

WHO IS HEALTH CARE VISIONS?

An Experienced Strategic Partner

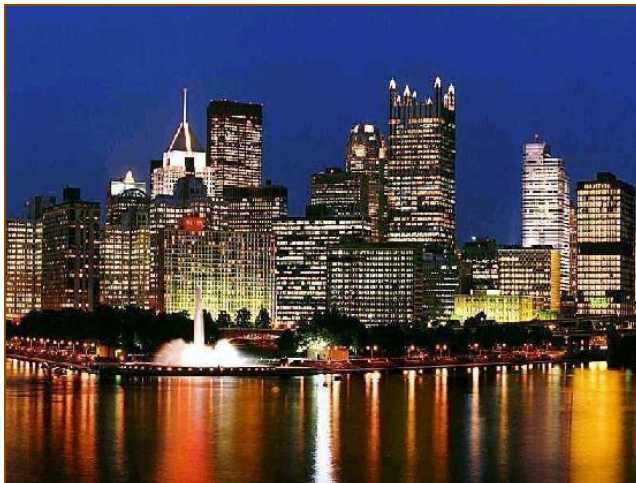
Health Care Visions, Ltd. is a nationally renowned consulting firm offering specialized expertise and services to hospitals to identify and evaluate existing or emerging opportunities in cardiovascular and peripheral vascular services.

Health Care Visions, Ltd.'s staff consists of Master's prepared clinical and business consultants who possess a tremendous amount of experience in managing successful cardiovascular and peripheral vascular programs for hospitals ranging from small institutions to some of the country's largest and most prestigious health care systems.

Our consultants are well versed in the latest, most advanced technologies and best medical practices in this rapidly evolving service category. We have provided assistance to over 85 hospitals, with assignments ranging from short, time-limited, task specific engagements to long-term strategic partnerships.

We welcome the opportunity to discuss your needs and explore solutions that can strengthen your existing programs or assist with the implementation of new services.

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*Consultants Specializing in
Cardiovascular Programs*

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Cardiovascular Revenue Cycle and Coding Review




Health Care Visions

Why Have a Cardiovascular Revenue Cycle and Coding Review?

A comprehensive Cardiovascular Revenue Cycle and Coding Review will examine the charging and billing processes in the areas requested: cardiac cath lab, cardiac surgery and/or cardiology services. The results of the project will identify savings and provide a road map for methods of optimizing revenue processes.

A CV Revenue Cycle and Coding Review Will Meet These Financial Objectives

- Review the key processes involved in your revenue cycle to identify system inefficiencies, gaps and inaccuracies
- Review actual coding and billing samples
- Analyze and compare the current situation to best practices
- Provide methods on revenue cycle monitoring to optimize the revenue stream
- Assist in the development of a work plan that addresses the issues identified
- Formulate the assessment findings and provide a written summary of recommendations



Health Care Visions Will Collaborate With the Client Using This Approach

Flow Charting the Revenue Cycle Process

The consultants will assemble a cardiovascular revenue cycle team of key administrators, clinical area managers, finance department managers and medical staff, to participate in the flow charting process.

Cardiovascular Closed Medical Records Coding and Billing Review

Closed patient medical records, both inpatient and outpatient, reflecting specific procedures will be selected. Health Care Visions will conduct an audit of these records to:

- Ensure correct DRG and procedure code assignment
- Ensure UB 04 and reimbursement information is correct
- Identify late charges
- Confirm the accuracy between supplies used, charged and billed
- Confirm the accuracy between procedures performed, documented, coded and billed
- Identify the correlation of clinical documentation to coded diagnosis and the assigned DRG
- Review the time interval between date of service and when the bill is dropped
- Identify all lost revenue

Cardiovascular Charge Description Master Review

This portion of the assessment will include:

- Flow charting process to identify additions and deletions to the CDM
- Identification of individuals responsible for maintaining the CDM
- Reviewing the contents of the cardiovascular CDM
- Confirming the accuracy between supply and procedure charges to CDM contents
- Reviewing reconciliation practices

Healthcare Information Systems Assessment

This assessment determines the extent of system integration, personnel awareness of their systems' capabilities and system entry duplications. The assessment will take place in (but not limited to) the following areas:

- Admitting
- Scheduling
- Cardiac Catheterization
- Laboratory
- Cardiac Clinical Nursing Units
- Non-Invasive Cardiology
- Patient Accounting
- Coding

