Code Analysis Report

Last modified on 11/06/2026 12:42 pm EST

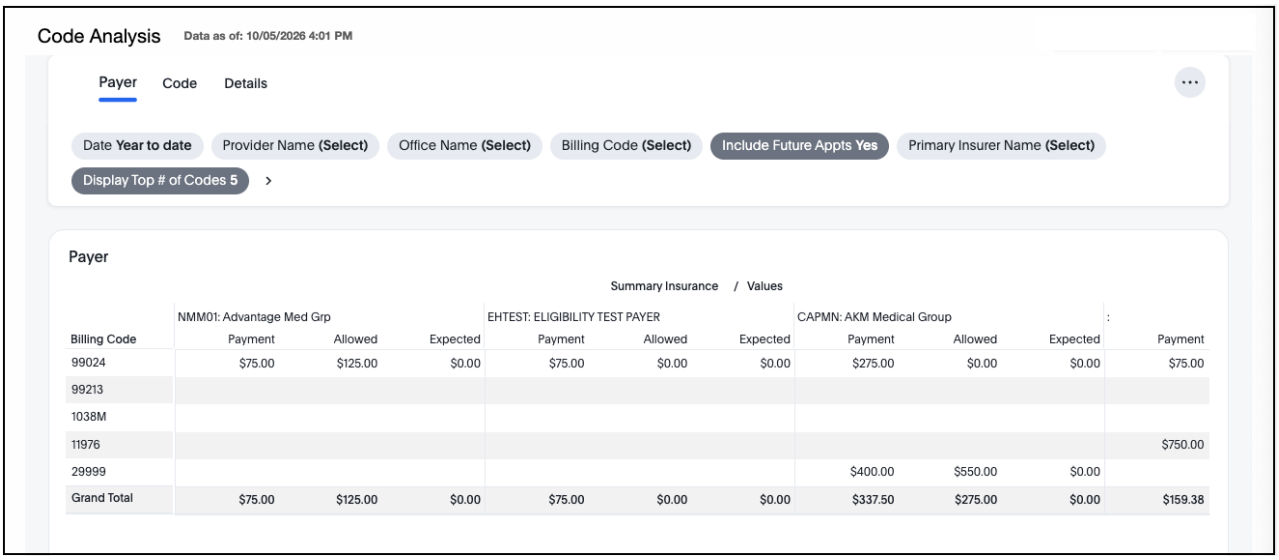
The Code Analysis Report provides a clear overview of the top CPT, HCPCS, and Custom Codes billed by your organization. This functionality allows you to compare reimbursements from a payer against your contractual agreement to ensure accurate payment.

By default, the report displays the top five codes, but it can be adjusted to show any number of codes as needed.

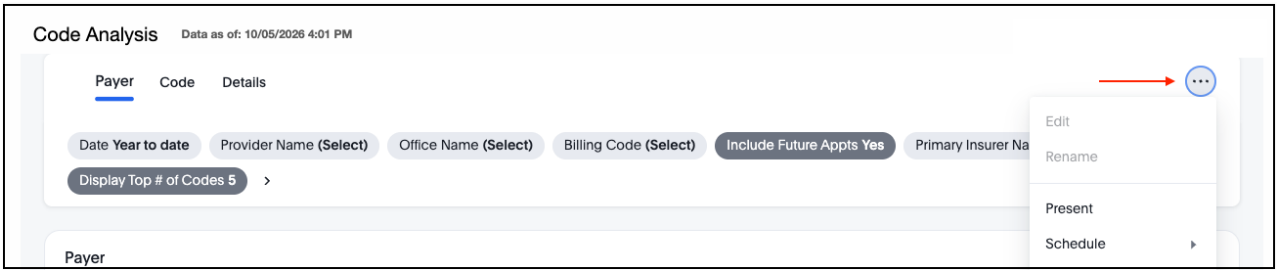
Payer | Save View |Code | Details | Video Walkthrough

