



Health Language®

Revenue Cycle Solutions

Need to Manage All Your Reference Data in One Place?

In addition to providing data and services, the Language Engine® provides the tools necessary to integrate all reference standards into your enterprise data warehouse or 3rd-party applications—allowing you to view, manage, export, and standardize all reference data on a single platform.

Health Language offers a variety of revenue cycle data files and services to meet your coding, compliance, and analytics needs—whether it's to power your enterprise data warehouse, enable your EMR with the appropriate codes for billing, or properly license your claims processing system.

Benefits

- **Always Up to Date.** Keep all of your data files current with Health Language's Content Update Streaming Portal. We coordinate with the world's leading standards bodies to provide you with the most current codes to support your billing, coding, and analytics initiatives.
- **Stay Compliant.** Health Language is a licensed distributor for CPT®, CDT®, UB-04®, and many other standardized code sets—single-sourcing all your data while making it easier to stay compliant with the leading standards bodies.
- **Leverage Our Clinical Expertise.** Our staff of AHIMA-approved ICD-10 trainers and certified coders, medical professionals, PhDs, and medical informaticists review and publish all of our updates and are available if custom services are needed to support your projects.

Revenue Cycle Data Offerings

Product	Description	Update Frequency
CORE CODING DATA		
ICD-10-CM & PCS	ICD-10-CM and PCS code set includes descriptions, code history, validity dates, major diagnostic categories, and clinical categories. Optional items include HL proprietary ICD-10-CM clinical and coding attributes and provider-friendly terms.	Annual with interim updates
ICD-9-CM	ICD-9-CM code set includes descriptions, validity dates, code history, major diagnostic categories, and clinical categories. Optional items include HL provider-friendly terms.	Historical versions only
CPT with RVUs	Current Procedure Terminology (CPT) published by the American Medical Association. CPT code set includes procedure codes, descriptions, code history, validity dates, categories, and Medicare Physician Fee schedule. Optional items include AMA's consumer friendly descriptions.	Annual with quarterly updates
HCPCS with RVUs	Healthcare Common Procedure Coding System (HCPCS) published by CMS. HCPCS code sets include procedure codes, descriptions, code history, and validity dates.	Annual with quarterly updates
CDT with RVUs	Current Dental Terminology (CDT) published by the American Dental Association. CDT code sets include dental procedure codes, descriptions, code history, and validity dates.	Annual with quarterly updates
UB-04	Complete UB-04 code set and data specifications published by the American Hospital Association. Includes codes for revenue, types of bill, condition, value, admission source, patient status, and more.	Annual with interim updates
DRG ICD-10-CM	MS-DRG code groups containing ICD-10-CM diagnoses codes. Published by CMS.	Annual
DRG ICD-9-CM	MS-DRG code groups containing ICD-9-CM diagnoses codes. Published by CMS.	Historical versions only

CLAIMS DATA CROSSWALKS		
Revenue Code Crosswalk to CPT and HCPCS	Revenue Code Crosswalk is designed to assist in charge master setup and to ensure accuracy for billing and claims processing activities. This content set consists of maps between revenue codes to CPT and HCPCS codes that are appropriate for the type of bill.	Annual
ICD-10 Reporting Maps	ICD-10 Reporting Maps are designed to provide a 1:1 relationship between ICD-9-CM and ICD-10-CM diagnosis codes and ICD-9-CM procedures to ICD-10-PCS used for longitudinal reporting. Designed by Health Language and comprising four maps: ICD-9-CM to ICD-10-CM, ICD-10-CM to ICD-9-CM, ICD-9-CM to ICD-10-PCS and ICD-10-PCS to ICD-9-CM.	Annual
SmartGEMs	SmartGEMs is an enhanced crosswalk between ICD-9 and ICD-10 based on the General Equivalency Maps (GEMs) published by CMS. Designed by Health Language, SmartGEMs comprises four maps that utilize clinical and coding attributes to provide comprehensive coverage for translating ICD-9 to ICD-10 and from ICD-10 to ICD-9.	Annual
GEMs	General Equivalency Maps comprises four distinct maps: ICD-9-CM Diagnoses to ICD-10-CM Diagnoses, ICD-9-CM Procedures to ICD-10-CM Procedures, ICD-10-CM Diagnoses to ICD-9-CM Diagnoses, and ICD-10-PCS Procedures to ICD-9-CM Procedures, created by CMS.	Annual
ICD-10-PCS to CPT Map	The ICD-10-PCS to CPT Map is designed for analyzing outpatient CPT procedures and seeing their inpatient hospital counterparts. This data file maps every non-specific CPT code to a set of possible ICD-10-PCS targets. Designed by Health Language.	Annual
ICD-10-PCS to HCPCS Map	The ICD-10-PCS to HCPCS map is designed for analyzing HCPCS procedures and seeing their inpatient hospital counterparts. This data file maps every non-specific HCPCS code to a set of possible ICD-10-PCS targets. Designed by Health Language.	Annual
ICD-9-CM to CPT Map	The ICD-9-CM to CPT map is for analyzing outpatient CPT procedures and seeing their historical inpatient hospital counterparts. This data file maps every non-specific CPT code to a set of possible ICD-9-CM procedure targets.	Historical versions only
FEE-RELATED DATA		
Clinical Lab Fee Schedule	The Clinical Laboratory Fee Schedule provides payment for about 1,300 clinical diagnostic laboratory tests in accordance with Section 1833(h) of the Social Security Act.	Annual
Anesthesia Conversion Factors	Anesthesia Conversion Factors by payment locality and published by CMS. These factors are used in calculating fees associated with anesthesia-related services.	Annual
Anesthesia Base CPT Units	Base units associated with CPT procedures and used in calculating the fees associated with anesthesia-related services. Based on Medicare's anesthesia fee schedule.	As required
DMEPOS Fee Schedule	Durable Medical Equipment, Prosthetics/Orthotics & Supplies (DMEPOS) fee schedule published by CMS.	Annual
CMS Zip Codes	Crosswalk between US zip codes and CMS carriers/Medicare Administrative contractors and localities.	Quarterly
Ambulance Fee Schedule	The ambulance fees for each HCPCS code by state locality and carrier.	Annual
HCC	Hierarchical Conditional Categories (HCC) with maps to ICD-10-CM and ICD-9-CM codes from CMS.	Annual
HIPPS	Health Insurance Prospective Payment System.	As required

Medical Informatics Tailored for Analytics and Beyond

Not sure how to utilize your reference data or don't see a product that you're interested in? Our team of medical informaticists and clinical experts curate over 150 data files including SNOMED CT®, RxNorm, LOINC®, and a variety of Health Language-authored crosswalks and value sets to drive your data warehousing, analytics, and population health initiatives.

LOINC® is a registered trademark of Regenstrief Institute, Inc.

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