



CODER ASSESSMENT & CODING AUDITS

 **INSTANT RESULTS**

System delivers instant results and recommendations

Pena4's Coding Assessment Benefits



AUTOMATED

Fully automated to save time and efforts for coding leaders



DATA DRIVEN

Data-driven approach maintains objectivity and captures current performance trends



COMPLIANT

Improved consistency, accuracy, and credibility. Identifies standings compared to national benchmarks



INSTANT RESULTS

System delivers instant results and recommendations

Pena4's Coding Audits Benefits



CREDENTIALIAED

Credentialed team of Coding Auditors



EXPERIENCED

Auditing team with average of 15 years' H.I.M. experience



TOOLS

Customized, comprehensive auditing tool that compiles audit data and generates meaningful reports



REMOTE

Remote audit capabilities



FLEXIBILITY

Flexible scheduling

Accurate and efficient medical coding plays a critical role in healthcare revenue cycle management. Health information management leaders across every medical vertical need to maintain the highest levels of clinical code quality. As a result, these executives prioritize five primary objectives to maximize results within their operations:

- Education
- Training
- Improvement

Every coder in your organization receives identical records to code, eliminating any complexity difference that could result in a coding audit.

TARGETED MEDICAL CODER ASSESSMENTS

Pena4's targeted medical coder assessments deliver meaningful, quantifiable insight into every coder's strengths and weaknesses to:

- Monitor recently hired employees
- Evaluate new hires
- Determine team knowledge
- Identify training opportunities and effectiveness

Pena4 leverages a data-driven approach to remove the risk of peer-to-peer subjectivity. We also fully compare individual medical coders and entire medical coding teams to established national coding benchmarks to measure accuracy and productivity.

Most importantly, Pena4's Coding Assessment tool is fully automated, enabling our H.I.M leaders and medical coding managers to save time, effort, and resources managing their team compared to traditional, manual methods.

CALL PENA4 TODAY TO LEARN MORE ABOUT OUR MEDICAL CODING AUDIT SOLUTIONS



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PENA4'S CODER ASSESSMENT FEATURES:

- ✓ Assign identical cases to all client's medical coders with patient type specialty
- ✓ Code scores automatically calculated
- ✓ Instant report card for every coder, outlining strengths and weaknesses
- ✓ Offers additional coder report card that outlines quality and productivity
- ✓ Identify accuracy rates and financial impact for each coder assessed
- ✓ Show areas of strengths and weaknesses by coder and record type for more in-depth insight on education needs
- ✓ Benchmark team accuracy and output across nationwide medical coders

CODER AUDITS

Pena4's expert medical coding auditors deliver an unbiased assessment of quality and accuracy to:

- ✓ Validate code assignment
- ✓ Check DRG selection
- ✓ Review coding compliance

Our auditors partner with our clients to develop an audit solution based on their specific needs.

MEDICAL CODING AUDITS

Pena4's experienced and credentialed auditors carefully work through a healthcare system's medical records to identify potential revenue vulnerabilities, increase the benefits of continuity of care for patients, and designate opportunities for financial and coding performance improvement. Our flexible audit services allow clients to select from single, monthly, quarterly, or annual audit programs. Pena4's medical coding audit program includes:

Kick-Off Meeting

This onsite event determines the most cost-efficient and impactful audit scope and methodology to pursue.

Target Selection

Our auditors designate a specific focus for each audit or review, including:

- ✓ High-risk diagnosis and DRGs
- ✓ Principal procedure
- ✓ Principal diagnosis
- ✓ CC or MCC conditions

Validation Review

Pena4 conducts complete validation of all procedure codes, sequencing, and code specificity to ensure compliance with the latest coding standard and guidelines. We also provide validation (retrospective or concurrent) of all DRG (MS/APR) assignments.

Opportunity Improvement Report

Our comprehensive recommendation report outlines all documentation improvement and coder education opportunities.

Customized Education

Pena4 provides education and training programs to address specific coder knowledge gaps and clinical documentation insufficiencies identified throughout the medical coding audit process.

"Throughout all of Baystate's ICD-10 preparations, Pena4 has been there, providing expert guidance on the journey to ICD-10. The firm not only helps us accomplish what's now, but also prepares us for what's next."

Walter Houlihan, Corporate Director, MBA, FHIA, FAHIMA,
Director of H.I.M. and Clinical Documentation.