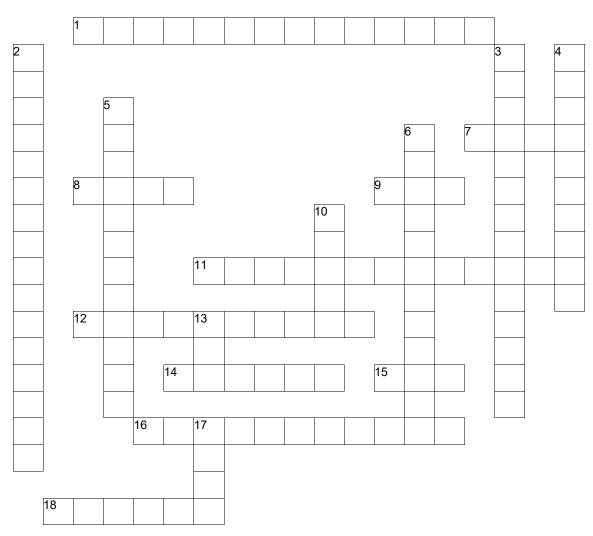


Revenue Integrity Crossword



Across

- 1. Modifier 97 is added to document _____ services.
- 7. Acronym for the credential that shows knowledge of revenue integrity core competencies.
- **8.** MS-DRG codes 485-489 relate to procedures on which part of the body?
- **9.** Detects and corrects past improper payments so that CMS and Carriers, FIs, and MACs can implement actions that will prevent future improper payments.
- **11.** In 2020, CPT® codes 99473 and 99474 were added to report self-measured _____ monitoring.
- **12.** ____ services include office visits, psychotherapy, and consultations provided using an interactive two-way communications system such as real-time audio or video.
- 14. If a hospital seeks to dispute a denial, what is the next step?
- 15. NCCI edits are MUEs, add-on code edits, and ____
- **16.** The ICD-10-CM code U07.1 is assigned for patients suffering from acute ____ disease.
- **18.** One of the five core values of NAHRI, defined as a "straightforward approach to work and interactions with others."

Down

- 2. Primary causes of _____ denials include lack of documentation necessary to support the length of stay, service provided, level of care, and reason for readmission.
- 3. The code U0004 identifies tests that would otherwise be identified by U0002 but are performed using _____ technology
- **4.** CPT® codes 86328 and 86769 are used to report when patients receive blood tests that can detect _____ for COVID-19.
- **5.** The _____ In Coverage Proposed Rule require insurers to provide personalized price estimates and publish negotiated innetwork rates and historical payment information.
- **6.** Comprehensive list of a hospital's products, procedures, and services.
- **10.** Keep track of updates in the chargemaster through an ____ trail.
- 13. As part of the 2021 IPPS Proposed Rule, CMS is proposing to create two new MS-DRGs 521 and 522. These relate to procedures performed on which part of the body?
- **17.** Term used to describe a temporary or interim denial that could be paid if the provider takes the necessary follow-up action.