

Connecticut Coders Quarterly

Newsletter of the Connecticut Chapter of the AAPC

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Happy spring to all!

Some of us have just returned from the National AAPC conference in Atlanta, GA April 3-7th. We had a great time showcasing our chapter at the "Get to Know Your Local Chapter" event on Sunday. We also attend some informative and interesting session on topics ranging from Ob-Gyn to the new ICD-10 codes.

Due to national conference, our chapter will not have an April meeting. If you were not able to attend conference and will be in need of additional CEUs, our chapter will be presenting a conference in early October. More information will follow as soon as the arrangements have been confirmed.

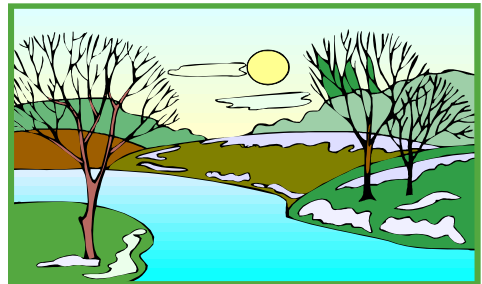
National AAPC requires chapters to have a minimum of 6 meetings. Due to the high expense of our meetings, we have made the decisions to continue with the minimum of six meetings. We are

exploring the possibility of acquiring sponsors to offset our costs.

Our chapter is grateful to all our speakers who volunteer throughout the year. If you are aware of an organization or employer who would be interested in sponsoring a meeting, please let me know.

Sincerely,

Brenda Dombkowski



Dr. Veronica Chiang Presents "Neurosurgical Procedures and ICU Coding" to Local Chapter

By Corinne Fisher, CPC

Veronica Chiang, MBBS, Assistant Professor of Neurosurgery at Yale School of Medicine, presented a most informative and interesting overview of the specialty of Neurosurgery and of ICU and critical care coding and billing to local chapter members at their February 17th, 2004 meeting.

After a general review of the anatomy of the head, Dr. Chiang reviewed the various subspecialties of Neurosurgery, giving us insight into both the types of disease and the various treatments provided. Those subspecialties are:

- Trauma

Next Review Class for AAPC Exam:

May 7th, 8AM, Yale University School of Medicine, 333 Cedar Street, New Haven, CT
Beaumont Room

Next Meeting:

Josh Copel, MD
Professor of Maternal Fetal Medicine
May 27, 2004, 8:15 am
Brady Auditorium
Yale School of Medicine
Cedar Street
New Haven, CT
bdombkowski@ob-gyn-infertility.com.

- Hemorrhagic Vascular Cases (Aneurysms, AVMs, etc.)
- Occlusive Vascular Cases
- Tumors and Onocological Procedures
- Radiosurgery
- Operations for Infections
- Surgical Epilepsy
- Developmental
- Shunts
- Spine Surgery
- Functional Procedures
- Intensive Care Unit

Next came a comprehensive review of critical care billing. Dr. Chiang made the following points:

Documentation requirements to bill critical care:

- Clinical condition criteria
- Treatment criteria – time spent treating patient
- E&M and critical care services can be provided to the same patient on the same day by the same physician
- Critical Care services do not need to be provided in an ICU setting, but must be medically necessary
- Common critical care diagnoses for non-operative cases: Encephalopathy, coma, intracranial hypertension, seizures, impending CVA

Post-operative billing

- Global fee applies only to the diagnosis leading to patient surgery and direct complications
- If services are provided for a separate diagnosis, then separate billing is appropriate
- The separate organ failure ICD-9 diagnoses are then coupled to the time-based billing codes.

Documentation of time

- Total time must be clearly documented per 24 hours
- Any time spent on patient care including resident supervision and discussion of patient (not teaching), discussion of care with other physicians or allied services, discussion with family for decision making (not family updates)
- 99291 = >30 minutes up to 74 minutes
- 99292 = every additional 30 minutes following initial 74 minutes
- 99231, 99232, 99233 billed if <30 minutes were spent.

