Assessment Program

This is a basic, off-site assessment designed to (1) evaluate a practice’s coding and documentation activity as it impacts reimbursement and compliance liability, (2) identify areas of potential lost charges and audit risk, and (3) provide benchmarks for comparison to similar practices and for assessing internal coding and compliance activities.

The Assessment Program includes:

- Evaluation of representative outpatient and inpatient encounter forms for accuracy, completeness and organization
- Review of a sample of Explanation of Benefits to assess reimbursement patterns including denials and re-coding
- Review of CPT utilization as compared to other practices in the same specialty
- Evaluation of representative outpatient and inpatient encounter forms for accuracy, completeness and organization
- Review of medical records and accompanying claims for appropriate documentation and coding

Your practice receives:

- Recommended revisions to encounter form[s]
- Comprehensive review of the medical records including recommendations and reasons for appropriate coding changes
- Recommendations for correcting identified issues in the review of Explanation of Benefits sampling
- Informative graphs comparing the practice’s Evaluation and Management coding distribution to physicians of the same specialty
- Summary of areas identified for further evaluation or follow-up activity
- In addition to a written report, a one hour conference call will be held to review the findings, answer questions, and provide feedback on issues of concern

Education Program

Educational programs are customized to meet the specific needs of each practice. With a clinical orientation, using case studies and coding tools, participants are offered the opportunity to apply the principles they have learned to scenarios they may encounter in their daily practice.

In either half-day or full-day sessions, the format may include large or small group lecture and dialog sessions, hands-on application of coding principles, roundtable Q&A, individual training, or a combination of approaches. Both general and specialty-specific programs are offered.

All educational sessions include:

- Evaluation of representative outpatient and inpatient encounter forms for accuracy, completeness and organization
- Audit of a limited sample of medical records and accompanying claim forms for appropriate documentation and coding
- Comparison of Evaluation and Management utilization to other physicians of the same specialty
- A comprehensive syllabus created to address the specific training needs of the practice
- 30-day post-seminar support from Hill and Associates staff for coding and documentation issues
Comprehensive 3-Step Program

The comprehensive program includes assessment, implementation, and monitoring phases.

Assessment

Five categories - Charge Capture, Coding and Documentation, Internal Communications, Billing Operations, and Administrative Oversight - are analyzed through on-site interviews in addition to data and information reviewed offsite. The five-category assessment phase facilitates a thorough review of the practice’s reimbursement system as well as its potential exposure to compliance liability.

The comprehensive assessment creates a grading system to determine the effort required during the implementation phase and provides a benchmark for the program. The findings are incorporated into a written report that outlines expected performance and recommends an implementation plan and schedule.

Implementation

The implementation phase is a ninety-day program designed to address issues identified in the assessment phase and ensure corrective action is taken. It includes the completion of a comprehensive medical record review and development of an on-going plan for continued monitoring.

This phase is designed to implement procedural changes that will correct improper coding and limit the potential liability of the practice. Our consultants work closely with practice personnel to form and train an internal compliance team and develop a continuous assessment process. Finally, we will equip the internal team with tools to enhance the practice’s ability to code and collect properly.

Monitoring

Following the ninety-day implementation phase, the practice will be classified for one of two levels of monitoring. The objective during the monitoring phase is to provide a level of support that will ensure success in utilizing new procedures and provide continuous monitoring of the compliance activities.

During the final monitoring phase, Hill & Associates serves in a consultative role for emerging issues, continued assistance in compliance implementation including medical record review, and educational sessions as needed. The support includes access to Hill and Associates’ staff for questions and concerns, quarterly on-site visits, medical record reviews, and assessment of monthly reports and action plans.