Auditing Therapy Services

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Auditing - Overview

• Who? 
• Why? 
• What?

Auditing - Overview

• Selection Process 
• Tools 
• Format of Findings 
• Legal Issues
Auditing – Who?

- Credentials
- Background
- Experience

Knowing the auditor’s background or experience can assist in understanding the findings. Does the auditor have more operations or clinical experience? This will determine the depth of the audit.

Auditing – Why?

- Third party carrier
- Physician request
- Administrator request
- Compliance
- Investigate a potential problem

Knowing why the audit was performed helps to understand the methodology of the whole process. If administration requested the audit, did the physician “buy-in” to the concept, would this affect the process? If it is compliance driven, the audit process is different.

Auditing – What?

CPT

- All services ever rendered?
- Just those most frequently rendered?
- Just those that have caused problems in the past?
Auditing – What?

• Diagnosis Codes
  – Specificity
  – Documentation Support
  – Prioritizing
  – LMP
  – NCD
  – DSMIV

Auditing – What?

• Modifiers
• Missing Charges
• Risk Issues
• Correct Date
• Signatures
• Nurse Practitioners/PA’s
  – Just that note or the chart
  looking for coordination of
care and establishment of
a treatment plan
• By knowing the criteria for
the audit, you will know if
there are any outstanding
issues to be addressed.
• The criteria for the audit was
determined by the “why”
question. They may not
have addressed all possible
problem areas.

Auditing - Selection

• Time Period Chosen
  – So far out that it is no
    longer relevant?
  – One day
  – Quarterly
• Targeted group of
  charges? Or…
• Based on Frequency?

Knowing how charts were
chosen adds insight as to
whether or not there are
still other issues to be
addressed.
If frequency is used as the
basis, are all codes within
a subset reviewed or only
those with the highest
frequency?
Auditing – Tools

• Templates
• Cheatsheets
• Documentation Guidelines (for psych encounters)
• All "bean counting?"
• Unbundling guide
• Strictly Medicare Rules?
• Carrier specific review?

If you do not question the tools you may not fully understand the findings. This does not mean that the auditor is incorrect, it means you need to be clear on what resources are appropriate for the task.

Auditing – Tools

• Encounter Forms

• Itemized Statements

• Whole chart or just one record
  – What is the difference
  – What do you get

Auditing – Tools

• The Electronic Record
  – Is there an audit trail?
  – Do the codes in the EHR match those in the billing system…do you care?
  – Does the record reflect anyone and everyone that inputs into the record?
  – Are all supporting documents available?
Auditing - Findings

- Just the facts or
- Education
- Comparison within the practice and within the specialty
- Trends
- Weaknesses
- Detail of what was reviewed

Auditing - Legal

- Discoverable?!?!?
- Ask your lawyer before the process begins

Auditing for Therapies

Behavioral Health
Auditing for Therapies – Behavior Health
+ 90785 – Interactive complexity
What will distinguish this in the documentation?
CPT provides requirements. The patient must fall within one of four requirements

Auditing for Therapies – Behavior Health
90791 vs 90792
Does the diagnostic evaluation involve medical services.
What would an auditor want to see documented to support medical service?
• Amount of history
• Type of exam

Auditing for Therapies – Behavior Health
Psychotherapy
Therapy alone or in addition to an evaluation and management service?
Auditing for Therapies – Behavior
Health

Psychotherapy
Auditor must be comfortable with E/M auditing as well as Psychotherapy documentation
What documentation is required to support that two services took place?
Can time be the controlling factor for all services?

Auditing for Therapies – Behavior
Health

Psychotherapy –
What language constitutes therapy was provided?
How is time calculated?

Auditing for Therapies – Behavior
Health

Psychotherapy for Crisis
What constitutes crisis?
How is ‘life threatening” documented?
Auditing for Therapies – Behavior Health

Family Therapy and Group Therapy
What should be documented to support the coding?
How much detail is required as to the conversation and treatment?

Auditing for Therapies – Physical Therapy

Physical Therapy Evaluation and Re-evaluation
What documentation is required? request? for what? type of therapy?

Auditing for Therapies – Physical Therapy

Modalities - Supervised
Where are the rules that auditors can use to validate the use of “Supervised”
Where are the definitions to support the types of “Supervised” therapy?
Auditing for Therapies – Physical Therapy

Modalities – Constant Attendance
Where are the rules that auditors can use to validate the use of “Constant Attendance”?
Where are the definitions to support the types of “Constant Attendance” therapy?
How do we count time?

Therapeutic Procedures
Where are the rules that auditors can use to validate the use of these codes?
Where are the definitions to support the types of therapy that fall within this category?
How do we count time?

Thank you
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