

Revenue Cycle Audit Program

Step-by-Step Process Flow

1. Planning & Preparation

1. Define the objectives and scope of the audit.
2. Identify key stakeholders and responsible personnel.
3. Gather relevant policies, procedures, and process documentation.
4. Develop the audit work plan and timeline.

2. Process Understanding & Risk Assessment

1. Map the end-to-end revenue cycle process (e.g., patient access, charge capture, billing, collections).
2. Conduct interviews with process owners and staff.
3. Identify potential risks and control points within the cycle.
4. Select critical areas for detailed review.

3. Data Collection & Sampling

1. Determine data sources and required documentation (e.g., billing records, EHR, payment receipts).
2. Extract sample transactions for analysis.
3. Verify completeness and accuracy of data sets.

4. Detailed Testing & Analysis

1. Trace samples through each stage of the revenue cycle (registration, charge capture, coding, billing, etc.).
2. Test key internal controls for design and operating effectiveness.
3. Identify and document exceptions, errors, or control weaknesses.
4. Assess compliance with regulatory requirements and internal policies.

5. Reporting & Follow-Up

1. Synthesize audit findings and draft the audit report.
2. Present results to management and key stakeholders.
3. Develop recommendations for remediation or process improvement.
4. Agree on action plans and responsibility for corrective actions.
5. Schedule follow-up to verify implementation of recommendations.

Important Notes:

- This document should be customized based on organizational structure and specific risk factors.
- It is essential to maintain objectivity and independence throughout the audit process.
- Documentation of audit procedures and findings is critical for accountability and future reference.
- Regular updates to the audit program are recommended to address evolving regulations and revenue cycle practices.