

Integrated CodeCheck

Integrated CodeCheck is a code scrubbing tool used to ensure clean charges, increase efficiency, and reduce denials. Integrated CodeCheck utilizes MedAssets to provide the most current coding information and help maintain compliance to current Medicare Part B coverage rules and Local and National Coverage Determination (LCD and NCD).

Seamless Workflow

Integrated CodeCheck allows staff to verify codes directly from the code capture and/or the code review windows, providing immediate feedback and reducing unnecessary resubmissions based on incomplete or out-of-date information. Codes can be verified individually or as a group, so that bundling issues and Correct Coding Initiatives (CCI) edits can be included in the results. Codes can also be verified as often as needed to allow for changes or code scrubbing at various points in your code capture and review workflow.

Identify Potential Issues

Integrated CodeCheck uses color coded icons for easy identification of charges with warnings or potential errors. This overall charge status can be viewed on the code capture or code summary windows to allow staff to quickly scan verified charges and determine which ones may need additional attention. Detailed result windows are also easily accessible to assist you in reviewing any potential issues. In addition, special icons display to indicate which charges with errors or warnings have already been reviewed.

The screenshot shows a window titled 'Code Capture Summary - Smith, Betty'. It contains a table with columns for Item, Description, PrioLabel, Modifiers, Qty, and ICD Codes. Several rows have green checkmark icons in the PrioLabel column. A red circle highlights the 'Verify Code' button in the bottom right corner of the window.

Item	Description	PrioLabel	Modifiers	Qty	ICD Codes
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1
670.000	Subsequent Care - E	✓		1	170.1

Verify codes and view results immediately

Benefits:

How can Integrated CodeCheck help your oncology practice?

- Helps prevent coding errors
- Quickly identifies problems with charge information
- Eliminates costly rebilling due to incorrect codes or related information
- Improves efficiency by providing an immediate response
- Seamlessly integrates code scrubbing into the MOSAIQ workflow

CONTACT:

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(888)GO-IMPAC
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To learn more about MedAssets, please call:
1-888-883-6332
www.medassets.com

Validation Options

Integrated CodeCheck can be enabled or disabled at the payer level allowing control over what insurers are validated against the Medicare Part B rules. In addition, individual payers can be excluded from Local and National Coverage Determination edits.

Integrated CodeCheck verifies your charges against the following Medicare Part B edits:

ICD-9-CM code validation points:

- Is the code valid?
- Is the code active based on date of service?
- Is the code limited for reporting as a secondary diagnosis only (manifestation code)?
- If a gender-specific edit applies, does the gender match?
- If an age-specific edit applies, is the patient's age appropriate for the diagnosis?

CPT/HCPCS code validation:

- Is the code valid?
- Is the code active based on date of service?
- If there are multiple codes, are CCI edit issues based on date of service?
- If a gender-specific edit applies, does the gender match?

CPT/HCPCS modifier validation:

- If a modifier exists, is it valid?
- If a modifier exists, is it active based on date of service?
- If an E/M and a procedure are reported, is an E/M modifier present?
- If a modifier is reported, is the modifier listed in the CPT/modifier crosswalk?

LCD/NCD validation:

- Is the CPT/HCPCS code listed in a Local Coverage Determination (LCD) for your state/carrier?
-If so, is the CPT/ICD-9 link flagged with a coverage issue?
- Is the CPT/HCPCS code listed in a National Coverage Determination (NCD)?
-If so, is the CPT/ICD-9 link flagged with a coverage issue?

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