

Revenue Integrity: The Basics of Charge Capture, Coding and Compliance in the OP Facility Setting

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Agenda

- Charges
- Chargemaster
- Coding Accurately
- Evaluation and Management (E/M) Codes
- Procedure codes
- Wonderful world of Modifiers
- Edits – CCI and others
- Business Office Functions
- Compliance programs and how they affect us
- Audits
- Resources

Charges

- How are these applied?
 - If these are maintained by the individual departments – need to ensure that they are updated
- Pricing – who does this?
 - Decision Support?
 - Accounting?
 - There needs to be a formula and algorithm set up to calculate charges

Charges cont.....

- Does anyone verify the charges that are applied to a bill?
- Do you often get complaints from patients about their bills and their charges?



Chargemaster (CDM)

- What is the Chargemaster?
- Who updates the chargemaster?
 - Does the chargemaster coordinator meet yearly with the different departments?
 - Do you have a CDM committee that reviews all of the new charges that a department requests to ensure the charges are compliant?

Coding Accurately

- Who does the coding?
 - What are the certifications and education level of the coders?
 - Hard coding vs. soft coding of CPT codes
- What documentation is reviewed during the process?
- Who appends the modifiers?
 - Is this a “backend function” that is done by the business office?

E/M Coding

- What formula or algorithm is there to apply the charges?
- What is figured in to said formula – what resources are allocated in to the E/M?
- Who selects the levels and are they trained?

E/M Coding Concerns

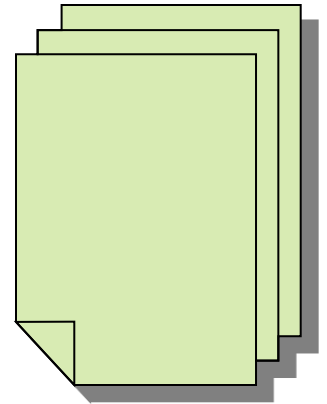
- For the departments and the ER who applies these?
- Is the documentation reviewed prior to the assignment of the E/M code with a procedure?
 - Do the providers do their own coding or is there a coder?

Procedures

- Who is performing the surgery/procedure?
- Did the charges get billed?
- Does the documentation support the procedure being performed?

Modifiers

- Who appends them?
- Hard coded?
- Is documentation reviewed to validate for these prior to these being applied?



Modifier 25

- Modifier 25 - Significant, Separately Identifiable evaluation and management service by the same physician on the same day of the procedure or other service
- <http://www.healthleadersmedia.com/content/HOM-216147/QA-Follow-CMS-coding-guidelines-when-using-modifier-25.html##>

Modifier 25

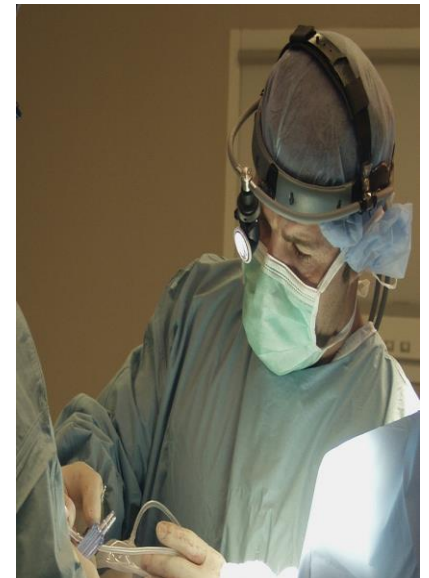
- Important concept is that the service is above and beyond the usual preoperative and postoperative care that would be included in the procedure
- Ask yourself is this part of the procedure or above and beyond?

Modifier 51

- Multiple procedures provided on same day by same physician
- Added on to the additional procedures that a provider performs that day
- Don't reduce billed amount as insurance company will reduce it down upon payment

Modifiers 52, 73 and 74

- 52 - Reduced Services
- 73 – Discontinued OP proc prior to anesthesia being administered
- 74 - Discontinued OP proc after anesthesia was administered



Modifier 59

- MODIFIER OF LAST RESORT!!!!
- Use this only if the documentation has been reviewed and this is appropriate
- Don't use "Just to get paid"
- If another modifier is more applicable, use it instead
- On the OIG Work Plan

Modifier 91

- Repeat clinical diagnostic laboratory test
- Need to be applied if the patient has several labs done that day with same CPT code
- Could be Hemoglobin and Hematocrit if patient is getting blood
- Not to be used if repeat due to results that didn't come out properly (machine failure)

Edits – NCCI/CCI and Others

- What type of edits do you receive?
- Are they front end edits or back end edits?
- Are they from the claim scrubber?
- Who handles these edits?
- Are they run through the CCI edit scrubber?
- Who handles the denials?