Bundled codes

Included in 99291:

- ABG interpretation and ventilator management
- CXR interpretation
- Swan Ganz reading and interpretation
- Venipuncture and arterial puncture

Excluded in 99291:

- Endotracheal intubation
- Central venous catheter placement
- Arterial catheter placement
- Swan Ganz catheter
- Any procedure related to the CNS
- Conscious sedation

To summarize, Dr. Chiang stresses being specific, knowing the billable details, and *always* asking if unsure.

To obtain a copy of Dr. Chiang's complete presentation on CD, please e-mail corinne.fisher@yale.edu.

The Evolution of a Medical Coding Consultant

By Ellen McGuire, CPC, CPC-H, CCS-P

I have always had the dream of owning my own business. And, for quite some time, I had been trying to find the perfect avenue to blend my college degree, patient care experience and the years I had dedicated as an educator at a prestigious New York hospital with the expansive knowledge I'd acquired while employed at the former Connecticut Blue Cross and Blue Shield and the Yale School of Medicine. My employment history and

education looked great on my CV, but could all of that experience survive as the foundation of a small business endeavor? Only heaven knew!

In 1999, my desire to see my dreams to fruition was stronger than ever. The urgency forced me to close my eyes, cross my fingers and take the biggest leap of faith I'd ever taken in a thirty-three year medical career.

The Evolution of a Medical Coding Consultant

Continued

I started Coding Concepts LLC on a shoestring and prayer. This idea of entrepreneurship was completely new to me and I had no idea where to begin. Yet, despite my naiveté, I was determined to be a success. So I started with the easy stuff. I set up a small home office. All of my buying and decorating created a great work space, but I was missing an important element...clients. Every successful business person needs a product line and a client base. I'd identified the overall product I wanted to offer, but how would I attract the customers? I was acutely aware that I knew nothing about marketing, nothing about negotiating, and nothing about business law. I was going to need help. So I sought out good mentors, read one business book after another and subscribed to field publications. To gain some experience, I began my career as a sub-contractor, taking on a myriad of assignments engaged by other medical consulting companies. Although it wasn't what I had originally anticipated, this initial year actually proved to be a time of tremendous growth and personal development. I began to make some contacts on my own. I'd met a good number of professionals through my work assignments and I joined professional associations to meet more people. I introduced my business with a very small scale advertisement campaign and depended greatly on word of mouth referral. It was during that initial period that I fell upon what has become the nucleus of my business, coding education.

The opportunity of being able to teach coding compliance, evaluation and management principles and correct coding schemes to physicians, non-physician practitioners and ancillary staff members was both enjoyable and gratifying. It was during this office to office education process when it became clearly evident to me that something was lacking in the world of the private practice; the professional medical coder. It was that glaring deficiency that ultimately defined the primary focus of my small business. The focal point for Coding Concepts was going to be medical coding education. The defining moment that made coding education the core of all of Coding Concepts' products and services, served as the catalyst to develop the company's small business marketing strategies, target a consumer base, develop and maintain an exceptional product and as a result, maintain a satisfied client base.

I quickly learned that a coding consultant must be willing to ride a constant learning curve. If one becomes idle and or gets overly confident or comfortable, the competitors will find a way to close your business while you're napping. As a coding consultant/educator, my coding education is a work in progress, dotted with goals and standards for both personal and professional excellence. I demand from myself what my customers expect when engaging me for a class or an assignment; Nothing less than but the best.

You can send your articles to our editor, Corinne Fisher at 737-2957, 737-4108 or corinne.fisher@yale.edu and earn extra CEUs!

