



NAMAS Weekly Auditing & Compliance Tips

April 8, 2016

Amending the Medical Record

A medical record is a legal document and therefore there is a right way to modify a record and certainly a wrong way as well. All modifications and addendums must follow the guidelines whether it is the provider or ancillary staff that are modifying their own entries. Addendums be corrective in nature or may need to address information or findings not available at the time the original documentation was created.

Addendums may be subject to a higher level of scrutiny in evaluation of the use and frequency of addendums by the provider.

Amendments to the medical record are not as relevant since we have moved into the EHR era. When we think of modifications, we used to think of a single line, initial, and dating of the change (which would still be applicable to those who are still handwriting and dictating their documentation). EHR changes should be tracked and notated, and if the EHR does not have the capacity to include such notations and tracking then the addendum should include a heading to properly identify that portion of the entry as a true addendum to the medical record.

Addendums should not be used as a way in which the record is modified in order to support documentation guidelines on a consistent basis. Of course, this also does not mean that should the provider fail to include certain elements from time to time that an addendum would not be acceptable. There are specifics that must be adhered to in order for an addendum to meet CMS rules.

Within the Internet Only Manuals (IOM) of CMS the Program Integrity Manual includes the principles for appropriate record

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NAMAS 1 Day E/M

integrity manual includes the principles for maintaining record keeping. These principles address the creation of addendums and corrections to medical record, and include 3 primary principles. When reviewing these principles it becomes quite clear as to how CMS will validate the use of addendums. The 3 Recordkeeping Principles are:

1. *Clearly and permanently identify any amendment, correction or delayed entry as such, and*
2. *Clearly indicate the date and author of any amendment, correction or delayed entry, and*
3. *Do not delete but instead clearly identify all original content*

These principles are relevant to any type of medical record whether paper or electronic formats.

When modifying a record be sure and properly distinguish amendments as such and then keep the content separated from the original content. Recently when auditing a hand written chart the provider indicated that an addendum had been created, but there was not ability to separate out that information. Here is how it looked:

Overall since initial injury, how much improvement? (0-100%) _____

FH/SH: Are you working? Yes / No Fulltime / Light / Retired / Disabled / No light duty available

Occupation: Graphic Designer Amended 5/30/14

Tob? (Yes) No Y

PHYSICAL EXAMINATION: Exam Level: Problem focused Y Detailed Y Comprehensive Y

Vital Signs: Age: 52 Sex: M / F BP: _____ T: _____ Wt: _____ BMI: _____

Cons: NAD Clear Clear Distress Rested Fatigue Overweight Underweight Obese De-conditioned Physically Fit

Chest: CTAB Resp Rate nl / abnl Cough Wheeze Rales Rhonchi

Cv: HRRR without / with murmur Irreg rhythm Edema BLE present + / -

Abdomen: Soft NT BS present

Neuro: Oriented to T P P Y / N EOMs intact Y / N PERL Y / N DTRs nl / abnl

Motor Intact Y / N Deficits _____ Sensory Intact Y / N Deficits _____

CN 2-12 Intact Y / N Deficits _____

CMS has specifically added to the Recordkeeping Principles additional guidance regarding the EHR amendments. The principles additionally include:

- a. *Distinctly identify and amendment, correction, or delayed entry, and*
- b. *Provide a reliable means to clearly identify the original content, the modified content, and the date and authorship of such modification of the record.*

These principles do not vary much from the standard principles as they still require the distinct separation of the content. It is noteworthy that CMS does not state that "click tracking" is an acceptable distinction. Many EHR vendors/sales reps fall back on the click tracking capabilities for meeting gray areas in their product, but note that it may not be a recognized process with CMS. The note must have separate comments and headings indicating it is the addendum.

Regardless of the type of medical records a practice uses, education should be provided to all staff on these principles, and a policy should be

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Upcoming Classes:

Austin, TX: April 19

Instructor: Shannon DeConda

Please call or email

namas@namas.co for registration instructions

Ft. Lauderdale, FL: May 17

Instructor: Shannon DeConda

Saratoga, NY: June 7

Instructor: John Burns

Albuquerque, NM: June 14

Instructor: Betty Stump

Orlando, FL: June 17

Instructor: Shannon DeConda

should be provided to all staff on these principles and a policy should be adapted specific to the type of record the practice uses, any type of special addendum/modification tools by the EHR system, reasons for which addendums/modifications should be created, and the timeliness of any such amendments.

This Week's Auditing & Compliance Tip Provided By:

Shannon O. DeConda

CPC, CPMA, CPC-I, CMSCS, CEMC

Shannon is the President of NAMAS and a Partner with DoctorsManagement, LLC the parent company of NAMAS



Dallas, TX: June 28
Instructor: Shannon DeConda
Please call or email
namas@namas.co for registration
instructions

Detroit, MI: July 12
Instructor: Shannon DeConda

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

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

AAPOL News



American Academy of Provider Offices and Laboratories (AAPOL) and DoctorsManagement publish a bi-monthly newsletter that can be delivered directly to your door or inbox!

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**A Note From
PowerBuying**



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NAMAS 8th Annual Auditing & Compliance Conference



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 presented by Panacea Healthcare SOLUTIONS (agenda for facility-based auditing track is coming soon)

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contracted amount and/or set you up with additional disposal bins for the same or lower cost!

To start saving, 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



Auditing Mental Health Services

Speaker: John Burns
Tuesday, April 12
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

Universal Orlando theme park to use after 2pm on December 9th.
attend these webinars

Reserve your spot at conference
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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.

Click the image above to be added to our email list!



Visit NAMAS at the AAPC HealthCon in Orlando, Florida

Stop by the NAMAS booth at the AAPC HealthCon 2016! We'll be in booth 103 with NAMAS products and opportunities to enter to win one of the following prizes:

- E/M BootCamp Registration
- Online Medical Auditing BootCamp Registration
- NAMAS 8th Annual Conference Registration
- NAMAS 1 year membership
- And more!

We'll also have a photo wall where you can take a selfie your phone! Upload your selfie to your social media account and tag NAMAS for a chance to win a registration to one of NAMAS' Medical Auditing BootCamp sessions!

We look forward to seeing you there!

NAMAS Calendar of Events



Click the image above to view our monthly calendar

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