

# 3M HIS

Enterprise software and services suite for healthcare providers and payers, specializing in clinical documentation, medical coding, revenue cycle management, and value-based care analytics.

<https://www.3m.com>

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## Overview

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3M Health Information Systems (HIS) is a comprehensive suite of enterprise software and services designed to help healthcare organizations—including providers, payers, and government agencies—improve clinical documentation, coding accuracy, and financial performance. The division was established in 1983 following the acquisition of Code 3, and its solutions have since evolved to incorporate sophisticated technologies like Natural Language Processing (NLP) and Artificial Intelligence (AI) for tasks such as Computer-Assisted Coding (CAC) and Clinical Documentation Improvement (CDI).

The core value proposition of 3M HIS is to streamline health information management (HIM) workflows, create compliantly coded records, and provide actionable analytics to support the transition from fee-for-service to value-based care models. Key products within the suite, such as the 3M™ 360 Encompass™ System, integrate clinical and financial data into a single platform to break down communication barriers between coding, CDI, physician, and quality teams.

### Key Capabilities & Features:

**Computer-Assisted Coding (CAC) & Coding Automation:** Leveraging AI and NLP to auto-suggest medical codes and improve coder productivity and accuracy.

**Clinical Documentation Improvement (CDI):** Automating documentation improvement for physicians to ensure complete, accurate, and compliant records.

**Revenue Cycle Management (RCM):** Tools like 3M™ Ambulatory Revenue Management Software (ARMS) and Audit Expert Software to manage audits, submit cleaner claims, and optimize the revenue cycle.

**Value-Based Care & Population Health Analytics:** Solutions for risk stratification, outcomes measurement, and population health analytics to prepare providers and payers for value-based payment models.

**Grouping and Classification:** Includes industry-leading grouping tools like APR DRG and APCfinder for accurate reimbursement.

Target users include Health Information Management (HIM) professionals, medical coders, CDI specialists, revenue cycle teams, clinicians, and executive leadership at medium to large healthcare systems and payer organizations.

## Key Features

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- Computer-Assisted Coding (CAC)
- Clinical Documentation Improvement (CDI)
- Revenue Cycle Management (RCM)
- Population Health Analytics & Risk Stratification
- ICD-10, DRG, and APC Grouping Tools
- Compliance Monitoring and Quality Reporting
- Health Record Management

## Pricing

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**Model:** enterprise

Pricing is custom and based on the specific suite of products licensed and the organizational requirements. Standard client support services are typically included in the annual software license fee.

**Target Company Size:** medium, enterprise

## Integrations

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EMR/EHR Integration, HL7

## Compliance & Certifications

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HIPAA, HITECH, 42 CFR Part 2