



NAMAS Weekly Auditing & Compliance Tips

May 27, 2016

Audit Nation The Documentary

Listen live as Frank Cohen, David Glaser, Ronald Hirsch, Edward Roche, and Stanley Sokolove join Chuck Buck for a special broadcast exposing investigatory audits.

Thursday, June 2

2:00 - 3:30 PM EST

Click here for more information



Audit Nation Video

Documentation Criteria: Medicare Physicals

When billing annual Medicare physicals, it's very important to know the status of the patient, determining when they became eligible, and/or if they've seen another provider for any of these services as the initial visit codes are once in a lifetime codes and will be denied if they have already been billed for that particular patient. This information can be found by researching the patient's benefits on the Medicare website, www.medicare.gov.

Starting from the beginning, the Welcome

free
WEBINAR

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Unsure if a NAMAS membership is right for you? Sample our most recent webinar and see what you're missing. Click the image above to listen to: **E/M Encounter Review** presented by Aimee Wilcox, Director of Content Creation for

to Medicare visit (G0402) also known as the Initial Preventive Physical Exam (IPPE) is Medicare's preventive E/M face to face visit. This code can only be used for the first twelve months from the date the patient became Medicare eligible. With this code, there are also additional initial screening EKG codes (G0403-G0405) that are also once in a lifetime codes. It is allowable to bill a regular EKG code if, for example, while taking a patients' vital signs palpitations were found. In this instance, medical necessity would support billing a regular EKG code (93000-93010).

Below are the documentation criteria that need to be met to support billing a G0402. These criteria are mostly verbal, aside from the exam:

- Review beneficiary's medical and social history
- Review potential risk factors for depression/mood disorders
- Review functional ability and level of safety
- Examine height, weight, blood pressure, visual acuity, BMI (body mass index) and other factors deemed appropriate
- End of life planning discussion
- Education, counseling, and referrals based on the previous components
- Education, counseling, and referral for other preventive services (i.e. colonoscopies, bone density tests, mammograms, etc.)

Beyond the Initial Preventive Physical (IPPE) time frame (12 months), you would move into billing for Medicare Annual Wellness Visits. This process begins with the once in a lifetime code G0438, known as the Initial Annual Wellness Visit which includes a personalized prevention plan of service (PPPS).

Below are the documentation criteria that need to be met to support billing a G0438. These criteria are mainly an overview and establishing patient history and well being:

- Health Risk Assessment (HRA) which addresses demographic data, a self-assessment of health status,

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Our next online session (structured as a series of 5 consecutive Saturday classes) begins July 9th!

psychosocial risks, behavioral risks, and activities of daily living.

- Establish the patient's medical and family history
- Establish a list of current providers and suppliers that are regularly involved in providing medical care to the patient
- Measure height, weight, blood pressure, BMI, and other routine measurements deemed appropriate based upon medical/family history
- Detect any cognitive impairment by direct observation
- Review risk factors for depression and/or mood disorders, past and present.
- Review functional ability and level of safety, which must include an assessment of hearing impairment, ability to successfully perform activities of daily living (ADLs), fall risk, home safety, etc.
- Establish a written screening schedule (i.e. checklist for the next 5-10 years)
- Establish list of risk factors and conditions for which interventions are recommended or underway
- Furnish personalized health advice and a referral, as appropriate, to health education and counseling

Twelve months beyond the Initial Medicare Annual Wellness Visit would be the subsequent visit, or code G0439. This code would also include a personalized prevention plan of service (PPPS).

Below are the documentation criteria that need to be met to support billing a G0439. These criteria provide updates to everything previously captured in the initial wellness visit:

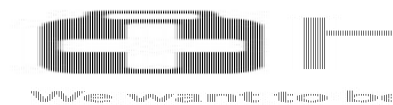
- Review of health risk assessment (HRA)
- Update any medical or family history
- Update the list of current providers and suppliers involved in providing medical care to the patient
- Measure weight (or waist circumference), blood pressure, and other routine measurements

Click here to learn more about the NAMAS Medical Auditing BootCamp

Our second bootcamp, the NAMAS1-Day **E/M Auditing BootCamp** breaks apart the components of E/M auditing to provide you with a better understanding. Whether you're a new auditor OR have years of experience, this bootcamp is for you! Our E/M bootcamp is scheduled in many cities across the country as well as online evenings beginning August 9!

