

Purpose

To support the development of meaningful samples for billing compliance monitoring through structured analysis of data housed within IDX

Standardized Compliance Monitoring Reports

- Department Service Summary Report
- Provider Service Summary Report
- Rejection Report
- EM Bell Curve Analysis
- Other Reports as Requested



Procedure for Accessing Reports

- Authorized department compliance representative (or an authorized designee, i.e. monitor) requests one or all of the Standardized Compliance Reports.
- 2. Reports can requested by fax (626)457-5811or email argomani@usc.edu
- Report will be emailed within 5 business days and forwarded to the requestor.

Department Service Summary Report

This is a download of the standard IDX Service Analysis report for the entire group. The summary report lists the following data elements:

- Division
- □ Billing Area
- ☐ Site of Service/Location
- CPT Code
- Modifier
- □ Sum of Charge amount
- □ Sum of CPT count

Department Service Summary Report

DIVISION	BILLING AREA	SITE OF SERVICE	СРТ	MOD	Data	FYTD Total
USC CARE	ETC	IP-NORRIS HOSP	31600	NO MODIFIER	COUNT	1
					FYTD CHARGE	\$1,000.00
		IP-USCUH	31600	GC	COUNT	1
					FYTD CHARGE	\$1,000.00
				NO MODIFIER	COUNT	2
					FYTD CHARGE	\$2,000.00
			99221	NO MODIFIER	COUNT	6
					FYTD CHARGE	\$1,200.00
			99231	NO MODIFIER	COUNT	3
					FYTD CHARGE	\$ 225.00
		USC HCC II	99214	NO MODIFIER	COUNT	1
					FYTD CHARGE	\$ 100.00
			99221	NO MODIFIER	COUNT	1
					FYTD CHARGE	\$ 200.00
			•			
Total COUNT						15
SUM CHARGE						\$5,725.00

Provider Service Summary Report

This report is a download of the standard IDX Service Analysis report by provider. The summary includes the following data elements:

- □ Provider Name
- □ CPT Code
- CPT Description
- Modifier
- Sum of Charge amount
- □ Sum of CPT Count

Provider Service Summary Report

PROVIDER	СРТ	DESCRIPTION	MODIFIER	Data	Total
DOCTORS NAME	11422	EXCISE BENIGN LESION, 1.1 T	GC	COUNT	1
				FYTD CHARGE	\$ 250.00
	99024	POSTOPERATIVE FOLLOW-UP CAR	UNKNOWN MODIFIER	COUNT	9
				FYTD CHARGE	\$ -
	99070	SUPPLIES AND MATERIAL	UNKNOWN MODIFIER	COUNT	9
				FYTD CHARGE	\$ 835.00
	99212	OUTPT ESTAB BRIEF	25	COUNT	1
				FYTD CHARGE	\$ 55.00
			57	COUNT	1
				FYTD CHARGE	\$ 55.00
			UNKNOWN MODIFIER	COUNT	53
				FYTD CHARGE	\$ 2,825.00
	99245	OUTPT COMPLEX CONSULTATION	UNKNOWN MODIFIER	COUNT	1
				FYTD CHARGE	\$ 400.00
Total COUNT					75
Sum CHARGE					\$ 4,420.00

Rejection Report

This is a DBMS report of specific rejections codes posted (line item).

- □ Rejection Description
- □ Rejection Code
- CPT Description

REJECTION REPORT

Count of INVOICE				
REJECTION	REJ CODE	SERVICE	Total	
DIAGNOSIS NOT COVERED	47	COLLECTION, HANDLING OF SPECIMEN	2	
		ELECTROCARDIOGRAM,(TRACING ONLY	1	
		ROUTINE VENIPUNCTURE FOR COLLEC	2	
	47 Total		5	
DIAGNOSIS NOT COVERED Total			5	
DX/PROC INCONSISTENT	11	WRIST SPLINT, NONFITTED	1	
11 Total			1	
DX/PROC INCONSISTENT Total				
PROV NOT ELIGIBLE TO REFER/PRES	52	COLLECTION, HANDLING OF SPECIMEN	1	
		TYPHOID VACCINE, VI CAPSULAR PO	1	
	52 Total		2	
PROV NOT ELIGIBLE TO REFER/PRES Total			2	
SERVICE NOT COVERED/AGE UNDER 3	M37	CORONAL,SAGITAL,MULTIPLANAR 3-D	1	
	M37 Total		1	
SERVICE NOT COVERED/AGE UNDER 3 Total				
Grand Total				

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E & M Bell Curve

This is a download of the standard IDX Service Analysis report. It includes a worksheet that counts E&M CPT Codes within specific categories.

- Hospital Detail
- ☐ Hospital Summary
- ☐ Hospital Chart
- Office Detail
- □ Office Summary
- □ Office Chart

E & M Bell Curve

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Total

Count of CPT		
SUB CATEGORY 1	CPT	Total
CONFIRMATORY CONSULT	99273	8
ESTAB PATIENT	99211	3
	99212	10
	99213	41
	99214	34
	99215	3
NEW PATIENT	99201	1
	99202	5
	99203	17
	99204	21
	99205	1
OFFICE CONSULT	99241	1
	99242	2
	99243	19
	99244	3
	99245	1
Grand Total	170	



