Revenue Enhancement and Risk Reduction

CLAIMSauditor.com® is a web-based compliance and auditing tool that assists clinical, coding and financial professionals to uncover coding, compliance and reimbursement risks and opportunities hidden in their provider claims and other detail data.

Unlike EDI systems or "scrubbers," CLAIMSauditor.com® allows users to apply and create rules not typically found in such systems. The system facilitates a more cost efficient and effective focused review and audit approach.

With CLAIMSauditor.com®, you will be able to:

Query and select records for review

Select from hundreds of rules from our library or even design your own

Choose those charts or claims having the highest probability for a coding, compliance, quality or billing discrepancy

Use retrospectively or concurrently with the billing process

Access data and develop reports without burdening IT

CLAIMSauditor.com® uncovers:

Lost revenue

Under and overpayments due to coding and/or documentation

RAC audit targets

Medical necessity targets

CERT, MIC, MAC, PSC and OIG targets

MCC/CC capture rates

Unbilled services (lost charges)

Underbilled services

Quality issues

I10 coding and documentation issues

For more information, call us at 866-926-5933 or register for a free on-demand demonstration at panaceainc.com.

CLAIMS
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PANACEA®
A Career Step Company

We help healthcare organizations improve their bottom line and strategic market position with front line expertise in revenue cycle management, smart software and enterprise-level educational solutions.