March 23, 2018

Weekly Auditing and Compliance Tip

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Giving Audit Feedback to Providers

As medical compliance auditors, it's easy for us to get buried in our world of complex details, changing guidelines, and coding jargon, while paying less attention to our ultimate end-goal: Educating providers and improving their documentation.

Click Here to Listen to This Week's Audit Tip

Regardless of your specific role as an auditor, you'll be giving feedback to providers in some form. You may be required to meet with the providers you audit to discuss your findings, or you may have regular conference calls with them. You may only have to do audits and provide feedback in the form of comments or reports.

For all of these post-audit efforts to be effective, you'll need to understand the provider's perspective, and while most providers view us as allies, some can be difficult to work with. In this article we'll discuss how to give good feedback, how to prepare for meetings with providers, and how to interact well with providers who resist education or changes.

Preparing for feedback meetings
Here is a routine that will help you prepare to deliver audit findings to any provider:

1. **Review the results in detail.** Even if you did the audit yourself, you'll want to be able to recall a specific patient encounter and the provider's documentation just by seeing a particular notation in your audit results sheet.
2. **Develop a brief summary of the findings.** Often you'll perform an audit and write a report about those findings. Either way, you'll want a way to summarize the findings. For example, you might notice that most of the overcoding errors are the result of the provider repeatedly not documenting family history. Perhaps the note template doesn't prompt the provider to capture family history. This lets you open the conversation by saying, "I think the problem will be easy to fix, Doctor, it's really just one simple omission in the history." What you don't want to do is to simply start going down a laundry list of errors without giving the provider some general sense of the pattern of mistakes.
3. **Be prepared with educational materials.** One of the most common types of coding audits you'll do are E/M coding reviews. There are a wide range of E/M codes, but they all revolve around the concept of three key components: history, exam, and medical decision making. There are a countless number of audit grids, tools, and other resources for E/M codes, and you doubtless use some during your training as an auditor, if not actively now. These resources are great to pass along to providers. Having printed "cheat sheets" to share with a provider offers an educational prop for reference as well as a tangible aid you can leave behind. If you are talking remotely to a provider, you can email such tools as Word or PDF documents.

Our **Medical Auditing Bootcamp** will train you to become a medial auditor. Learn the principles of auditing, compliance regulations, and how to perform the daily duties of an auditor.

Our next online session, scheduled as a **3 week LIVE ONLINE evening course,** begins on April 10, 2018!

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Our **2- Day E&M Auditing Bootcamp** is an accelerated auditing training specific to E&M auditing. Learn about audit policies, get clarity on documentation guidelines, medical decision making, medical necessity and more. Plus, during this training program you will have the opportunity **earn our NEW CREDENTIAL - Certified Evaluation and Management Auditor (CEMA)!**

Our 2-Day E&M BootCamps are scheduled as follows:

March 20, 21, 22: Online (1pm - 5pm EST)
April 3 & 4: Chicago, IL
May 8 & 9: San Antonio, TX
May 22 & 23: Rochester, NY

4. **Be confident and authoritative.** Many providers find the coding and documentation aspect of healthcare complex, tedious, and divorced from the clinical aspect they spent much of their careers training for that actually constitutes "care" of patients. You will find that nothing makes providers double down on this view faster than an auditor who seems to be uncertain of their own findings or of what the official rules and guidelines are. Therefore, you must be confident when presenting the results. With proper preparation, as discussed above, you will be able to offer that confidence and authority. Remember, while medical school curriculums include courses on coding and discussion of CPT, HCPCS, and ICD-10 coding, providers spend far less time on these topics than we do. After all, these things are part of our core competencies. Don't be intimidated by the fact that the provider has many more years of education and training - here, you are the expert on coding and the provider is the expert on clinical matters.
5. **Know when to change results.** Whether you can actually change audit findings in real-time during a provider meeting will depend on your role, the type of audit, and the type of protocols the client has for making changes. However, you'll often find that audit results do need to change based on a conversation with the provider. For example, they might be able to instantly produce documentation for the administration of a corticosteroid injection that appeared to be missing when you performed the audit - the result of a simple administrative error that isn't the provider's fault. More difficult is a case where some level of subjectivity could apply. For example, a neurologist reports 99205 - the highest level of E/M service when a patient shows "high risk, threat to life, or loss of bodily function" - for a new patient visit. On paper, the

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NAMAS is proud to offer the following webinars in April:

documentation doesn't demonstrate the high risk criteria. However, when you meet with the physician, he argues this was a complex case and outlines a series of reasons why he feels 99205 is appropriate. Should you change the finding? It will come down to how defensible you feel the note would be for 99205 in the hypothetical scenario that a payer auditor is scrutinizing it, with an eye toward calling it an overpayment.

Handling difficult providers

Most providers understand the importance of coding and compliance education in an era of greatly increased regulation, along with ever-rising healthcare costs. But occasionally you will encounter providers who seem barely able to find the time to speak with you, and when they do, they are defensive and argumentative.

Here is your best argument to such providers. You'll want to be patient and not escalate things with the provider, and then express this point: **You are there, whether on the phone or in person, to help them and to ensure they don't get ever get asked to return money or face fraud accusations.**

Try this scripted line: "Doctor, I totally get where you're coming from. This is not so much clinical as it is administrative and sometimes it can come off as seeming trivial. But it really isn't - commercial and federal payers spend a ton of time and money looking for providers with documentation deficiencies. They want to recoup money, of course, and find providers guilty of fraud or abuse, and I don't want you to be their target. That's why I am here today - to show you how they would look at your documentation, and to show you how to make your documentation totally impeccable if that ever happens."

This Week's Audit Tip Written By:

The Legal Opinions on Your Audit Report
(Auditing Webinar Series)
April 3, 2018
2pm EST
Speaker: Rachel Rose, JD

Critical Care Services: What You Need to Know
(What You Need to Know Webinar Series)
April 10, 2018
2pm EST
Speaker: Scott Kraft, CPC, CPMA

Can a Patient Help Document the Encounter?
(Compliance Webinar Series)
April 17, 2018
2pm EST
Speaker, Dr. Warner

Hands On: PT/OT/Chiropractic
(Hands on Webinar Series)
April 24, 2018
2pm EST
Speaker: Dr. Evan Gwilliam

If you are interested in registering for the webinars above, please email us at namas@namas.co.

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Pre-Conference: Sunday, Nov. 11, 2018
Conference: Monday, Nov. 12 - Wednesday, Nov. 14, 2018
Venue: Wyndham Grand Clearwater Clearwater Beach, FL

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1. Secure your spot & lock in your registration rate

Grant Huang, CPC, CPMA

Grant is the Director of Content for our parent organization, DoctorsManagement, LLC.

NAMAS Calendar of Events

Click the image above to view our monthly calendar.

Complimentary Tip of the Week

Our weekly auditing & compliance tip emails are available to anyone who could benefit from this information.
If you know someone who would like to receive these emails, invite them to sign.

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with just a $50 deposit and make payments toward your balance

2. Request an invoice to be supplied to your employer for payment

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Registration Information
NAMAS Member Registration (Through May 31, 2018)
Conference Only: $995
Pre-Conference & Conference: $1295

Non-Member Registration (Through May 31, 2018)
Conference Only: $1195
Pre-Conference & Conference: $1495

Hotel Information: NAMAS has negotiated a discounted room rate at the Wyndham Grand Clearwater for conference attendees at the rate of $189/night plus tax.

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