and has spent over a decade working with international clients to develop and implement ICD-10-based coding. Let our expertise help you stay compliant and efficient. With 3M CRS+, your coders can:

- Access an integrated ICD-10-CM and ICD-10-PCS code book from within the coding software
- Translate codes on claims
- Identify specificity gaps in the documentation that can impact ICD-10
- Perform improved ICD-10-PCS coding using a dynamic code builder (patent pending) that combines logic and table-based coding approaches
- Receive inpatient facility reimbursement values and automatically update 3M CRS+ without manual data entry

Powerful components

- 3M™ Codefinder™ Software—Helps you manage the complex rules and terminology found in mandated rules, principles and guidelines.
- 3M™ DRGfinder™ Software—Provides accurate MS-DRG grouping capabilities for Medicare and other payers. DRGs are automatically computed to help improve coder productivity, and multiple DRGs can be calculated at the same time. Also indicates whether a code is an MCC or a CC.
- 3M™ HCPCS/CPTfinder Software—Helps you determine the standard five-digit code for outpatient procedures and services.
- 3M™ Advanced Analyzer Software—Helps coders pick up the specificity in clinical documentation and obtain the most precise and comprehensive set of codes; also provides suggestions for frequently missed codes that impact MS-DRG and 3M™ APR DRG assignment, as well as severity of illness and risk of mortality, important quality metrics.

Easy to integrate

3M CRS+ can be interfaced and integrated with:

- 3M™ Health Record Management (HRM) Software—Provides a comprehensive data abstracting and management tool for collecting and reporting on all inpatient coded, interfaced, abstracted, special study and reimbursement data.
- 3M™ Ambulatory Revenue Management Software (ARMS)—Provides a central repository for and view into all three major data sources that impact outpatient revenue: HIM and chargemaster coded data, UB-04 codes, and remittance advice (RA) codes.
- 3M™ Audit Expert System—Reviews 100 percent of inpatient records for compliance errors at the point of coding. Includes retrospective auditing for inpatient and outpatient.
- 3M™ ClinTrac™ Care Planning Manager (CPM) Software—Integrates case management, social services, resource management and discharge planning in one comprehensive solution.
- HIS vendors and EHR systems available in the market today that have a software interface license agreement with 3M.
- 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™ 360 Encompass™ System (optional)**—Is the only computer-assisted coding and clinical documentation improvement (CDI) solution fully integrated with the 3M CRS+. It was developed to help coders realize the significant productivity gains from natural language processing (NLP) technology, without sacrificing the ability to understand the expert logic behind each computer-suggested code.

**3M: Delivering coder confidence**

Today’s shortage of qualified coders requires organizations to identify ways to maintain coding accuracy and consistency. 3M CRS+ 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 integrated into the software right where coders need them to expedite the coding process:

- ICD-10-CM/PCS Integrated Codebook
- 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**, including:

- AHA Coding Clinic for ICD-10-CM
- AMA CPT® Assistant
- Clinical Pharmacology Drug Reference
- Dorland’s Medical Dictionary
- Elsevier’s Anatomy Plates

Another optional reference component, the **3M™ Coding Reference Plus Software**, adds the following valuable references:

- AHA Coding Clinic for HCPCS
- Coders’ Desk Reference by Optum
- Faye Brown’s ICD-9-CM Coding Handbook
- Dr. Z’s Interventional Radiology Coding Reference
- The Merck Manual
- Dictionary of Medical Acronyms & Abbreviations
- Mosby’s Manual of Diagnostic and Laboratory Tests
- Anesthesia Crosswalk
- ICD-10 MS-DRG Definitions Manuals
- ICD-10-CM and ICD-10-PCS Coding Handbook

**Your edits where and when you need them**

Create custom coding edits that check coding compliance at the time of coding based upon your organization’s coding needs. Custom edits allow unique facilities—including psychiatric, long-term care hospitals, children’s hospitals and independent to large networks — to add critical content to the point of coding.

Designed to create both inpatient and outpatient edits, 3M CRS+ lets you build customized coding edits based on available coding content, including: ICD-10-CM diagnosis codes, ICD-10-PCS, CPT® codes, HCPCS codes, CMS DRGs, CMS MDCs, age, gender, LOS, APCs, 3M™ APR DRGs, 3M™ Enhanced APGs and more.

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Client support, 3M-style: Experienced, reliable, comprehensive

We hear over and over again that 3M’s support is what sets us apart from the rest. The 3M Client Support Services team of dedicated analysts and product specialists are trained to provide the support clients need to keep their software running smoothly.

3M takes pride in delivering a comprehensive, three-pronged client support program consisting of:

- Technical software support delivered via phone or online by knowledgeable 3M support analysts
- A “self-service” client-only support website with an extensive, searchable knowledge base and the ability to download software and regulatory updates as soon as they are available
- Coding-specific support by phone or online from the 3M Nosology Support Services team of experienced, credentialed coders

Since the company’s beginning, 3M nosologists have provided a unique-in-the-industry service to licensed 3M coding and grouping clients by:

- Providing CPT® coding support relating to either inpatient or outpatient coding
- Responding to a range of grouping methodology questions relating to CMS MS-DRGs, APCs, 3M™ Enhanced APGs, 3M™ APR DRGs, etc.
- Gathering feedback from 3M clients on suggestions for enhancing 3M products
- Assisting 3M product development to continuously improve the quality and accuracy of the 3M™ Coding and Reimbursement System (3M CRS and 3M CRS+)

3M: A history of reliability

Since the early 1980s, 3M Health Information Systems has developed market-leading solutions to help improve your organization’s financial health. 3M CRS+ is key to generating more accurate coding and quality data for decision support and appropriate reimbursement. 3M also supports grouping and reimbursement configurations for more than 50 federal, state, and commercial payer and reporting organizations.

3M works closely with:

- American Hospital Association (AHA)
- Centers for Medicare & Medicaid Services (CMS)
- American Medical Association (AMA)
- Agency for Healthcare Research and Quality (AHRQ)
- National Center for Health Statistics (NCHS)
- Various state agencies
- Professional healthcare associations

For more than 30 years, 3M’s goal has been the consistent and timely delivery to our clients of software that incorporates the latest regulations, rules and guidelines needed to achieve complete, accurate and compliant coding.

Call today

For more information on how 3M software and services can assist your organization, contact your 3M sales representative, call us toll-free at 800-367-2447, or visit us online at www.3m.com/his.