



THE POWER OF BEING UNDERSTOOD

CHARGE DESCRIPTION MASTER (CHARGEMASTER/CDM) COMPLIANCE SERVICES

The Office of Inspector General (OIG), Medicare, and other payers continue to monitor the coding and reporting methodologies of providers to ensure that services are being appropriately billed and reimbursed. In addition, providers are continually under pressure to balance aggressive net revenue expectations with ever-changing coding compliance requirements.

RSM has the necessary Charge Description Master (CDM) and coding expertise to assist you in meeting your financial and regulatory compliance goals. Our services will help you and your staff in reporting charges and data for clinical services, assessing the adequacy of supplies, drugs and other billable items, and accurate billing from the CDM to the UB-04 claim form.

Our approach to chargemaster compliance services

Our standard chargemaster compliance service methodology is designed to incorporate the following objectives:

- **Chargemaster Data Review** – We will evaluate the accuracy of currently assigned CPT/HCPCS codes and descriptions, revenue codes and descriptions and modifiers. Additionally, we will make recommendations to add new codes and inactivate obsolete codes to ensure all procedures are being coded and updated.
- **Charge-Capture Assessment** – Our coding professionals will conduct a high-level charge capture analysis which will include claims sampling and charge sheet evaluation as applicable.
- **Knowledge Transfer** – We will conduct department level interviews and include coding and charge capture feedback to those staff members directly involved with the coding process. Knowledge transfer and provider staff education will allow for the continued successful internal maintenance of the chargemaster.

Scope

We perform a chargemaster assessment to assure revenue code, HCPCS/CPT coding, charging strategies, data flow and chargemaster maintenance procedures are in compliance with current Medicare guidelines. The scope of the chargemaster assessment will be to utilize regulatory billing and reporting notices to ensure accuracy and improve the quality of data submitted to Medicare and other third party payers.

Our standard CDM assessment would look at the following services:

- Laboratory and Pathology
- Radiology (Diagnostic and Therapeutic)
- Cardiology Services (Invasive and Non-Invasive)
- Rehabilitation Services (physical, occupational, respiratory, speech therapy and audiology)
- Other Ancillary Services (neuro-diagnostics, radiation and medical oncology/chemotherapy, infusion therapy and gastrointestinal services)
- Patient Care Services (outpatient, inpatient and surgery)
- Emergency Department
- Pharmacy and Supply Services

Our clients also find that it is strategically beneficial to perform Chargemaster Compliance Services in conjunction with other revenue cycle and integrity initiatives such as defensible/strategic pricing, claim audits, denial management and managed care engagements.

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