Another lesson learned along the way is that owning and operating a small business is neither easy nor glamorous. It's a lot of hard work and certainly involves more than a forty hour work week. Unless a consultant hires an ancillary staff, she will find herself in the roles of secretary, receptionist, marketing representative, customer service liaison, creative director, accountant and researcher. I literally begin my workday at 7:00 AM and end it at 10:00PM. There are no company provided fringe benefits, and a vacation means that the office laptop and cell phone travel with you.

On the other hand, there are enough positive things to offset the negative side of self-employment. The satisfaction of molding and watching new professional coders develop and grow through your lectures and lessons is indescribable. It's simply the best part of what I do! Getting to meet new and interesting people that would otherwise never cross life's path is just an added bonus. The consultant also has the option of taking on assignments that are interesting and creative, leaving the mundane out of one's work week. Another plus is to have full charge over your work schedule. You can tailor your work week, month or year to what suits your style and routine. You are in full charge of your success or your failure, and truly the master of your own design!

I am indebted to all of the students who have placed their trust in me and who have allowed me to help them realize their own dreams of certification and beyond. I am grateful to the medical professionals

who have invited me into their private practices on a repeated basis. The fact that the medical community respects my opinion, recognizes my talents and rewards my coding expertise makes all of the hard work and long hours worthwhile. At this point in my life, I wouldn't trade this profession for any other in the world. I have truly found my niche. Few people can honestly say that they enjoy what they do on a day to day basis, and it's great to be among the fortunate few!

Ellen McGuire is a CPC, CPC-H, CCS-P and an AAPC approved instructor of the Professional Medical Coding Curriculum. She is owner and president of Coding Concepts LLC, and currently teaches the PMCC, the CPC-H Preparatory Program and numerous Continuing Education Programs statewide. Ellen is an adjunct Professor of Health and Allied Sciences in the State of CT Community College System.

Connecticut Chapter of the AAPC

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Tony Fusco, Layout

Beth Lynch, CPC

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We're on the Web!

www.ctaapc.org

Mailing Address Here

Bulletin Board

Upcoming Meetings

Joshua Copel, MD

Professor of Maternal and Fetal Medicine

Brady Auditorium, Yale School of Medicine

May 27, 2004, 8:15 am

Cedar Street, New Haven, CT

Please RSVP for meetings at least 3 days prior so handouts and refreshments can be ordered. Also, be sure to sign in and indicate if you are a CPC to insure you receive your CEUs.

Info Available for Understanding Medicare

by Pat Waleski, CPC

First Coast Service Options the Medicare Part B carrier for Connecticut and Florida presented a claims resolution workshop on February 27th. This is one of several teleconferences the carrier now presents to help providers understand the ongoing changes at Medicare. Several topics were discussed with an interactive discussion with participants on the call. Covered were issues ranging from “Learn What’s New in Medicare” to “Understanding the Appeals Process at the Contractor Level”. Also discussed were some of the “Top Denials” that the carrier encounters on a day-to-day basis. In addition to the quarterly Newsletter that FCSO puts out which can be found at:

<http://www.connecticutmedicare.com>, the carrier and the Centers for Medicare & Medicaid Services (CMS) <http://cms.hhs.gov/> also offer sites on “Where to Learn More”.

A schedule of these calls can be found at the FCSO site under the section of Education.

I have found the following sites very helpful:

Carriers Manuals <http://cms.hhs.gov/manuals/cmstpc>.

The Quarterly Provider Update at <http://cms.hhs.gov/providerupdate>

Medlearn Matters at <http://cms.hhs.gov/medlearn/matters>.

To obtain info on fee schedules go to Medicare Physician Fee Schedule (MPFS) link to CMS web site at: <http://cms.hhs.gov/physicians/mpfsapp/step0.asp>.

If your office did not have an opportunity to listen in to this teleconference it is now available on the Connecticut site as an audio presentation and in text format. Every little bit helps and in this profession we are in constant pursuit of knowledge. The tools are out there. Take advantage of them. Happy Spring!

Patricia Waleski, CPC, is a Compliance Auditor for Yale Medical Group and