Enhanced quality and compliant coding positively impacting reimbursements and denials with IKS Health coding audit

Client profile

Large academic medical center in the Southeast with over 1800 physicians providing leading-edge patient care offering more than one hundred medical specialties, including a leading eye hospital, NCI designated cancer center, cardiac surgery program and over 40 outpatient sites.

Challenge

Client seeking coding audit partner to support coding compliance program and ensure compliant coding and reimbursements. Required ongoing coder education to maintain compliance with coding guidelines and regulations.

Solution

- Implemented IKS Coding Audit Solutions to identify focused areas for audit and established baseline accuracy for all coding patient types and specialties
- Established governance process and frequency from weekly governance to bi-weekly governance to ensure success of partnership
- Established pre-bill audit process and turnaround time (TAT) to enhance quality and accuracy of coding prior to claim submission
- Created client specific reporting based on defined business outcome metrics
- Tracking and trending outcomes by coders to ensure quality improvement
- Delivered monthly coder education based on audit findings and trends and provided education to coding leadership (management and supervisors)

Impact delivered

10%

Increase in coding accuracy across patient types

8-9%

Improvement in coding quality impacting denial rate and reimbursement

Results

Governance process implemented to mitigate potential risk in a timely manner resulting in customers policy enhancements

Customized reporting to support **coder remediation process**

To learn more about IKS Health Coding Audits, contact us at info@ikshealth.com or visit IKSHealth.com.

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