OLLEYAHEALTH

HIGH-TOUCH RCM. DATA-DRIVEN PERFORMANCE.

CODING | CHARGE CAPTURE | PROFESSIONAL CLAIMS | DENIALS | A/R | PAYMENT SUPPORT | REPORTING

Coding Support

Specialty-focused coding support for physician groups, multispecialty and specialty practices, and hospital-employed physician organizations.

Precision coding. Cleaner claims. Stronger revenue.
Accurate code assignment, documentation review, and quality oversight to support clean claims and optimal reimbursement.

Our Approach

We combine expertise, process, and technology to support accurate coding that drives clean claims and stronger revenue.

Professional Coding

Specialty and multispecialty coding with precise CPT, ICD-10, and modifier assignment to support clean claims.

Documentation Review

Documentation-to-code alignment, query opportunity identification, and cleaner charge-ready encounters.

Quality Review

Accuracy checks, root-cause feedback, and compliance-focused review to ensure coding integrity and consistency.

The OlleyaHealth Coding Support Model

01 **Intake & Prioritization**

02 **Code & Review**

03 **Clarify & Resolve Questions**

04 **QA & Release**

ACCURACY • COMPLIANCE • EFFICIENCY • CLEANER CLAIMS

Coding Performance Results

98%
Coding Accuracy

24–48 HR
Coding Turnaround

99%
Completed Within Agreed TAT

65%
Reduction in Coding-Related Denials

30–40% estimated cost savings vs. U.S.-based and in-house delivery models*

Start Where the Opportunity is Greatest

Focused assessment • Workflow review • Backlog project • Pilot • Defined coding support scope

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