

And Again, Another Thought on E&M Services

It seems that daily there are continued issues surrounding E&M services and the 20 year old documentation guidelines that are more suggestive in nature rather than firm guidance. This week we were posed with interesting questions around the 1995 DG (Documentation Guideline) exam rules.

For a comprehensive exam the auditor is allowed to give credit if there are 8 (or more) organ systems examined and documented and most all of us are well informed on that point. However, there is an "or" there in the guidelines. The "or" goes on to say *or complete examination of a single organ system.*

In most instances providers rarely use this form of documentation, but there are certainly those who do and as an auditor you must be able to identify these and accurately audit them. As is the case with most issues in DG, there is no guidance on what is considered to be a "complete examination."

Most carriers have adapted the idea that we should refer to that single organ system exam in 1997 DG to score and evaluate that the exam is truly complete in nature. The provider must document EVERY bullet in that single organ system that is listed in 1997 DG in order to support the comprehensive exam. These exams are most commonly seen when auditing dermatology and cardio providers. It's difficult to deny a level of service for the lack of one bullet on an exam, but while as auditors our role includes much abstracting of the documentation- we are also tasked as "bean counters" and if all the beans are not there- then we cannot give the provider the higher level credit.

How often do you see this style of documentation in your audits?

Was this tip a new E&M hidden rule for you?

What other E&M gray areas have you scratching your head?

Email me, and let's address them in our weekly tips in 2016!

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