NCCI Edit Resources

- Must update quarterly
- Mutually Exclusive and Column 1 and 2 were combined in 2012
- <http://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/index.html?redirect=/nationalcorrectcodinited/>

Business Office Functions

- Are they handling edits and denials effectively?
- Are they providing feedback about denials?
- Are they applying modifiers?



Compliance Programs

- How do they affect us?
- Who is our Compliance Officer?
- What do we do if we have a Compliance concern?
- What can we do to ensure we are being compliant?

Hazards of EHR and CAC's

- Electronic health records (EHR's) and computer assisted coding (CAC's)
- Who has these in your facility?
- What type of oversight do you have?
- Any human involvement or simply a decision by a machine?

Internal Audits

- Are you doing any internal audits?
- External audits?
- What is being done with the results of the audits?
 - Education
 - Changes in behavior of staff
 - Policy and Procedures updated or created

Internal Audit Process

- What documents are being reviewed when audit is performed?
 - Medical Record Documentation or just super bill/check sheet, etc.
 - Final billing is retrospective review
 - Proposed bill if prospective review

What to Audit

- E/M visits – what does your bell curve look like?
 - Do you have all high level visits?
 - Do all procedures have E/M billed as well?
- Surgery – Does someone audit the supplies and charges that pass to the claim?



Audit Recovery Programs

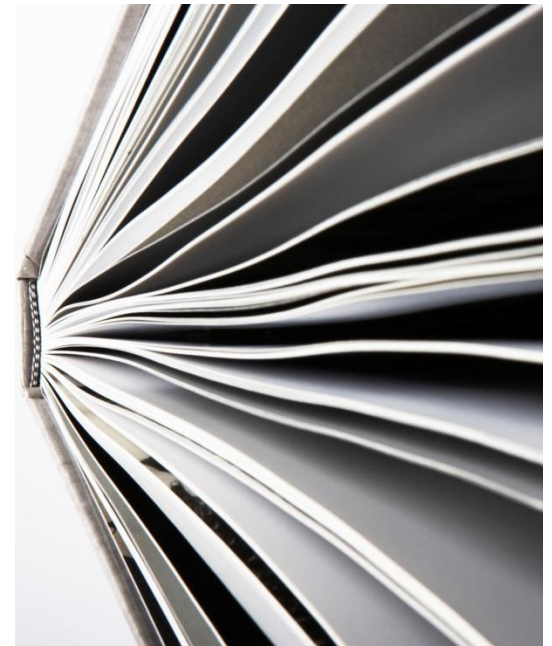
- Who are they?
- What are they?
- What are their functions?
- How do they impact us?

Auditing Bodies

- Recovery Audit Contractors (RAC's)
- Medicare Administrative Contractors (MAC's)
- Medicaid Integrity Contractors (MIC's)
- Private payers – BCBS, Aetna, Workers Comp

Resources

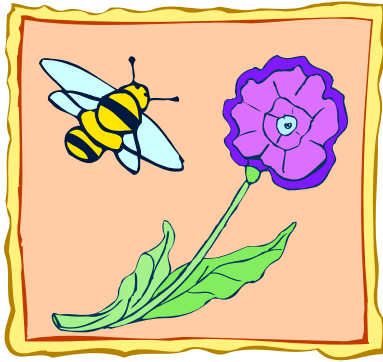
- What version of the books do we have?
- Is our software updated?
- Claim-scrubber up to date?



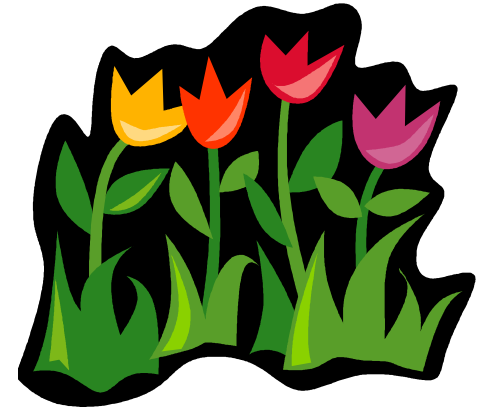
Resources for Hospitals and Departments

- Software like Craneware, MedAssets, Wipfli
- <https://oig.hhs.gov/reports-and-publications/archives/workplan/2013/Work-Plan-2013.pdf>
- <http://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/downloads/modifier59.pdf>

Questions?



Thank You!!!!



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