Click here to learn more about the NAMAS E/M Auditing BootCamp

Weekly Tip Sponsor



NAMAS Calendar of Events



Click the image above to view our monthly calendar

A Note from PowerBuying

deemed appropriate

- Detect any cognitive impairment by direct observation
- Update written screening schedule developed during the first Annual Wellness Visit (G0438)
- Update list of risk factors and conditions for which interventions are recommended or underway
- Furnish personalized health advice or any referrals as appropriate.

These codes are very different from your age-based periodic Comprehensive Preventative Visit (codes 99387 and 99397), which are not covered by Medicare. These Medicare physicals are heavily focused on record keeping of medical history and updates of the patient's well being, focusing on preventive care. These physicals do not include clinical lab tests or screening which would be separately reportable. In addition, these codes can also be billed with a sick visit. For example, if a patient comes in for his/her annual wellness visit but also with complaints of abdominal pain, with enough documentation to support a significant separately identifiable E/M, the appropriate level of E/M with modifier 25 could be billed in addition to the Medicare physical.

**This Week's Audit Tip Provided by:
Jeanette Anderson, CPC, CPMA**

Jeanette is an Auditing Specialist for the Department of Audit and Regulatory Compliance for DoctorsManagement, LLC



Don't Throw Cash in the Trash!

Medical waste disposal is something that every practice needs to remain safe and compliant. 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 May



Forensic and Compliance Risk Auditing

Speaker: Michael Miscoe
June 7, 2016
2pm EST

Writing an Effective Resume

Speaker: Kylie Moody
June 14, 2016
2pm EST

NAMAS 8th Annual Auditing & Compliance Conference



Pre-Conference:
Dec 6 2016

Conference:

December 7-9 2016

Location:

Loews Portofino Bay Hotel
Orlando, FL

**Complete Conference Agenda
Now Available! Click Here To
View Agenda**

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.

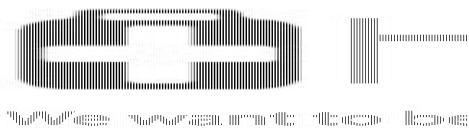
Limited Time Offer- Ends 05/31/16



Register for pre-conference & conference and receive complimentary admission to 1 Universal Orlando theme park after 2pm on Friday, December 9! While supplies last- reserve your spot at conference today!

Click here to register for conference

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Creating & Maintaining an Effective Compliance And Auditing Program

Speaker: Daniel Flynn
June 21, 2016
2pm EST

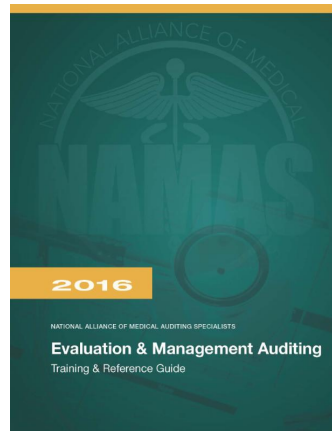
E/M Encounter Review

Speaker: Michelle West
June 28, 2016
2pm EST

NAMAS Members: Watch your Email for Registration Links

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

Just Released & Now Taking Pre-Orders



2016 E/M Auditing Training & Reference Guide

This manual, designed exclusively for our E/M Auditing BootCamps breaks down the components of E/M auditing, explaining topics such as history of the encounter, medical necessity, medical decision making, and grey areas of auditing policies.

This manual is ideal for both new and seasoned auditors alike.

This manual is currently in production, but we are accepting pre-orders. All pre-orders will be

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shipped as soon as they are available.

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A Note From Our Parent Organization: DoctorsManagement, LLC

OSHA Monthly Bulletin



Get your OSHA updates here! Our monthly publication is written to provide pertinent up-to-the-moment information for medical and dental offices. This information keeps the practice, the Safety Coordinator and the OSHA Manual current with the OSHA regulations and steps outside the OSHA box in response to needs expressed by our readers.

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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!

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