



Optum Coding Review Module

In recent years, physicians have used EMRs, rather than coders, to assist in assigning codes for their services. This strategy to reduce overhead and shorten the revenue cycle is effective, but doesn't guarantee that nothing will be missed. The Optum Coding Review Module, a component of CAC Professional, automates comprehensive physician coding review. This solution offers peace of mind that you've captured the necessary information and enabled accurate reimbursement and quality reporting.



When physicians assign coding in the EMR, **you need** a **reliable way to scrutinize that coding** to capture appropriate revenue, prevent denied claims and avoid potential pitfalls:

- Increased audit risk
- Costly and largely ineffective denial rework
- Missed conditions and under-coding*

A hospital EMR system **may seem "good enough"** for professional coding, but may not actually be the most effective technology to ensure that what goes out the door is right.



The Coding Review Module can help you **achieve more accurate coding up front** to increase overall accuracy and efficiency. The Coding Review Module:

- Monitors physician-selected coding
- Identifies encounters needing review
- Enables real-time remediation
- Reveals problem areas
- Delivers the flexibility to meet changing needs and target specific concerns

Optum Computer-Assisted Coding (CAC) Professional

Optum CAC Professional enables consistent, compliant coding for optimal operations and accurate revenue capture. Powered by patented Optum natural language processing (NLP), it offers customizable coder workflows and minimizes manual processes to further increase accuracy and efficiency. CAC Professional is a premier solution for physicians, billing companies and medical centers.

- Facilitates accuracy and efficiency
- Optimizes operations
- Speeds revenue recovery







Explore the benefits of targeted, prospective physician coding review

The Optum Coding Review Module compares physician-selected coding to Optum NLP code assignment. It leverages advanced clinical intelligence and configurable rules to identify specific or misaligned codes for coder review. Customized workflows enable targeted action to improve coding accuracy, reduce risk, prevent denials and preserve revenue.



Automates physicianselected coding review

- Enables more complete and accurate coding without additional staff
- Provides configurable business rules and customized workflows
- Leverages Optum NLP to accurately identify encounters needing review
- Performs prospective review to allow real-time correction



Enables targeted action

- Identifies problem areas where physician education is indicated
- Allows you to target specific encounter and patient types
- Helps quantify the effectiveness of your quality program
- Offers flexibility to address specific areas of concern



Improves coding accuracy

- Provides secondary review of all physician-coded encounters
- Identifies discrepancies between NLP- and physician-selected codes
- Enables efficient review and modification prior to billing
- Reduces denials and rework
- Preserves revenue
- Mitigates payer audit risk

The Coding Review Module helps organizations:

- Increase coding and charging accuracy
- Maintain compliance
- Prevent denied claims and rework
- Capture appropriate revenue
- Support quality metrics



Over 710 million

documents have been processed by Optum NLP through CAC Professional.

Ensure complete and accurate professional coding



1-866-223-4730



optum360@optum.com



Optum360.com



optum360.com

11000 Optum Circle, Eden Prairie, MN 55344

Property of Optum360, LLC. Optum360 and the Optum360 logo are trademarks of Optum360, LLC. All other brand or product names are trademarks or registered trademarks of their respective owner. © 2019 Optum360, LLC. All rights reserved. WF1384231 08/19



