

Connecticut Coders Quarterly

Newsletter of the Connecticut Chapter of the AAPC

Winter 2002

Issue 2

... A Note from the President's Desk ...

Happy 2002 Chapter Members! We are excited to issue our second Newsletter. We hope you find it to be informative and educational. Please keep in mind that the Newsletter committee is always open to suggestions and input from our members.

Congratulations to our newly elected Chapter Officers:

Corrine Gray – President-Elect

Joyce Dupee – Secretary

Christine Hoyt – Treasurer

I am looking forward to working with them this year in an effort to help Chapter members obtain their certification by offering the CPC exam twice during the year. We will also offer CPC Exam Review courses prior to each exam. Of course, we will also provide CPCs with the opportunity to obtain CEUs via Chapter meetings.

I hope to see you at our next meeting.

Sincerely,

Susan E. Smith, CPC
President, Connecticut Chapter

Compliance Game

Bev Bakes, CPC

On October 25 the Connecticut Chapter of the AAPC held a meeting featuring the game that has been dubbed most appropriately "Compliance *Jeopardy*". This program is

normally held for physicians who are required to complete one hour of medical billing training annually; the head of the Compliance Department, Judy Harris, sponsors it. I must say that Judy does a wonderful job presenting this program. It is both a learning experience and a lot of fun!

The categories for the game are E&M, Teaching Physician, Audit, Terminology, and Billing Potpourri. At the helm and standing at the podium was Jennie Oddy from Compliance, reading out the questions. Assisting and keeping score was Tony Fusco, also from Compliance. The room was divided into two teams (A & B). Judy Harris elaborated on the information after each question was read and then answered.

Here is a brief sampling of some of the types of questions and answers that were presented. The questions ranged from the subtle to the more obvious:

1. Question – Terminology 200 points. What is an abbreviation for "hand money over"?
Answer – What is an HMO?
2. Question – E&M 500 points. Body area/organ system vs. content and documentation required for each type and level of exam.
Answer – What is the difference between the 1995 and 1997 exam rules?
3. Question – Teaching Physician 500 points. When a modifier "GC" is required.
Answer – What is "when incorporating a resident's documentation into your note"?

See *Compliance Game* on page 4

Billing for Co-Surgeons

Susan E. Smith, CPC

Chapter members have recently expressed concerns about billing for co-surgeons. Getting paid appropriately for your physicians' participation in a surgical case that involves another surgeon is a real challenge for coding and reimbursement personnel. Here are a few guidelines to help you make sure that both surgeons are paid equitably.

Modifier "62" should only be used when "two surgeons work together as primary surgeons performing distinct part(s) of a single reportable procedure, each surgeon should report his/her distinct operative work by adding the modifier to the appropriate CPT code". (CPT 2002 – Professional Edition, p. 382).

Both surgeons must dictate an operative report describing the case and his/her participation in the case. The two surgeons' operative reports should relate to each other and make mention of the other surgeon's involvement.

The two surgeons should agree on the appropriate way to bill once the case has been completed, and the surgeons' offices should follow-up with each other to coordinate the coding. Both claims must have the modifier. If the first claim goes in without the modifier, then this surgeon will be paid as a primary surgeon and his/her co-surgeon's claim will be rejected. On the other hand, if the first claim goes in with the modifier, the carrier will know that a second claim is forthcoming. When the second claim is received, the carrier will review both operative reports and pay according to their policy with regard to co-surgeons.

Keep in mind that not all CPT codes are reimbursable on a co-surgeon basis. For instance, if two physicians perform a laparoscopic excision of endometriosis, it would not be appropriate to bill as co-surgeons since

this code (58662) does not ordinarily necessitate the use of two surgeons.

Medicare will allow reimbursement to co-surgeons for designated codes only. Medicare calculates the reimbursement to each surgeon by applying a 50% split of 125% of the Medicare allowable amount for the CPT code that is billed.

Business Consultants – Use Caution

Patricia Waleski, CPC

The Office of Inspector General (OIG) published an article in June of 2001 regarding the practices of business consultants. Most consultants, like most providers, are honest; unfortunately, a small minority of dishonest consultants provide incorrect information to physicians.

As a precaution, the OIG advises providers who use the services of consultants to be wary of the following:

Illegal or misleading statements about their relationship with the Medicare program or the OIG.

