

# ALPHA II

## Easy Coder

Clinical Coding Perfection.



### Go digital with Easy Coder, your complete coding system!

The popular, industry-changing diagnosis code publication known as **Easy Coder** has transformed into a robust coding and compliance, web-based application. **Easy Coder** builds efficiency and accuracy into the medical coding process every day to deliver coding results that are both complete and correct.

### Why Easy Coder?

For nearly three decades, coders, auditors, consultants, and clinical personnel have used **Easy Coder** to support:

- **Denial prevention** – coding is right the first time
- **Audit defensibility** – accurate levels of service based on documentation
- **Reliable content** – current and dependable information for billing decisions
- **Efficient practice workflow** – inserted into a practice at any point from scheduling, exam, charge entry, and check out to back-end editing and auditing

**Easy Coder** was created with both the coder and clinician in mind; formatted and designed for fast, accurate and efficient coding, editing, and auditing processes.

**Easy Coder** is developed and updated by a broad team of healthcare experts—including coders, billers, nurses, physicians, and compliance and reimbursement consultants. This team takes great pride in making sure the content for **Easy Coder's** edits are constantly up to date while the combination of content and functionality make it the most comprehensive coding platform for healthcare professionals.

Search for and find diagnosis and procedure codes with ease. Apply them to common edits such as medical necessity and CCI as well as numerous edits you won't find in any other coding software. Billing information such as fee schedules, RVUs, and global periods are at your fingertips for each CPT® code.

Additionally, E&M codes are calculated using the same criteria auditors utilize. **Easy Coder** is the only coding solution available that will alert you to over coding or under coding of E&M codes based on the acuity and severity of the ICD-10 codes applied to the visit.

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**Coding is at the heart of reimbursement, so doing it right sets the tone for your revenue. Easy Coder brings ingenuity to the process with coding functionality that simplifies your workflow.**



**Encounter Editing** – Includes the industry’s most comprehensive medical necessity library, content database, and rules engine for accurate encounter editing



**Code Search** – Leverages an easy and intuitive code search design for ICD-10-CM, as well as CPT and HCPCS, allowing users to look up codes based on official condition description, common name, clinical acronym, or site

**E&M**

**E&M Generator** – Calculates E&M codes based on elements for the history and exam components as well as intelligence for the often-subjective medical decision-making component



**Policy Viewer** – Provides links to NCD and LCD coverage policies to substantiate medical necessity edits



**CPT Notes** – Contains CPT notes as support for billing and coding decisions such as RVU values, fee information, modifier indicators, and more

“For almost 15 years, our medical billing service has been daily users of Alpha II’s Easy Coder. It has proved to be an invaluable tool, providing my staff with quick access to current, comprehensive and reliable coding resources. The E&M generator, policy viewer, supporting diagnoses lists, and access to the Medicare fee schedules by locality have developed our staff’s knowledge and confidence as we strive to serve our clients as a trusted resource.”

**Jordan May**  
Executive Director, HuTech Resources, LLC

## Peace of Mind in Data Security

Alpha II’s help desk provides thorough customer support for **Easy Coder**—from orientation and training through ongoing technical and application assistance. And because **Easy Coder** is web based, all updates to content, rules, and features are instantaneous—with no need to install software.



Alpha II and its facilities have been accredited by the Electronic Healthcare Network Accreditation Commission (EHNAC), a federally-recognized, standards development organization and accrediting body designed to improve transactional quality, operational efficiency, and data security in healthcare.

**Make the right move toward accurate coding,  
billing and reimbursement with Alpha II.**

**ALPHA II**  
**REimagine REimbursement**

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