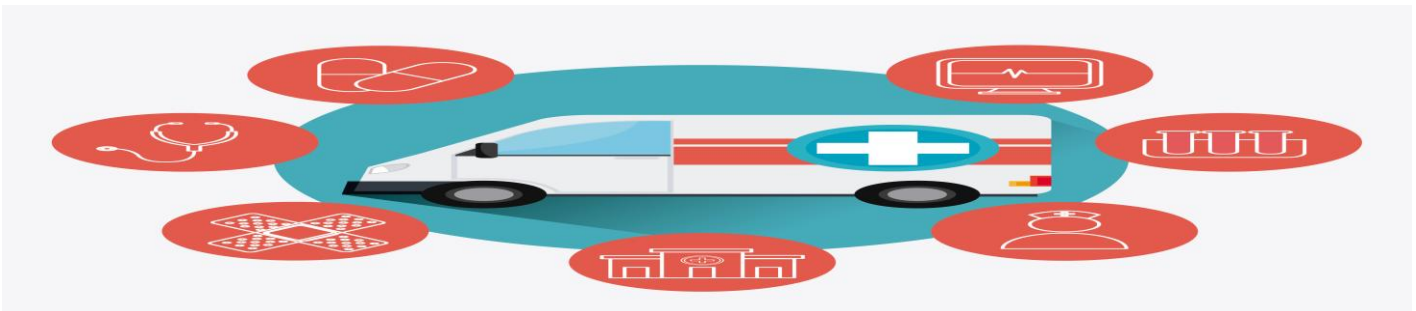


Correct Medical Coding

and Lumbar Radio frequency ablation case.

Proper medical coding is important on many levels, from ensuring accurate payment for physicians to creating a valid record of patient care history.

In addition to aiding the medical billing process for procedures administered and helping expedite the payment of services for physicians, medical codes also serve the purpose of comparing projects and planning for under-served health care areas, aiding in administrative functions, as well as identifying symptoms that must be addressed and referenced by other physicians.



For example, an ambulatory surgery center was performing Lumbar Radio frequency ablation for more than 5 times in year, however the LCD guidelines allows only 3 times in a year, With correct coding knowledge, we helped the center to reduce potential loss that may occur due frequency denial. It is not the rule that if have a payable dx on the claim it will get paid, as we need to read and understand the whole LCD guidelines. As a medical coder we need to pay attention in detail and help the providers to create successful practices.



Our medical coders specialize in Cardiology, Interventional, Emergency, Anesthesia, Ambulatory Surgery, Hospital, or Physician based claims on sound knowledge of medical coding rules and regulations including compliance and reimbursement.

As a coder and biller, We check a variety of sources within the patient's medical record, including the transcription of the physician's notes.

Revmedi has trained medical coding professionals who have been handling issues such as medical necessity, claim denials, bundling issues and charge capture on a regular basis and this has helped in having a faster turnaround time and generating unclaimed bills for physicians, hospitals and medical billing companies.

For free consultation, call us on 1.513.878.0408 or senthil@revmedi.com.

Visit our site www.revmedi.com.