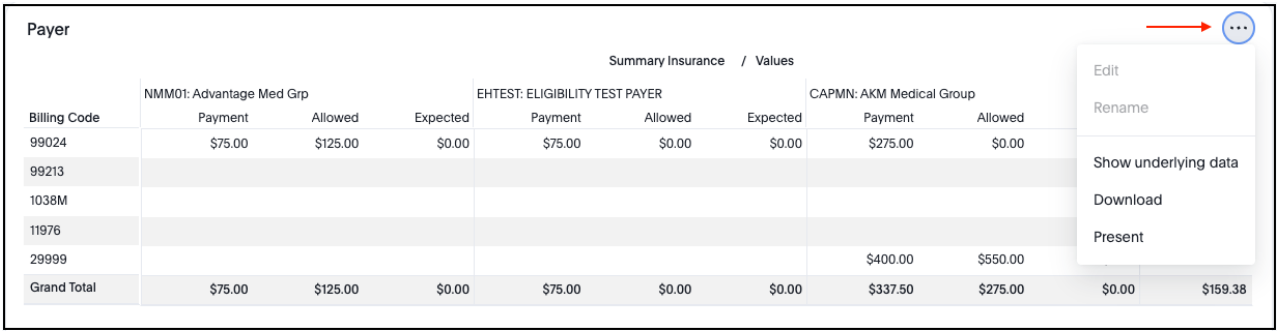
Payer tab

The Payer tab displays, by payer, the total payment, the amount allowed, and total expected reimbursement (if entered in the fee schedule) for each CPT, HCPCS, or Custom Code billed.



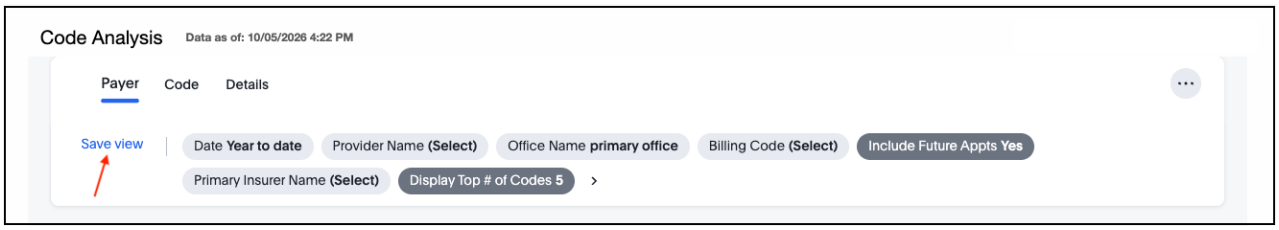
Pressing the three horizontal dots in the top right corner of each tile will expose options to schedule the report to run at a preset cadence, view the underlying data, download the report, or view in presentation mode.



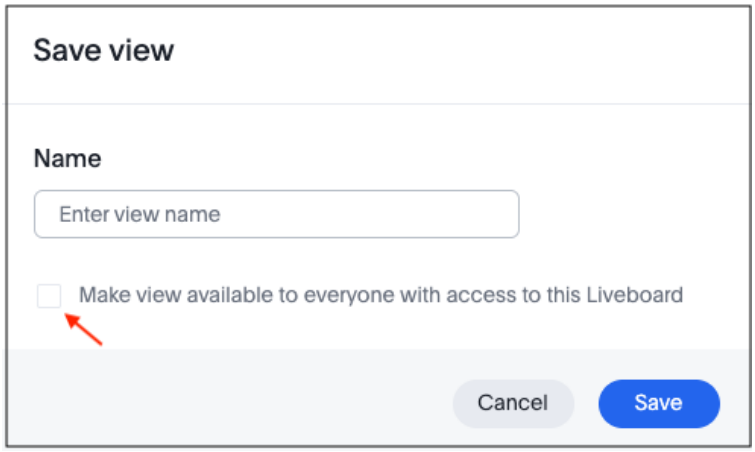


Save View

To save the filters set, press **Save View** on the left side of the screen.



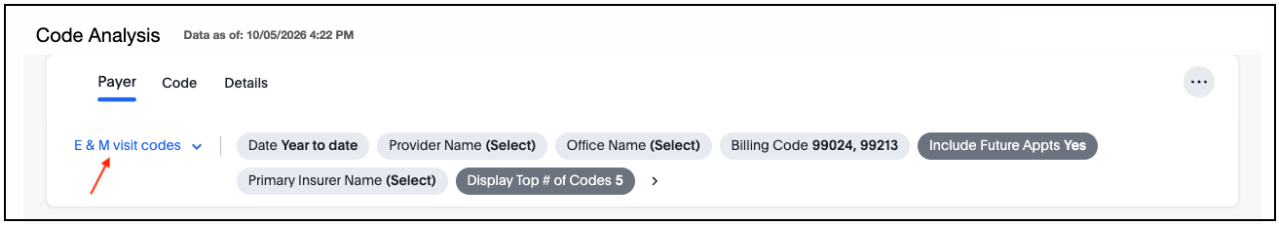
Enter a name for the view when prompted. To share the view with colleagues, check the box next to **Make view available to everyone with access to this Liveboard**.



Saved views preserve all filter selections, including date type and grouping. They do not save a specific date range.

