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*Our services encompass the breadth of Revenue Cycle and related regulatory and compliance projects including:*

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*Complete Revenue Cycle Assessments*

*RAC Audit Preparation*

*Denial Management*

*Billing / Coding Audits*

*Charge Master Optimization*

***Observation Status Assessment***

*Enterprise Risk Management*

*Physician Practice Benchmarking*

*Documentation Audits*

*Patient Access Process Review*

*Emergency Room Throughput*

*Cost/Benefit Analysis*

*Contract Management Analysis*

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### ***Observation Status Assessment***

The Medicare Claims Processing Manual Section 290.1 defines observation services as a well-defined set of specific, clinically appropriate services, which include ongoing short-term treatment, assessment, and reassessment, that are furnished while a decision is being made regarding whether patients will require further treatment as hospital inpatients or if they are able to be discharged from the hospital.

Billing for outpatient observation services has been an ongoing issue for many providers, particularly since the advent of the hospital outpatient prospective payment system (OPPS). There is no shortage of confusion, both with the issues involve billing problems or dealing with medical staff members that have their own definition of the appropriate use of observation services. Add this to the fact that besides providing very little reimbursement, and that the Office of the Inspector General has increased scrutiny in this area, many providers have decided that coding and billing for observation services is not a worthwhile endeavor.

RevCys has successfully implemented strategies to correctly identify observation patients whether coming through the emergency room, through surgical services or as direct admits to the hospital. The process included getting concurrent reviews performed by Case management at timely intervals to ensure compliance with CMS guidelines on observation. Physician and staff education is then provided to guide in appropriate classification of patients.