



ARROWHEAD REGIONAL MEDICAL CENTER Revenue Cycle Policies and Procedures

Policy No. 203.00 Issue 1
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SECTION: REVENUE CYCLE
SUBSECTION: REVENUE INTEGRITY
SUBJECT: CHARGE RECONCILIATION

APPROVED BY: _____
Revenue Integrity Manager

POLICY

- I. It is Arrowhead Regional Medical Center's (ARMC) policy to ensure timely and accurate charge capture and resolution of pending charges as it relates to the financial health of ARMC. Each Cost Center (Department) will designate staff that is responsible to complete revenue reconciliation daily to ensure all revenue is captured in a timely manner, expected revenue is accurately identified, and revenue volumes are tracked at a detailed level.

PURPOSE

- I. The purpose of this policy is to establish guidelines and procedures to ensure that all charges for services provided to patients are accurate, complete, and compliant with applicable regulations. This policy aims to maintain the integrity of the revenue cycle, minimize discrepancies, and optimize reimbursement.

PROCEDURES

- I. **Reconciliation Process:**
 - A. All relevant staff must undergo ongoing training provided by Revenue Integrity semi-annually, on charge capture and charge reconciliation using various reports and work-queues in the Electronic Health record (EHR) system.
 - B. Department Management will ensure a detailed record of patients receiving services is maintained (i.e. department schedule/census report).
 - C. Departments will reconcile charges daily using department appropriate reports and work queues in the EHR system to validate accurate and timely charging.
 - D. Department Management/Designated Staff will reconcile charges daily and will monitor Hospital Billing Posted Charges Summary report, Revenue Guardian report, Charge Router Review, and Hospital Billing Charge Review work-queues (outpatient) daily.
 - E. Individuals responsible for charge reconciliation will review clinical documentation for the encounter to verify accurate charging.
 - F. If an encounter has inaccurate charges, missing charges, or incorrect charges, then the Department Manager will determine the root cause, plan of action and follow-up with appropriate charge entry staff/department/interface representative.

ROLES AND RESPONSIBILITIES

- I. **Revenue Integrity Team:** Ensures accurate charge capture and reconciliation procedures. Reviews discrepancies and makes all necessary adjustments. Responsible for semi-annual charge reconciliation training for all Hospital Billing cost center designated staff.
- II. **Billing Department:** Responsible for submitting accurate claims based on verified charges. Works with the Revenue Integrity team to resolve discrepancies.
- III. **Providers and Clinical Staff:** Responsible for documenting services accurately to ensure that charges reflect the care provided.

CONCLUSION

The Revenue Integrity Charge Reconciliation Policy ensures the organization captures, records, and bills for all services in compliance with applicable laws and standards. By ensuring that the revenue cycle is properly managed and reconciled, the organization can improve financial performance, reduce errors, and optimize reimbursement.

REFERENCES: **National Association of Healthcare Revenue Integrity (NAHRI)**
Streamline Health Daily Charge Reconciliation: Process, Roles, Reporting and Finding Lost Revenue.

DEFINITIONS: **Charge Capture:** The process of documenting and recording services provided to patients.

Revenue Integrity: The accuracy, completeness, and compliance of charges with billing codes, payer rules, and applicable regulations.

Charge Reconciliation: The process of comparing charges captured to ensure accuracy and consistency.

ATTACHMENTS: N/A

APPROVAL DATE:	<u>01/01/2025</u>	<u>Ashley Lechlitter, Revenue Integrity Manager</u> Department/Service Director, Manager or Supervisor
	<u>04/23/2025</u>	<u>Patient Safety and Quality Committee</u> Applicable Administrator, Hospital or Medical Committee
	<u>4/14/2025</u>	<u>Arvind Oswal, Chief Financial Officer</u> Chief Financial Officer
	<u>4/15/2025</u>	<u>Andrew Goldfrach, Chief Executive Officer</u> Chief Executive Officer
	<u>6/05/2025</u>	<u>Quality Management Committee</u> Applicable Administrator, Hospital or Medical Committee
	<u>10/21/2025</u>	<u>Board of Supervisors</u> Approved by the Governing Body

REPLACES: N/A

EFFECTIVE: 1/1/2025

REVISED: N/A

REVIEWED: N/A