

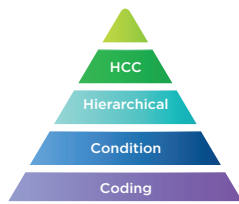


Medical Coding Services

Healthy revenue cycle starts with quality documentation powered by timely, accurate and complete coding.

The quality of clinical documentation powerfully impacts the revenue cycle. The key to achieving trustworthy documentation is accurate and complete medical coding. Coded data provides the foundation for a patient's "clinical picture". The reliability of this picture is vital for delivering appropriate patient care, ensuring patient safety, and empowering efficient reimbursement.

OUR COMMITMENT: As healthcare has evolved, the use of coded data has expanded with far-reaching implications for the patient care continuum and downstream functions that extend beyond the bottom line, such as research and hospital ratings. Our team of experienced and passionate professionals maintains the highest standards for coding accuracy and thoroughly understands the complexities of regulatory standards and rigorous compliance guidelines. We're committed to providing expertise and value. Facility, Pro-fee, and HCC Risk Adjustment coding are all in a day's work for our coding experts.



CLIENT PARTNERS: Our team works with renowned academic medical centers, trauma facilities, independent providers, consulting companies, and legal entities. As a trusted revenue cycle partner, we establish long-term advisory and consulting relationships. Our coding services enhance revenue cycle efficiency, reduce administrative burdens, and improve workflow to support clients' mission-critical financial and patient care initiatives.

For medical coding, there is no deviation from this principle: "If it isn't documented, it wasn't done"



Intellis IQ Medical Coding Process

PROVEN PROCESSES & PERFORMANCE MANAGEMENT: Our coding methodology follows a five-step process focusing on meticulous accuracy and completeness. The method includes accessing patient charts, pre-coding, CPT/HCPCS & ICD-10 coding, quality audits, and submission of coded charts. To ensure quality and value, managers provide performance oversight and continual assessment of our team's day-to-day-productivity. Ongoing communication and reporting ensure seamless client partnerships.

EXPERT TEAM: Our commitment to quality is unparalleled. Our multi-tiered hiring and intense onboarding process ensure the acquisition of top talent. As the ever-changing demands of the healthcare industry increase, Intellis stays at the forefront by arming our coding team with up-to-date knowledge and industry best practices. Our professionals have the credentials, skill sets, knowledge, and passion for meeting clients' revenue cycle performance goals. We consistently achieve excellent coding quality ratings and maintain weekly monitored high productivity standards as required by our clients. Additionally, Intellis provides internal quality assurance for every recurring long-term project and coder as well as timely and continuous feedback.

CONTINUING EDUCATION: Education is at the heart of our mission, and it permeates every aspect of our methodology. The Intellis IQ Education Center, our online learning platform, keeps our team current on all aspects of the coding process while coders earn industry-approved CEUs. Ongoing coder education, aligned with our internal QA program, creates an environment for career-long learning and precise and accurate code assignment.

Coding Solutions

Intellis provides a complete range of solutions that include fully integrated and outsourced medical coding services, overflow assistance, and staff augmentation. Our coding services are scalable to meet current and future client needs as volumes and circumstances fluctuate.

- **Inpatient:** Academic, Critical Access, Trauma Level I-V, Community, Rural
- **Outpatient:** Outpatient Surgery, Observation, Interventional Radiology, Emergency Department, Ancillary, Clinics
- **Professional Fee:** All Specialties, All Types of Providers
- **Evaluation and Management**
- **Risk Adjustment/HCC**
- **Oncology**
- **Appeals and Denials Management**
- **Edit Resolution**
- **Charge Reconciliation**
- **Coding Management**
- **Departmental Operational Assessment**



The Intellis IQ Suite: Healthcare Advisory Solutions

Revenue Cycle and Health Information Services

- Medical Coding
- Medical Coding Audits
- Department Operational Assessments
- Chargemaster Engagements
- Risk Adjustment/HCC Coding and Auditing
- Denials Management

Clinical Documentation and Quality Services

- Second Level Reviews
- Query Reviews
- CDI Department Assessments
- IP and OP Program Implementation
- IP and OP CDI Review Process
- PSI and Mortality Review/Committee Implementation

Health Information Technology Services

- Master Patient Index (MPI) Clean Up
- Enterprise Master Patient Index (EMPI) Clean Up
- Ransomware Downtime Data Resolution
- Clinical Data Abstraction
- Scanning & Indexing
 - EMR Implementation
 - HIMMS Stage 7 Point of Care
- EPIC Implementation and Management

Education and Training Services

- Medical Coding
- Clinical Documentation Integrity
- Provider Education
- Annual Coding Updates