Charging specific questions:

1. What system is used for cath lab log? Are supplies loaded into this system?
2. Are the CPT codes tied to the charge code (static coding) or does HIM code the procedures (dynamic coding)?
3. What does your reconciliation process look like?
4. Are there research studies currently happening?
5. Are there any procedures you currently struggle with charging (Aveir leadless pacemakers for example)?
6. How often do you get charging edits that need to be resolved?
7. How do you decide which supplies get billed with each specific code?

Physician Specific questions:

1. How many cardiovascular physicians generally work in the department?
2. How many are EP physicians vs cardiovascular?
3. Do they do peripheral interventional cases?
4. Are there any physicians you have issues with for timing of completing documentation?
5. Is there a process for escalation if documentation isn’t completed timely?
6. Is there a physician champion for the CV doctors?
7. Do the physicians generally document the conscious sedation times in their reports?
8. What is the generalized split between cath lab vs EP studies? (60/40, 70/30, etc)

Personnel Specific questions:

1. What is your background in the cardiovascular space?
2. Do you have a coding certification?
3. If not certified, what experience do you have with coding for cardiovascular lab?
4. What do you typically do for education on new procedures?
5. Who is your backup when you are on vacation or generally out?
6. Do you use ZHealth (Dr. Z) to answer coding questions?
7. Has there been a dedicated audit on cardiovascular coding in the past 3 years?

Other:

1. Do you have all the charge codes needed to accurately code procedures that are being performed?
2. Do you have all the resources needed to do your position well?
3. What support would you like to have from Revenue Integrity?