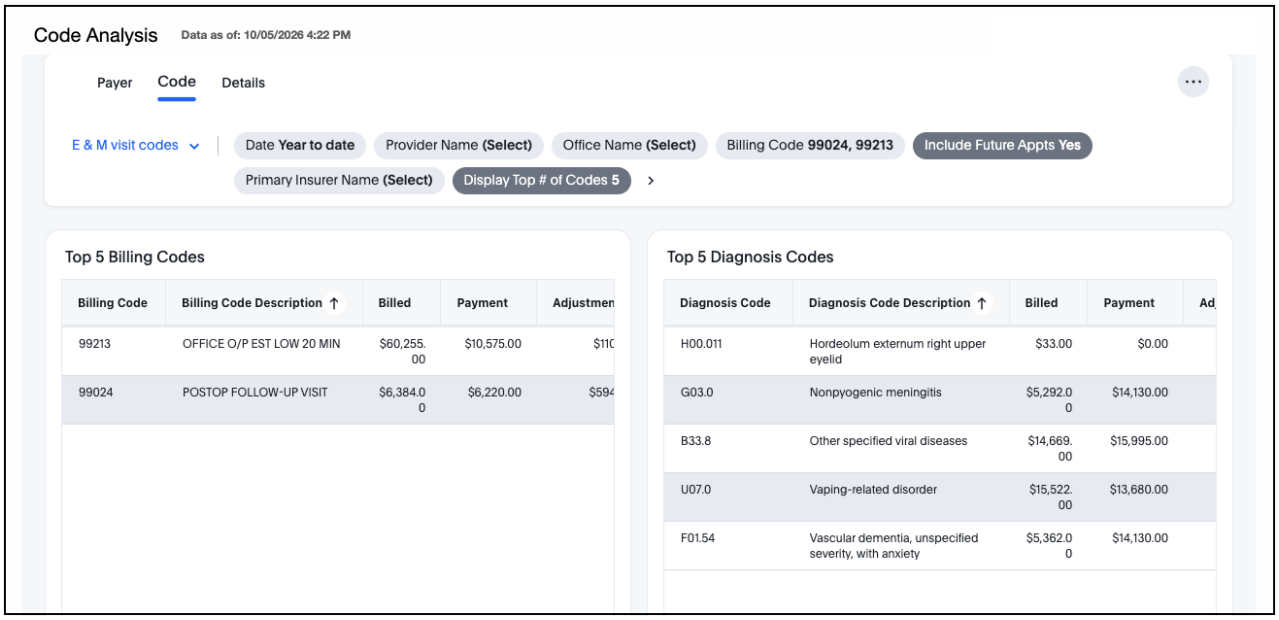
To rerun the report, select it from the left side of the screen. If it doesn't show, press the down arrow to view

additional saved views.

