

Billing Audit Project Update

with financial support
from the
Strategic Initiatives Fund
(thank you!)

June 17, 2026



Our Why?

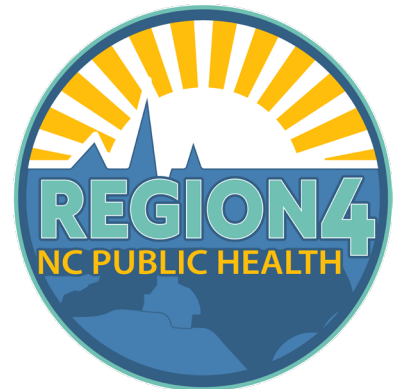
- To determine if Region IV is maximizing billing opportunities to earn revenue to support public health programs
- Identify training and workforce development needs

Our Who?

- 100% of Region IV counties participated (11)
- Medical, Dental, & Behavioral Health Services included

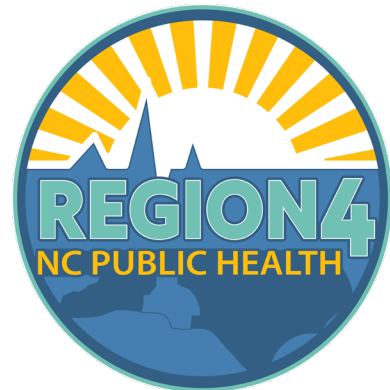
Our How?

- Contracted with GeBBS Healthcare Solutions for audit



The Process

- GeBBS established an MOU with each county to access electronic medical records
 - Many EMRs used; did not have to be a specific one
- 20 records per provider was randomly selected and audited
- Each county received an individualized report with findings BY PROVIDER
- We received a comprehensive Region IV report



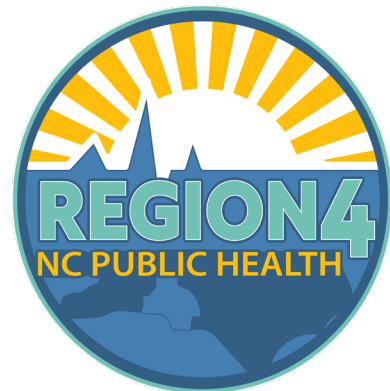
The Findings

- **The Good News**

- Most services were documented correctly.
- The audit found opportunities to improve accuracy and increase revenue.

- **Why It Matters**

- Better documentation helps make sure local public health is paid correctly for services provided.



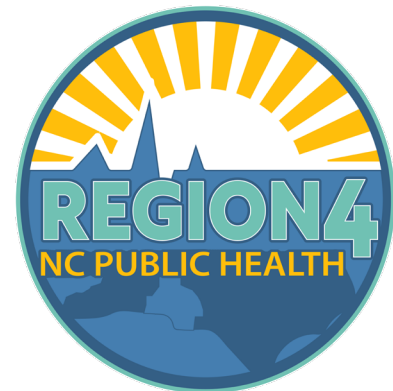
Medical Services

- **Main Findings**

- Some visits were not coded at the correct level.
- Documentation was sometimes missing important details.
- Diagnosis codes were not always specific enough.

- **What We Should Do**

- Provide training for providers.
- Review documentation standards.
- Improve coding accuracy.



Medical Services – Region IV

Professional

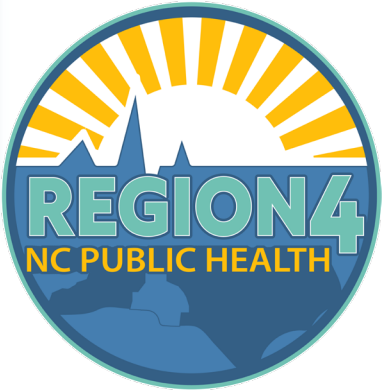
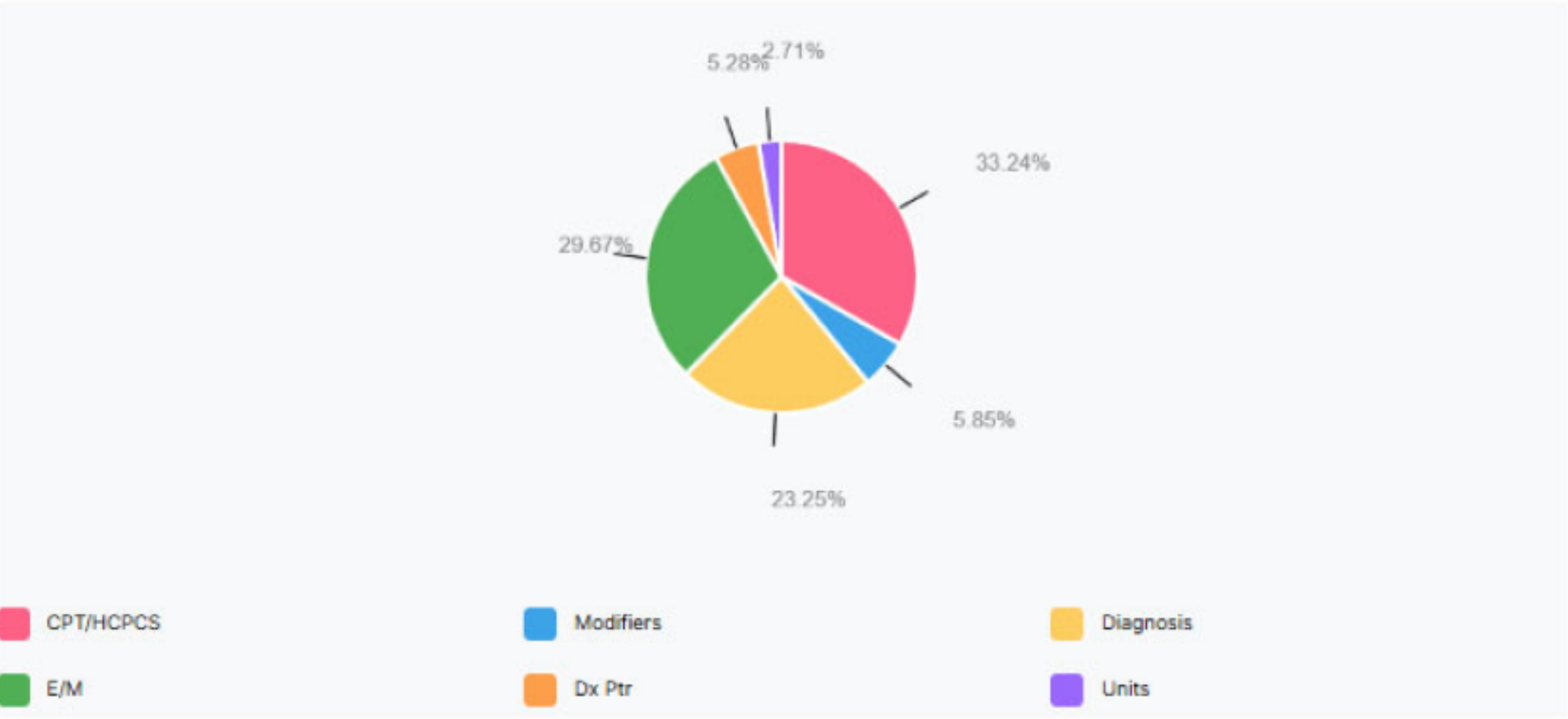
Region IV

