



iCode Assurance

An AI-enabled SaaS solution for medical coding audit and compliance, optimizing revenue cycle management for hospitals and providers.

<https://gebbs.com>

Overview

iCode Assurance™ by GeBBS is a comprehensive, customizable Software-as-a-Service (SaaS) platform designed to optimize and accelerate the medical code auditing process for healthcare organizations. It supports both concurrent and retrospective coding audits across all points of care, including inpatient, outpatient, professional, performance measures, and HCC (Hierarchical Condition Category) coding.

The platform is built upon industry best practices, adhering to the Office of Inspector General (OIG) audit methodology and AHIMA's best practices standards, ensuring accurate and compliant coding for both facility and professional fee records.

Key Features and Capabilities

Autonomous Coding Audits: Utilizes AI to conduct a dual-level coding and review process, minimizing human intervention, enhancing productivity, and improving quality while reducing denials.

Denial Prediction: Foresees potential claim rejections before submission, alleviating the need for rework and enhancing cash flow.

Customizable Workflow: Offers configurable workflows tailored to meet unique organizational needs and can be utilized by internal teams, GeBBS' team, or a combined team.

Comprehensive Reporting & Analytics: Provides interactive audit management dashboards, detailed scorecards, and robust reporting for real-time executive-level insights on detailed accuracy, error trending, revenue variance, and RVU impact.

Compliance Program Management: A comprehensive solution that captures audit findings, generates scoreboards, and provides performance reports to manage compliance.

Claims Data Aggregation: Collects data from disparate sources, including spreadsheets, charts, providers, and healthcare management systems, into a single repository for auditing.

Target Users and Use Cases

iCode Assurance is an enterprise solution primarily targeting hospitals, large health systems, and providers (e.g., Johns Hopkins Health System, Memorial Sloan Kettering Cancer Center).

Primary Use Cases:

Medical Coding Audit: Streamlining both concurrent and retrospective audits for facility and professional fees.

Compliance Risk Mitigation: Identifying and rectifying coding discrepancies to ensure adherence to OIG and AHIMA standards.

Revenue Cycle Management (RCM) Optimization: Improving overall coding quality, increasing clean claim ratios, and capturing missed revenue opportunities.

Coder and Provider Education: Providing access to audited and scored records for training, education, and process improvements.

Key Features

- Autonomous Coding Audits (AI-enabled)
- Real-time Denial Prediction
- Customizable Audit Workflow
- Comprehensive Reporting and Analytics
- Compliance Program Management
- Claims Data Aggregation
- Benchmarking Capabilities
- Support for Inpatient, Outpatient, Professional, and HCC Coding

Pricing

Model: enterprise

Pricing is not publicly disclosed and is based on an enterprise model, requiring direct consultation with the GeBBS sales team.

Target Company Size: medium, enterprise

Integrations

EHR Systems, Coding Platforms, iCode Workflow (GeBBS)

Compliance & Certifications

HIPAA, SOC 2 Type 2, ISO 27001, ISO 9001, OIG Audit Methodology Adherence, AHIMA Best Practices Adherence

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