



Weekly Auditing and Compliance Tip

National Alliance of Medical Auditing Specialists | 877-418-5564 | namas.co | namas@namas.co

February 24, 2017

Documentation: Carrying Forward or Ineffective Use of Templates?

I often receive questions such as the below from our members regarding E&M scoring:

"I have heard that if information is 'cloned' or 'moved forward' from a previous visit, we should not count that info in scoring. However, I have also read that if a provider moves the info forward and also documents that it is the same or unchanged, then we are able to use that information. Can you clarify?"

The problem is that everyone says that CMS says you cannot copy/paste and/or clone documentation, but try to find that in black and white. CMS now has a clarification posted in the Program Integrity Issues in Electronic Health Records: An Overview that defines copy/paste. It does not say it cannot count, but actually gives us a definition of copy/paste. Even this document gives some definition, but unfortunately it does not provide you with concrete guidance on the matter.

What I can say is that I believe documentation is now superseding the actual care of the patient in healthcare, and given that, I think we must use our knowledge and place true relevancy as to what was carried forward. If the PFSH is carried forward- is that



As a NAMAS member, you'll receive access to monthly webinars for CEUs (including those hard to find CPMA CEUs!), a subscription to BC Advantage magazine, discounts on products and NAMAS training events, and much, much more!

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

Click Here to View NAMAS Membership Levels and Benefits

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

truly wrong? Well, considering that Documentation Guidelines (DG) allows a patient themselves to document their own PFSH or ancillary staff to perform the work- as long as the provider has reviewed it- it counts. How can you argue that carrying forward the sit me information, provided it was reviewed by the provider, is any less traumatic?

We know that HPI, Exam, and Medical Decision Making (MDM) must all be specific to the patient encounter and relevant to the patient's presenting problem. Information carried forward may be found in HPI typically occurs when the provider pulls the old HPI from a previous encounter. Provided they then label it as previous HPI and today's HPI for the purposes of good patient care- then it's completely acceptable. Exams are typically not brought forward, but rather a product of "push button finger" within the EMR- so before you consider these as carry forward; consider that the provider may just not be effectively using their templates. Diagnoses will sometimes carry forward as a problem list for the patient, but again that would not be a problem, because we are only going to count what was relevant to today's encounter. Regarding the data and complexity of what was reviewed, I have seen MANY inpatient EMRs such as Cerner that hold ALL inpatient testing in every note. Again, I'm not going to ping the provider for carrying forward, but rather not count it if he/she doesn't create the relevancy. For example- Patient is IP for 10 days and the chest x-ray from admit day 1 is on my 99231 encounter for day 9 (as well as every day), we must be sensible and understand that unless there is a reasonable cause within the documentation that the provider has needed to re-evaluate that x-ray for 10 days- then we just don't count it.

The plan of care should ALWAYS be patient and encounter specific. I do see more and more that encounters are looking macro populated, but think about what many of these are. For example, Provider told the patient to take vitamins and wash eye lids effectively everyday.... Will that really affect your encounter to a higher level of service? Then let it go!

So, my answer is this: evaluate if the documentation is REALLY carry forward or just an instance of poor template usage. If it is carry forward, is the information carried forward really impacting the care of the patient and pertinent to today's visit?



**Become
A
Medical
Auditor!**

**Train to Become a Medical Auditor with
our Medical Auditing BootCamp**

Our **Medical Auditing Bootcamp** will train you to become a medial auditor. Learn the principles of auditing, compliance regulations, and how to perform the daily duties of an auditor.



**E&M Auditing
BootCamp
With
CEMA
Certification**

**Be Among the First to Earn Our Newest
Auditing Credential**

Our **2- Day E&M Auditing Bootcamp** is an accelerated auditing training specific to E&M auditing. Learn about audit policies, get clarity on documentation guidelines, medical decision making, medical necessity and more. Plus, during this training program you will have the opportunity **earn our NEW CREDENTIAL - Certified Evaluation and Management Auditor (CEMA)!**

**Click Here to Learn More & View Our
E&M Auditing BootCamp schedule**

**Upcoming
Webinars**



NAMAS is proud to offer the following webinars in February and March

This Week's Audit Tip Written By:

Shannon DeConda, CPC, CPC-I, CEMC, CMSCS, CPMA, CEMA



Shannon is a Partner with our parent organization, DoctorsManagement and is also the President of NAMAS

Hands On: Auditing Dermatology Services

Speaker: Kathy Pride
February 28, 2017
2pm EST

This webinar is FREE for NAMAS Platinum members. This webinar is available for purchase for \$49.99 in our online store for non members
Click here to purchase

Medical Necessity Reviews: When is a Physician's Clinical Perspective a Required Component of Your Audit?

Speaker: James Dunnick, MD, FACC
March 7, 2017
2pm EST

This webinar is FREE For NAMAS Platinum and Gold members, and Silver and Basic members who have selected our auditing webinar series. This webinar is available for purchase for \$49.99
Click here to purchase

Are You Looking for PRN Auditing Work?



DoctorsManagement, LLC and NAMAS are looking for PRN auditors, particularly auditors who have experience in the following specialties:

-Facility-Based Services

-Physician-Based Services, particularly:

- Interventional Services (Interventional radiology, cardiology and vascular)
- Cardiovascular
- Radiation Oncology

If you are interested and have experience in one or more of the above areas, please submit your resume via email to namas@namas.co

NAMAS Calendar of Events



Click the image above to view our monthly calendar

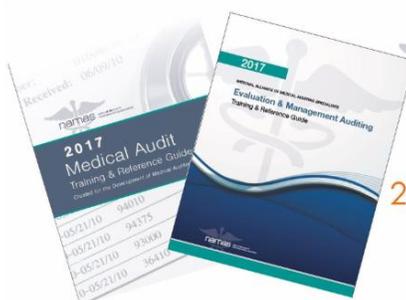
Weekly Tip Sponsor



Ohana Healthcare LLC

Ohana Healthcare provides education for several credentials, including medical billing and coding

Click the image above to learn more



**2017 Auditing Manuals
Now Available
For Pre-Order**

We are Now Accepting Pre-Orders for our 2017 Auditing Manuals

We are now taking pre-orders for our 2017 Auditors Resource & Prep Guide and our 2017 E&M Auditing Training & Reference Guide! Both manuals are anticipated to be available in late February.

Pre-Order your copy today!

2017 Auditors Resource & Prep Guide

2017 E&M Auditing Training & Reference Guide



Sample what a NAMAS membership can offer you with our FREE 1-month LITE trial membership

Register for our 1-month free trial LITE membership and experience a sample of what a NAMAS membership has to offer - NO Credit Card Information Needed!

During your trial, you'll receive access to weekly webinars for a chance to earn CEUs, weekly auditing and compliance tips, and even a sample of BCAdvantage magazine!

Click the image above to get your 1-month free trial membership today!

Stay Up to Date With NAMAS News & Announcements

Follow us on social media and always be in the know!



2016 Salary Survey



Each year, NAMAS collects data from auditors about their employment as auditors.

Please take a few moments to complete our survey. Entering your email address at the end of the survey will enter you into a drawing for a chance to win one of several prizes:

\$100 Visa Gift Card

\$25 Starbucks Gift Card

and our

GRAND PRIZE

is a scholarship

to attend our 9th Annual NAMAS Auditing & Compliance Conference!

Click the image above to complete the survey. This survey will close on March 15, 2017 and winners will be selected and contacted by a NAMAS representative.



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!