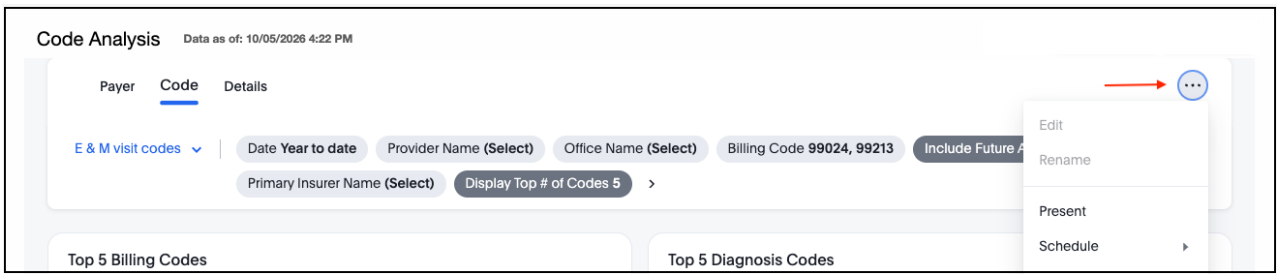


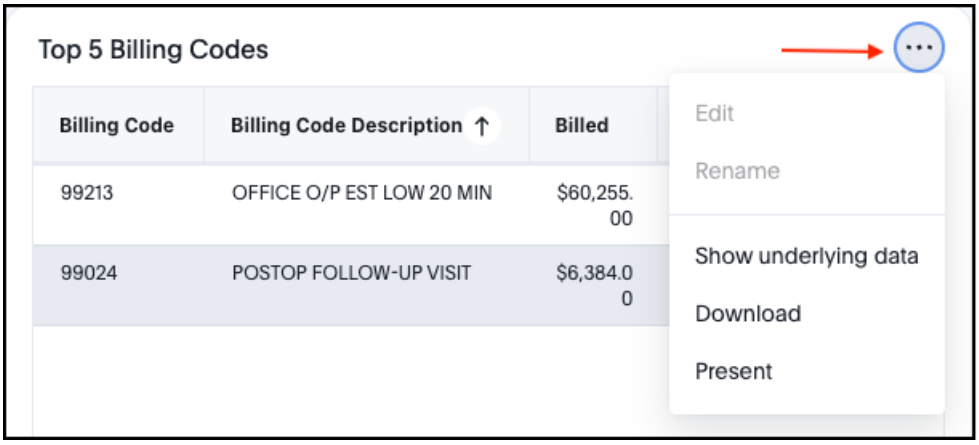
Code tab

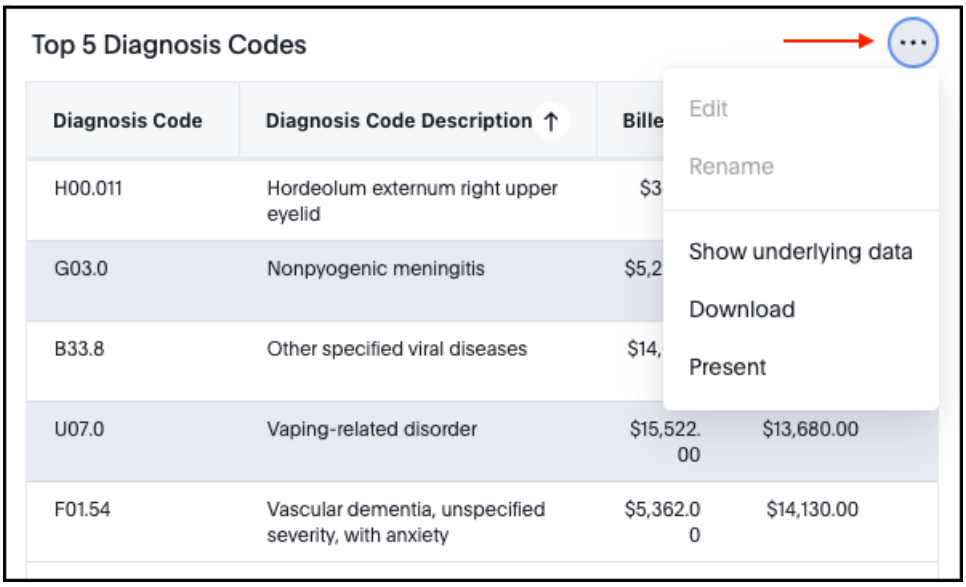
The Code tab displays the total amount billed, total payments received, and total expected adjustments for your top CPT, HCPCS, Custom Codes, and ICD-10 codes billed. By default, the report shows the top five codes, but this number can be adjusted to display more or fewer codes as needed.



Pressing the three horizontal dots in the top right corner of each tile will expose options to schedule the report to run at a preset cadence, view the underlying data, download the report, or view in presentation mode.

