Health Information Management
Auditing | Coding Compliance

HIM professionals today assume a broader organizational role with increasing volumes in inpatient and outpatient settings. Mitigating risk that accompanies the evolution of HIM to ensure accurate, complete and compliant coding requires that facilities deploy an independent audit function. JTS Health Partners (JTS) designed a unique approach to coding audits focusing on analysis, hands-on education, measured improvement and ongoing risk management.

Coding Compliance Audits

Hospitals audit inpatient and outpatient coding to make sure it is accurate, complete and compliant with national correct coding guidelines. These types of audits are usually concurrent and retrospective and often focus on high volume diagnoses, procedures or Diagnosis Related Groups (DRGs). Audits may also be random in the sampling to show a true quality of the reported data.

Coding audits are a valuable tool for educating coders and improving coding quality and compliance. Sample sizes, however, are normally insufficient to identify patterns of problems that result in lost revenue. However, JTS' solution allows for a larger sample size to more accurately assess problematic areas.

DRG Revenue Capture

To improve coding quality and enhance revenue, JTS' **n**CREAS™◆ solution pinpoints specific groupings of MS-DRG's to identify lost revenue and solidify future revenue through training and process improvement.

JTS works with you to create the following:

- Roadmap for reducing lost revenue caused by incomplete or inaccurate coding
- Resources to retrospectively correct coding and rebill third party payors
- Means to concurrently identify and correct coding and billing errors
- Program to teach coders, CDI and clinical staff where to focus energy for improved documentation quality, improved patient care and enhanced revenue

CC/MCC Capture Rate

The CC/MCC Capture Rate Analytics compare your data to CMS established benchmarks. Any deviations outside the expected norm are reviewed to determine if your facility has the documentation to support the assigned MS-DRG. The analysis can be expanded to non-Medicare payors to look for opportunities within that population that would affect payment and severity.

◆ *Patent pending*

**For more information on JTS' services,
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