	Sample Size	Overall Score	Revenue variance \$	Revenue variance %
	1345	92.15	10997.309999999998	8.96007481374171
Total	1345	92.15	10997.309999999998	8.96007481374171

Professional	Codes			Point Based Scoring		Accuracy
	Total	Correct	Error	Possible Score	Final Score	
Overall	8235	7572	663	8217	7572	92.15
Diagnosis Code	3516	3353	163	3516	3353	95.36
Total (DX)	3516	3353	163	3516	3353	95.36
CPT/HCPCS	2930	2698	232	2930	2698	92.08
E/M Code	955	753	202	955	753	78.85
Total (PX)	3885	3451	434	3885	3451	88.83
Modifiers	834	768	66	816	768	94.12
Total (OC)	834	768	66	816		0
* Chart Level Finding	1345	1345	0	1345	1345	100

Revenue Impact Summary Medical Providers

	Original \$	Audited \$	Variance \$	Variance %
Revenue	122736.81	111739.45	10997.36	8.96
Work RVU	1624.76	1465.55	159.21	9.8
Total RVU	3714.3	3383.23	331.07	8.91



Top Medical Findings

Professional Error Count 696

Code	Reason	Count	Percentage Of Total
P202	Documentation does not support billed service; service disallowed.	184	26.4
S502	Missed diagnosis (added by reviewer)	113	16.2

Code	Reason	Count	Percentage Of Total
P101	E/M service overcoded one level	73	10.5
P103	E/M service minimum requirements not met	60	8.6
P204	Missed CPT (added by reviewer)	51	7.3
P104	E/M service undercoded one level	33	4.7
S500	Diagnosis category correct; incorrect specificity	29	4.2
S303	Missed pricing modifier	24	3.4
S400	Incorrect units/quantity billed	19	2.7
P9091	Dx Linkage incorrect - removed code(s)	16	2.3
P110	Wrong category; Preventive care vs. Office visit	15	2.2
S301	Missed informational modifier	12	1.7
P9092	Dx Linkage incorrect - re-sequenced code(s)	12	1.7
P115	E/M service disallowed	10	1.4



Recommendations for Medical Providers

Provide Education to providers

Global group education

Evaluation and Management leveling of service guidelines

Procedure documentation

Time Guidelines

Diagnosis Specificity

Largest impact on revenue

CPT 33.2%

EM 29.67%

Diagnosis 23.52%

Accuracy	Accuracy By			
	Dx	E&M	Procedures	Other
95.37	100	80	92.86	
85.23	100	100	64.86	
100	100	100	100	
92.73	87.5	100	100	
99.44	100	50	100	
100	100		100	
99.16	100	92.31	100	100
67.71	98.46	5.56	2.27	
100	100	100	100	
100	100		100	



Next Steps



Finish county 1:1 meetings to provide results (GeBBS & local public health staff)



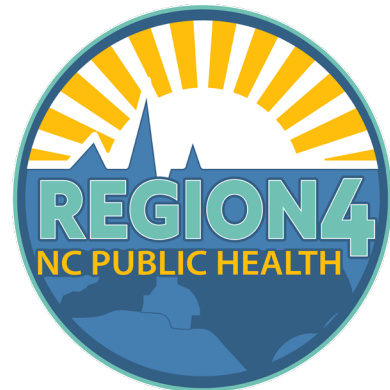
Schedule training to address top identified needs/misses



Implement internal audit process



Consider 6-month follow up audit to compare with this baseline



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