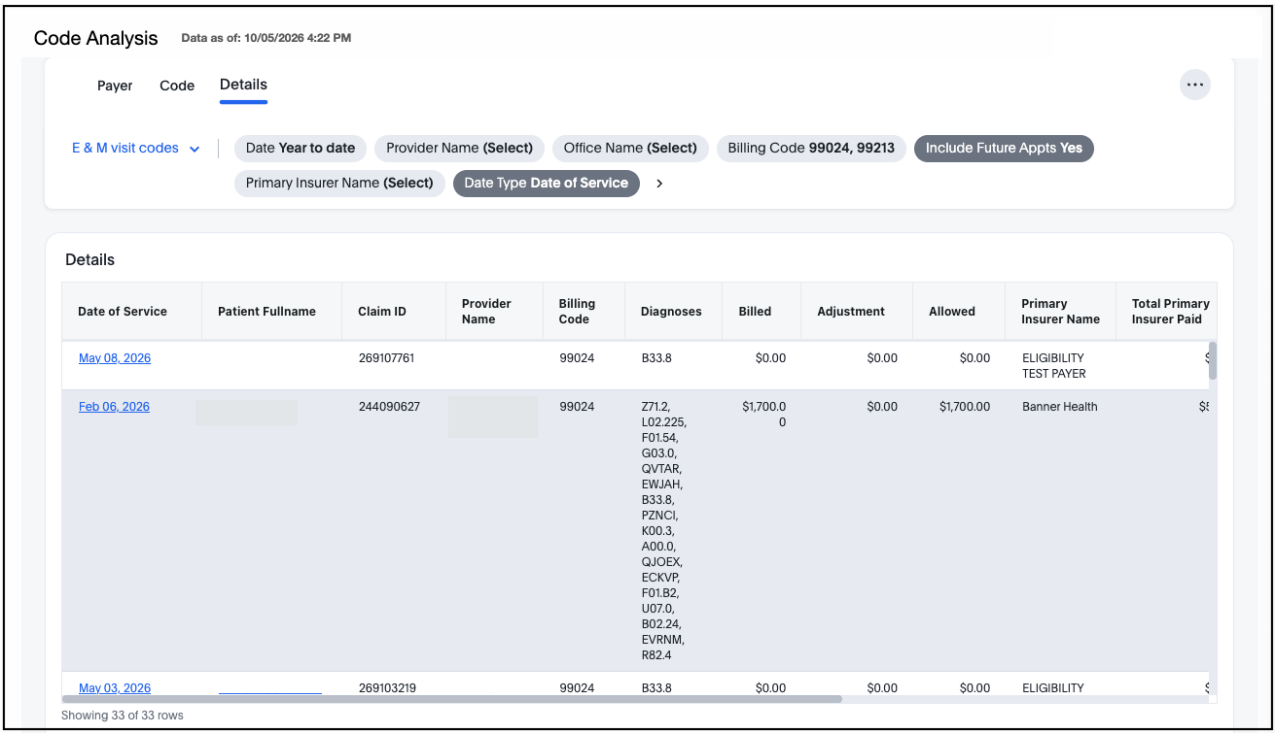




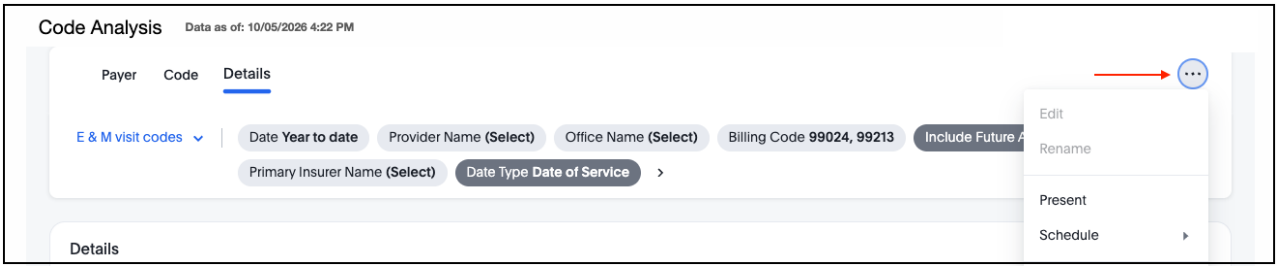


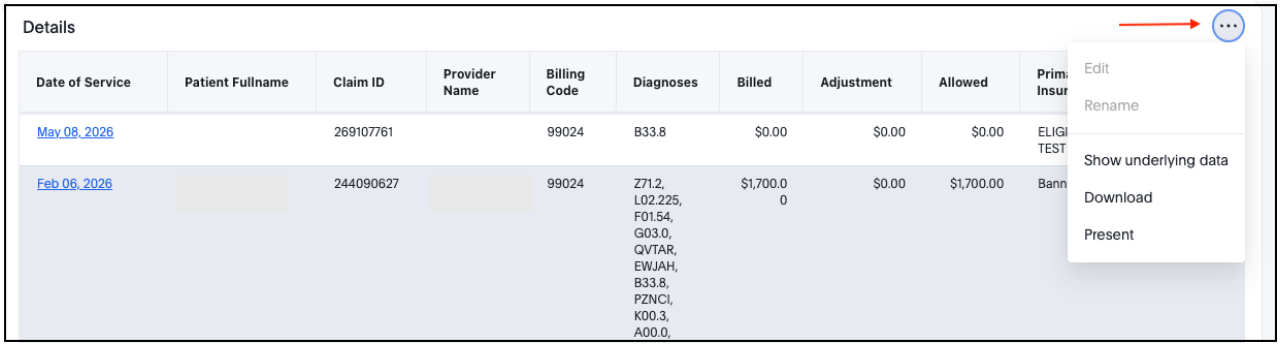
Details tab

The Details tab provides a comprehensive view of all appointment and patient information that corresponds to the selected report parameters. This tab offers a detailed breakdown, enabling deeper analysis of the underlying data. It serves as a valuable tool for reviewing specific claims and coding details to support informed decision-making.



Pressing the three horizontal dots in the top right corner of each tile will expose options to schedule the report to run at a preset cadence, view the underlying data, download the report, or view in presentation mode.





Video Walkthrough