



**Revenue
Integrity
Solutions**

HOW OUR SOLUTIONS WORK

1- CONTINUOUS MONITORING

Constant changes to government regulations, payer rules, and participating team members necessitates continuous end-to-end Revenue Cycle monitoring.



2- EXPERT ASSESSMENT

Our fully credentialed and experienced team conduct detailed pre-bill audits, denial reviews, and appeals management to gain a thorough understanding of improvement opportunities.



Team Training



4- TEAM TRAINING

Once the source of reoccurring issues are identified, focused training and updates to best practices are made to resolve the concerns at the source and prevent future incidents.

Issue Identification



3- ISSUE IDENTIFICATION

Thorough reviews of all workflow stages, from document creation to coding quality, and pre-bill adjudication, identify issues at the source so overall performance can be optimized.

AQuity[®]
Solutions
An IKS Health Company

Revenue Integrity Solutions

Restoring revenue cycle wellness to improve financial outcomes and ensure compliance.

AQuity Solutions partners with health systems, hospitals, clinics, and physician practices to drive performance in the heart of the revenue cycle.

For more than 20 years, AQuity clients have relied on our vast experience with documentation and coding quality, compliance, claims, and denials management to craft lasting solutions to their unique challenges.

Partner with AQuity to discover innovative revenue cycle solutions and multifaceted education strategies designed to streamline patient financial workflow, proactively maintain compliance, and boost financial success.

The AQuity team of industry experts brings decades of real-world clinical knowledge and revenue cycle reimbursement understanding in clinical documentation, coding, quality and compliance requirements, and health information management to your healthcare organization.

REVENUE INTEGRITY SERVICES

- Coding & CDI Audits
- Claims and Edit Remediation
Denials & Appeals
- RCM Advisory

CODING & CLINICAL DOCUMENTATION IMPROVEMENT AUDITS

The software interface is divided into several sections:

- Navigation:** Includes tabs for DATA, REPORTS, PATIENTS, CALENDAR, LIBRARY, HELP, and USER.
- Left Sidebar:** A tree view menu with categories: Patients (General, Patient Data, General data, Prescription data), Prescriptions (List, History, Payment, Database), and Relatives.
- General Information:** Patient ID: 385561113, Age: 31, Blood group: O+.
- Scheduled appointment:** A table listing appointments with columns for Date, D-R, Notes, Qty, Status, and EC-R.
- Calendar:** A monthly view for July, with the 10th highlighted in green.
- Patient Form:** Fields for Registration (385561113), Date (10.07.20), Name (Avery Smith), Age (28), Group (ERT-341), and Status (Active).

Date	D-R	Notes	Qty	Status	EC-R
10-01-23	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	1	NY-90010; GR-02003	Negative
06-05-22	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	RN-90010; GR-01991	Negative
11-04-21	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	RN-90010; GR-01991	Negative
06-10-20	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	0	RN-90010; GR-01991	Negative
02-09-20	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	MS-90010; GR-02003	Negative
01-04-20	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	1	MS-50031; GR-01993	Negative
05-01-19	NDA -07	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	RN-90010; GR-02003	Negative
04-03-18	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	RN-90010; GR-01991	Negative
09-09-17	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	3	HY-90010; GR-01991	Negative
12-08-16	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	0	RN-90010; GR-02001	Negative
12-12-15	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	TY-450010; GR-01991	Negative
09-01-12	NDA -03	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	2	RN-90010; GR-01991	Negative
06-07-12	NDA -05	Patient loquat ipsum dolor sit amet, consectetur adipiscing elit. Ut enim in ultriciesque ipsum. Sed expedita libero et grande morbo. Ut enim in ultriciesque ipsum.	0	RN-90010; GR-01991	Negative

Uncover coding issues, lost revenue and compliance risks

AQuity audits and record analysis projects target specific coders or service areas for a compliance focused assessment based on KPI measures.

TOTAL QUALITY AUDITS: AQuity's coding audits help identify problematic areas related to coder education, documentation quality, and potential reimbursement dollars that healthcare organizations often leave on the table.

CUSTOMIZED CODING AUDITS: Targeted reviews to support unique situations such as a new physician or targeted physician quality review, physician practice merger or acquisition, a new program or facility, or specialty environments such as infusion centers.

PRE-BILL AUDITS: AQuity's pre-bill audit function encompasses a comprehensive examination, provided in real-time, to ensure a claim is accurately coded prior to billing, which is proven to significantly reduce claim denials.

CDI AUDITS: Assessment facility-specific guidelines in place, identifying gaps to reveal opportunities to support a successful CDI program by identifying gaps and links between the documentation in the medical record and the allowable codes.

**CLAIMS AND EDIT
REMEDICATION
DENIALS AND APPEALS**



Avoid denials and revenue leakage

AQuity claims and edits remediation services resolve issues by reducing a hospital's pre-bill edit queue and creating thorough, detailed bills that are fully acceptable for submission to payers.

- Solve billing issues related to diagnosis, medical necessity, procedure, and outpatient prospective payment system (OPPS) codes.
- Successfully release clean bills to payers, reducing write-offs and improving revenue recognition.
- Avoid denials and appeals by submitting high-quality clean claims from the start.
- Expert consultants can analyze and trend data to determine if IT or third-party software may be a catalyst to claim denials. gaps and links between the documentation in the medical record and the allowable codes.

AQuity experts review the denial and related claim and bill, pinpoint specific documentation or coding issues that led to denials, and develop a remediation plan that enables denials to be successfully appealed and the claims accepted by the payer.

- Complete management of the denial and issue resolution process
- Documented processes and operational enhancements to improve denial rates.

**REVENUE CYCLE
MANAGEMENT
ADVISORY**



Foster quality and efficiency throughout your revenue cycle

AQuity's Revenue Cycle Advisory services provides expert insights on necessary accuracy adjustments with corresponding rules and regulations to support the recommended changes.

Our team offers a holistic approach to remediate any coding, billing, or charge processing inaccuracies with targeted education support and workflow calibrations to resolve the root causes of errors.

AQuity provides a variety of credentialed personnel and services to support the healthcare organization's revenue cycle – from coding and clinical documentation to quality programs and financial services. We carefully match your needs to our recommended services and our experienced team members. These include:

- Coding Management Resources
- Coder Assessment & Onboarding
- Telehealth Consults
- Third-Party Payer and RAC Reviews
- Analysis of Hierarchical Conditions Categories (HCC) Documented processes and operational enhancements to improve denial rates.

Solutions for Smarter Healthcare

Contact us today for details on
what we've done for others and
what we can do for you.



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