



NAMAS Weekly Auditing & Compliance Tips

March 25, 2016

Auditing Smoking Cessation Services

Most payers do indeed recognize smoking and tobacco cessation services as a covered health insurance benefit. We have found that some providers perform these services without fully understanding the reimbursement opportunities, while others claim such services without adequately documenting to support them. Medicare, for example, will pay for two (2) "quit attempts" or a total of eight (8) face to face visits per year over a 12 month period. Per CMS, *each attempt may include a maximum of four intermediate or intensive sessions, with the total annual benefit covering up to 8 sessions in a 12 month period.* These services can be covered if rendered by a "qualified doctor or other Medicare-recognized practitioner".

As an auditor, if you discovered that a provider was allowing a registered nurse (RN) for example, to perform smoking

Happy Easter!



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cessation services in lieu of the physician or other qualified professional (i.e. PA or NP), that would represent a significant, reportable compliance concern. A participating provider who accepts assignment on a Medicare claim must accept Medicare payment as payment in full; coinsurance and deductible do not apply.

CPT codes 99406 and 99407 (and CMS issues G-codes G0436 and G0437) should be used to report services provided face to face by a physician or other qualified health care professional, using "*standardized, evidence-based screening instruments and tools with reliable documentation and appropriate sensitivity.*" CMS has created two tracking G-codes to report similar services. Essentially, the only difference between the code sets is that the CMS issued G-codes are specified for the "asymptomatic" patient. The 99406 (or G0436 for Medicare) code should be used to report an intermediate visit of between three and ten minutes, and 99407 (or G0437 for Medicare) should be reported for an intensive visit lasting more than ten minutes. Smoking cessation services (CPT codes 99406-99407) should be reported when performed. The choice of codes depends on the time spent with the patient. Some payers may not require the use of this modifier. An appropriate ICD-10 code (i.e. Z72.0 [*tobacco use disorder*]) should be appended as a 'principle' on the 1500 claim form. Other ICD-10 CM codes may include:

- History of tobacco dependence (Z87.891)
- Nicotine dependence (F17.2-)
- Tobacco dependence (F17.2-)

Benefits

For added convenience, NAMAS accepts PayPal, PayPal Credit, quarterly and monthly payments of membership dues.

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NAMAS 1 Day E/M Auditing Boot Camp



1- Day E/M Auditing Boot Camp

Earn 8 AAPC CEU's and cover topics such as medical decision making, grey areas of auditing policies, medical necessity and more!

Upcoming Classes:

Austin, TX: April 19
Instructor: Shannon DeConda
Please call or email namas@namas.co for registration instructions

Little Rock, AR: April 20
Instructor: Betty Stump

Ft. Lauderdale, FL: May 17
Instructor: Shannon DeConda

- Tobacco use during pregnancy (O99.33-)

The current CMS policy suggests that *"inpatient hospital stays with the principal diagnosis of Tobacco Use Disorder, are not reasonable and necessary for the effective delivery of tobacco cessation counseling services. Therefore, we will not cover tobacco cessation services if tobacco cessation is the primary reason for the patient's hospital stay.*

As auditors, we need to pay very careful attention to the provider's documentation of time. In the absence of time being specifically documented, smoking cessation services are not payable. CMS clearly suggests that counseling lasting less than 3 minutes is considered to be part of an evaluation and management (E/M) service and is not paid separately. If an E&M services is provided on the same day as smoking and tobacco-use cessation counseling, providers should choose the appropriate E&M code and use modifier-25 to demonstrate that the E&M service is a separately identifiable service from the smoking and tobacco-use cessation counseling service.

When reviewing notes for which a provider claims smoking cessation, an auditor must consider the following:

- The amount of time documented specifically engaged in cessation counseling (i.e. 3-10 minutes vs. greater than 10 minutes)
- The frequency of cessation performed (may require looking at previous 12 months of billing history)

Saratoga, NY: June 7

Instructor: John Burns

Albuquerque, NM: June 14

Instructor: Betty Stump

Additional dates and cities scheduled; click the image above for full schedule

Current NAMAS members save \$100 on Boot Camp registration!

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Weekly Tip Sponsor



A Note From PowerBuying

Why Throw Cash in the Trash?



Medical waste disposal is

- That a covered ICD-10 code is reported in the principle position on the 1500 claim form (i.e. Z72.0- current tobacco use), and
- if an E&M service code is reported in addition to smoking cessation services on the same date, they must be individually documented. The level of E&M needs to be supported by the documented levels of history, examination and medical decision making while the smoking cessation service must be consistent with a time statement (minimum of 3 "separately identifiable" minutes) that is distinctly documented in the medical record.

This Week's Auditing & Compliance Tip Provided By:

**John Burns, CPC,
CPC-I, CEMC, CPMA**



John is a Senior Consultant for our parent company, DoctorsManagement, LLC and a NAMAS Instructor

**A Note From Our Parent Organization:
DoctorsManagement, LLC**

Ancillary Services

Ancillary services can help your organization improve patient satisfaction and boost revenue. The challenge is knowing which services to add.

something that every practice needs to remain safe and compliance. Many providers feel trapped by the high cost, long contracts, and monthly service fees and do not realize that there are other companies able to provide this vital service at a lower rate. The PowerBuying team is here to help you explore options that may help save you money.

To start cutting cost on medical waste disposal, contact Craig King today at 800.635.4040 or email cking@drsmgmt.com

Upcoming Webinars

NAMAS is proud to present the following webinars in March



Putting Technical Writing Skills to Work in Your Audit Report

Speakers: Scott Kraft & Grant Huang
Tuesday, April 5
2pm EST

Auditing Mental Health Services

Speaker: John Burns
Tuesday, April 12

Let DoctorsManagement assist. Our team can help you determine if providing these services is a viable solution for your organization.

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A Note From Our Sponsor



The Association for Rural Health Professional Coding provides training, education and additional resources to those who provide care under **Rural Health Clinics (RHCs) and Federally Qualified/Community Health Centers(FQHCs).**

Click here to learn more about ARHPC

NAMAS 8th Annual Auditing & Compliance Conference



2pm EST

E/M Encounter Review

Speaker: Shannon
DeConda Tuesday, April 19
2pm EST

The Ins and Outs of Incident-to Services

Speaker: Sean Weiss
Tuesday, April 26
2pm EST

NAMAS Members: Watch your Email for Registration Links

Non-Members: Email namas@namas.co to learn how to attend these webinars

NAMAS Calendar of Events



Click the image above to view our monthly calendar

Complimentary
Tip of the Week

Our weekly auditing &

Pre-Conference:

Dec 6 2016

Conference:

December 7-9 2016

Location:

Loews Portofino Bay at Universal Orlando



Conference Agenda Now Available! Click Here to View

New for 2016! Attendees can choose between **FOUR Pre-Conference tracks:**

General Auditing, E/M Auditing with Precision Testing, Physician-Based Compliance and Facility-Based Auditing (agenda for facility-based auditing track is coming soon)

Limited Time Offer! Ends 3/31/16

Reserve your spot at conference and receive a 1 year NAMAS Silver membership PLUS complimentary entry to 1 Universal Orlando theme park after 2:00pm on Friday, December 9th (while supplies last).

Reserve your spot at conference with just a \$50 deposit!

Click here to reserve your conference registration

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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