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## 2025 Cath Lab Revenue Optimization Cheat Sheet

### Quick Reference Guide by EHIP

#### HIGH-PRIORITY MONITORING AREAS

##### Regulatory Changes to Track

- CMS OPPS Updates - New APC groupings and payment rates
- Physician Fee Schedule - RVU changes for cardiovascular procedures
- Coverage Determinations - New or modified coverage criteria
- Quality Reporting - Updated MIPS and hospital quality measures

##### Emerging Technology Areas





- Drug-Coated Devices - Balloons, stents, scaffolds
- Structural Heart Procedures - TAVR, mitral interventions, LAA closure
- Advanced Imaging - OCT, IVUS, FFR integration
- Electrophysiology - Leadless devices, ablation technologies

#### IMMEDIATE REVENUE OPPORTUNITIES

##### Documentation Quick Wins

Area	Revenue Impact	Action Required
Medical Necessity	+\$1,200-3,400/case	Enhance symptom
Device Documentation	+\$800-2,100/case	Complete serial numbers,
Modifier Usage	+\$500-1,800/case	Verify LD, LC, LM, RI modifiers
Multi-vessel Coding	+\$1,500-3,200/case	Document separate vessel

##### Charge Capture Fixes

-  Pharmacy Charges - Contrast, medications, heparin
-  Device Charges - Stents, balloons, catheters, wires
-  Supply Charges - Sheaths, closure devices, dressings
-  Ancillary Charges - Lab, ECG, echo services

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### CRITICAL DOCUMENTATION CHECKLIST

#### Pre-Procedure Requirements

- ☐ Clear clinical indication and symptoms
- ☐ Failed medical therapy documentation
- ☐ Risk assessment and informed consent
- ☐ Alternative treatment consideration

#### Intra-Procedure Essentials

- ☐ Step-by-step procedural narrative
- ☐ Device specifications with serial numbers
- ☐ Vessel territories clearly identified
- ☐ Complications and immediate management
- ☐ Imaging findings and measurements

#### Post-Procedure Must-Haves

- ☐ Immediate procedural outcome
- ☐ Final angiographic result
- ☐ Discharge status and planning
- ☐ Follow-up care instructions

### HIGH-RISK AUDIT AREAS

#### From RAC Experience - Top Audit Targets

##### 1. Medical Necessity (45% of audit focus)

- Symptom severity correlation
- Conservative therapy failure
- Imaging-clinical correlation

##### 2. Multi-Vessel Procedures (31% of audit focus)

- Separate vessel documentation
- Appropriate modifier usage
- Distinct procedural approach

##### 3. Device Documentation (24% of audit focus)

- Complete device identification
- Medical necessity for specific devices
- Proper sizing documentation

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### DENIAL PREVENTION STRATEGIES

#### Top 5 Denial Reasons & Solutions

Denial Reason	Prevention Strategy
Medical Necessity (38%)	Enhanced symptom documentation
Bundling Issues (29%)	Proper modifier application
Incomplete Documentation (18%)	Real-time template completion
Coding Accuracy (10%)	Regular coding audits
Timely Filing (5%)	Workflow optimization

#### Pre-Submission Review






-  Medical necessity clearly documented
-  All modifiers properly applied
-  Device charges captured completely
-  Documentation supports all coded procedures

### PERFORMANCE BENCHMARKS

#### Industry Standards (Target Performance)

- First-Pass Payment Rate: >92%
- Denial Rate: <8%
- Days in A/R: <35 days
- Charge Capture Rate: >95%
- Appeal Success Rate: >75%

#### Red Flag Indicators

-  Denial rate >12%
-  Days in A/R >45
-  Appeal success <60%
-  Charge capture <90%
-  RAC audit frequency >industry average

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### MONTHLY ACTION ITEMS

#### Week 1: Review & Assess

- ☐ Analyze previous month's denials
- ☐ Review coding accuracy metrics
- ☐ Check regulatory updates
- ☐ Assess staff feedback

#### Week 2: Education & Training

- ☐ Conduct coding education session
- ☐ Review documentation templates
- ☐ Update procedure-specific guidelines
- ☐ Share industry best practices

#### Week 3: Process Improvement

- ☐ Implement identified improvements
- ☐ Update workflows as needed
- ☐ Enhance technology utilization
- ☐ Refine quality assurance processes

#### Week 4: Monitoring & Planning

- ☐ Measure performance metrics
- ☐ Plan next month's focus areas
- ☐ Schedule staff meetings
- ☐ Prepare management reports

### 💡 QUICK REVENUE FIXES

#### 30-Day Improvements

- Template Updates - Add missing documentation elements
- Staff Training - Focus on highest-impact areas
- Charge Capture Review - Identify and fix missed charges
- Denial Analysis - Address top 3 denial reasons

#### 90-Day Strategic Wins

- Process Standardization - Consistent workflows across staff
- Technology Optimization - Leverage EHR capabilities
- Audit Program - Regular internal quality reviews
- Benchmark Comparison - Measure against industry standards