



NAMAS Weekly Auditing & Compliance Tips

June 10, 2016

Medical Necessity & Its Impact on E/M Services: Ensure You Always Land on the Correct Level of Service

One of the areas dating back to the first change in how providers select codes for visits is still causing problems today and at almost the same rate. The high rate of improper Evaluation and Management (E&M) levels and the failure to adequately demonstrate medical necessity (nature of presenting problem) remains a common coding error in physician practices and one of the biggest causes for negative results during an audit.

Physicians continue to intentionally under code or "one code" office visits with new and established Medicare patients to try to avoid being an audit target. Those who are employed by a facility practice or health system do it to keep from being hassled (in their mind) by the internal auditors as they believe playing it safe is better than coding for the higher levels of services their documentation supports and in turn, avoid the headache of training and education which takes them away from RVU-

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NAMAS is the leading source of CEU's for maintenance of your credentials- including those hard to find CEU's for CPMA!

We offer 4 membership levels- choose the one that best suits your needs!

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

Looking to Become an Auditor?

Want to Sharpen Your Auditing Skills?

Then a NAMAS BootCamp is for you! We offer two bootcamps to help you excel as an auditor:

generating services. Believe it or not, some providers still select levels of service lower than what their documentation supports to reduce the out-of-pocket amount the patient owes.

The financial impact this has on their practice and employees is significant and in addition, may potentially lead the practice/organization down a road they cannot afford to go down from a compliance and regulatory position. It also puts the organization into a position of significant financial loss. In many cases, the potential risk for the practice is greater than the amount saved by the patient.

As stated above, it's not just about forfeiting revenue. These physicians are at risk of Medicare noncompliance which can generate an audit for being an outlier and affecting the physician distribution analysis (Bell Curve) for that region/MAC. The fact is, even though physicians need to avoid under coding, Medicare data suggests that over coding is far more common in E&M services.

In 2012, the Office of Inspector General (OIG) conducted a study referred to as "Improper Payments for Evaluation and Management Services Cost Medicare Billions". According to the study, Evaluation and Management (E&M) services are visits performed by physicians and non-physician practitioners to assess and manage a beneficiary's health. Medicare paid \$32.3 billion for E&M services in 2010, representing nearly 30 percent of Part B payments that year. In 2012, the OIG reported that physicians increased their billing of higher level codes, which yielded higher payment amounts for E&M services in all visit types from 2001 to 2010. The



Our **Medical Auditing BootCamp** will prepare you for the Certified Professional Medical Auditor (CPMA) exam as well as a career as an auditor. Learn the fundamentals of auditing and build your confidence in one of our 2-day onsite sessions or our 5 week online session. Earn 16 CEUs for attending this bootcamp session.

Click here to learn more about our Medical Auditing BootCamp

Our **E/M Auditing BootCamp** will dig deep into all aspects of Evaluation and Management (E&M) auditing. Whether you're new to auditing and want to expand your knowledge or you're an experienced auditor, you will learn something new in this course. Earn 8 AAPC CEUs by attending our 1-day onsite session or our evening online session (a series of four, two-hour Tuesday/Thursday sessions).

Click here to learn more about our E/M Auditing BootCamp

Read how previous attendees rated our training programs:

"I have taken E&M classes from a number of different organizations, but not one comes close to the well presented, not-watered-down instruction by NAMAS. Both experienced and new auditors will take away more from this one day class than a week long course offered by others."

"After attending the NAMAS bootcamp and utilizing the study guide, I passed my CPMA. I couldn't have done it without NAMAS' support and educational resources. Thanks again!"

Centers for Medicare & Medicaid Services (CMS) found that E&M services are 50 percent more likely to be paid for in error than other Part B services as "most improper payments result from errors in coding and from insufficient documentation".

While the study addressed documentation errors, it also called into question medical necessity. DoctorsManagement defines medical necessity as the nature of the presenting problem, which based on the AMA CPT® Manual and the CMS Documentation Guidelines for Evaluation and Management Services, defines five categories of presenting problems: minimal, self-limited or minor, low severity, moderate severity, and high severity. We additionally specify a category for each E&M code. Medicare specifically states that "medical necessity of a service is the overarching criterion for payment in addition to the individual requirement of a CPT code. It would not be medically necessary or appropriate to bill a higher level of evaluation and management service when a lower level of service is warranted. The volume of documentation should not be the primary influence upon which a specific level of service is billed. Documentation should support the level of service reported. The service should be documented during, or as soon as practicable after it is provided in order to maintain an accurate medical record."

Focusing on the nature of the presenting problem before assessing the additional elements (history, exam and medical decision making) of an evaluation and management service is the key to accurate auditing and will always ensure an optimal outcome.

Weekly Tip Sponsor



NAMAS Calendar of Events



Click the image above to view our monthly calendar

Upcoming Webinars

NAMAS is proud to present the following webinars in May



Writing an Effective Resume

Speaker: Carol Fox

June 14, 2016

2pm EST

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

**This Week's Audit Tip
Provided by:
Mckenzie Harrison, CPMA**

Mckenzie is an auditing specialist for our parent organization, DoctorsManagement, LLC

NAMAS Members: Watch your Email for Registration Links

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

A Note From Our Tip Sponsor



Miscoe Health Law, LLC concentrates on providing representation to small and mid size physician practices that need legal assistance associated with post payment audits. Our team is composed of legal, coding, clinical, and statistical professionals who have exceptional academic and professional qualifications.

Click the logo above to learn more about Miscoe Health Law, LLC

A Note from PowerBuying



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Are you registered for the 8th Annual Auditing & Compliance Conference?

Attend the only conference focused on the auditing and compliance professional!

Pre-Conference: December 6, 2016

Conference: December 7-9, 2016

Venue: Loews Portofino Bay Hotel
Orlando, Florida

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!

Stay Informed



Click Here to View Conference Agenda

Our pre-conference is a full day of breakout sessions where attendees can choose between FOUR tracks: Physician-Based Auditing, Facility-Based Auditing presented by Panacea Healthcare Solutions, E/M Auditing with Auditors Precision Testing, and Physician-Based Compliance

Conference begins Wednesday December 7 with an afternoon of general session for all attendees. On Thursday, December 8, attendees will be able to select between three breakout tracks (physician-based auditing, facility-based auditing and physician-based compliance). Conference concludes Friday after a morning of general sessions.

**Limited Time Conference Offer
Ends 06/30/16**



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Offer valid for both new and existing NAMAS members

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DoctorsManagement, a medical and health care consulting firm, has helped physician in all specialties with health care, dental and medical practice management services across the country.

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In This Issue

[DoctorsManagement](#)
[NAMAS 8th Annual Conference](#)
[Become a NAMAS Member](#)
[NAMAS Training](#)
[Calendar of Events](#)
[Upcoming Webinars](#)
[Receive These Tips](#)
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Conference

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