Consultants promising or guaranteeing results that are unreasonable or questionable.

Promoting abuse of the Medicare or Medicaid programs.

Some consultants may encourage aggressive billing schemes or fraudulent practices. For example:

- The use of unsuitable billing codes in order to elevate reimbursement.
- How to maximize reimbursements (e.g., upcoding services or unbundling services).
- Not to refund overpaid funds to Medicare .
- How to ensure payment by using specific diagnosis codes.

See Consultants on page 3

Consultants *cont.*

Healthcare providers should be careful in the advice they receive from consultants or other sources as poor advice does risk the possibility of investigation and possible prosecution.



Bulletin Board

Upcoming Meetings

February 5, 2002

8:15 a.m. – 11:00 a.m.

Please join us for our first meeting of the new year. Daphne Balacos, CPC will present the changes in **CPT 2002**. The meeting will be held at Yale University in Hope 110, 315 Cedar Street, New Haven, CT. Please use the 333 Cedar Street entrance if you are not employed by Yale or the Medical Center. This meeting has been approved for 2.5 ceu's.

Annual dues (\$15.00) will be collected at the door – make checks payable to the Connecticut Chapter of the AAPC. Please be sure to verify your current membership status and mailing address when you check in at the meeting. Non-member guest fee to attend a meeting is \$4.00.

Exams

March 23, 2002

8:00 a.m. – 2:30 p.m.

Location: Max Taffel Room at YNHH

September 28, 2002

8:00 a.m. – 2:30 p.m.

Location: Max Taffel Room at YNHH

Exam Review Class

March 15, 2002

Yale Childrens' Health Research Ctr

Second Floor Conference Room

464 Congress Street

8:00 a.m. – 4:00 p.m.

This course is designed for experienced and/or educated coders who are seeking their certification and desire assistance in preparing for the exam. It is not designed to teach coding or coding concepts; however, these are reviewed in context with the Study Guide. Please bring CPT, ICD-9, HCPC's and CPC Study Guide to class. Please contact Susan Smith for information and registration.

In the event of inclement weather for any AAPC event, please tune in to WELI (960) for cancellation information.

Please be sure to check our website (www.ctaapc.org) for any changes or updates in planned events. The chapter would like to extend our thanks to Doug Gladstone, CPC for his work on our website, and welcome Tony Fusco, who will be assuming the maintenance of the site.

Modifier 60 Update

Beverly Bakes, CPC

Hello to everyone and a Happy New Year, too! Along with the new year, we have some new changes with our coding for 2002. While revising encounter forms, I realized that modifier "60" has been deleted after only one year. Furthermore, the language for modifier "22" has been changed. I made a phone call to the American Medical Association to see if I could find out the reason behind these changes.

I was told that there had been some language confusion about the overlap and proper usage of

*See **Modifier 60** on page 4*

Modifier 60 *cont.*

the two modifiers. Also, Medicare was not recognizing Modifier "60" and many claims were being denied. Therefore, it was decided to revise Modifier "22" and to delete Modifier "60". This information can be found in the "CPT CHANGES BOOK, 2002", on page 235 per the AMA.

AAPC 10th Annual Conference

Campaign for Coding

Don't forget the National AAPC Conference April 6-11, 2002 in Washington, DC. Let's make this a well attended event for our Chapter! Be sure to let us know if you are planning on attending – we'll see you there, and stop by our Chapter booth at the "Get to Know Your Local Chapter" exhibits on Sunday, April 7.

Chapter Officers

President – Susan E. Smith, CPC
President-Elect – Corrine Gray, CPC
Secretary – Joyce Dupee, CPC
Treasurer – Christine Hoyt, CPC

Compliance Game *cont.*

Following the game, Chapter president Theresa Cicarella mentioned our next meeting, the annual Holiday Party, in December 2001. Theresa also mentioned that Daphne Balacos and Kathy Kowalchik will be speaking at the AAPC National Conference in Washington D.C. in 2002. Their topics will include cardiac catheterizations, stents, and other cardiac topics.

This was a very worthwhile meeting – the game was a great tool for learning and a lot of fun (and, Team B won!).



Newsletter Committee

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Please visit the website of the Connecticut Chapter of the AAPC at
www.ctaapc.org