Charge Accuracy

Identify
revenue cycle issues

Quantify
what they're worth

Measure
improvement and impact

AppRev's Charge Accuracy solution gives hospitals confidence in their revenue cycle.

AppRev has developed the industry leading method of measuring the accuracy of provider charges for both hospitals and physician groups. Using the claims actually submitted to payers, we apply over 100,000 predictive analytical tests to identify errors in charging, coding and billing practices.

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Charge Accuracy

Denials Intelligence

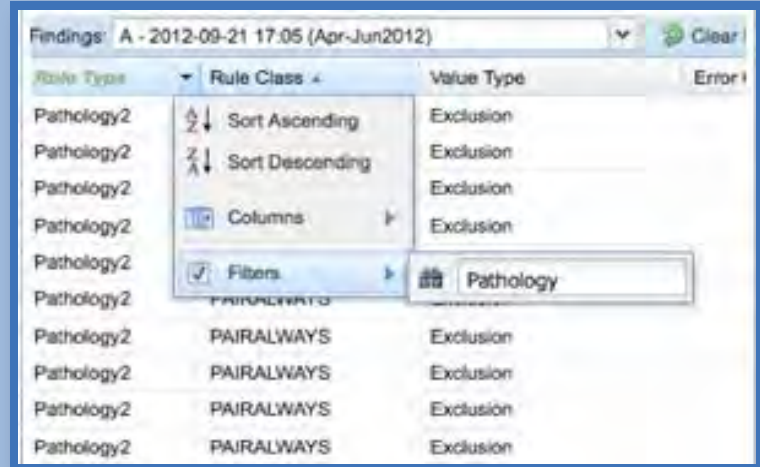ICD-10 Metrics Study

Pricing Analytics

Pricing Transparency

Findings

While many providers use various claim edit technologies and processes, AppRev has developed the ability to find, quantify and value errors that are slipping by these other solutions. We improve performance by designing an implementation plan to correct inaccuracies. AppRev's expert billing, coding and documentation team guides providers through our Findings.

What is a Finding?

When an item on a claim fails one of our tests, we create a Finding: an indication that an error has occurred, usually the addition of a procedure code that is not needed or the exclusion of a procedure code where it should be. We then create a customized plan to correct the errors.

Users are able to organize Findings by: department or service area, rule types, specific HCPCS, ICD-9 codes, etc.

Measurement

Once a correction has been implemented, AppRev continues to measure the impact of the changes to ensure they are achieving the desired result. As each Finding is confirmed and implemented, we calculate and update its financial impact.

Providers validate results using the Service Supported Software™ online environment. Users are able to review individual claim data to confirm AppRev's Findings. Our experienced consultants assist providers in creating a plan to correct the process behind each inaccuracy. Once the new plan has been implemented, we measure the change in behavior on a monthly basis. This monthly data is then analyzed to identify new Findings.

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Methodology

AppRev has designed hundreds of thousands of tests to isolate missing or inaccurate charges. Using the easily available claim data (HCPCS, revenue codes, ICD-9 and others,) AppRev's predictive analytics identify specific Findings and deliver the detailed information needed to validate and fix the issues causing the errors.

Client Portal

AppRev's Charge Accuracy Solution combines software with consulting to deliver the most effective charge accuracy solution available.

Graphs showing status, implementation, valuation, claim statistics and more are available on the AppRev User Portal.

AppRev Difference

Easy start: only standard claim data required

No software to install

Simple user environment

Overlay any current process or solution: Find the issues others are missing

Customizable rules and workflow for providers to meet unique needs

Expert help to understand Findings and implement solutions

Ongoing measurement and communication

"Charge Accuracy fixes the process, not just the claim, helping us to avoid edits, instead of having to work them."
-Gina Hill, Clinical Coordinator
Wayne Memorial Hospital

Easy online help and guidance:

Each provider is assigned both a financial and clinical consultant.

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