

# HOST



#### Marianne Braunstein

Vice President of Product Clinicient, Inc.

Marianne Braunstein is responsible for driving the product vision, strategy and roadmap as well as leading the product team and overseeing the product development process at Clinicient. Marianne is a veteran in the healthcare IT space and brings to Clinicient 20 years of experience in senior product roles and a proven track record of developing solid business plans that deliver products and services based on market need and opportunity.

Prior to Clinicient, Marianne served as the VP of Product at Epocrates, athenahealth and WebMD Health Services. She has also held senior product management roles at MedicaLogic (now Centricity) and GE Healthcare. Marianne holds the belief that employees, clients and users are the most critical asset for any company and encourages a culture based on mutual respect and trust that drives smart innovation and urgency.

mbraunstein@clinicient.com



#### PRESENTER



# Jerry Henderson, PT

Founder and Vice President of Clinical Strategy Clinicient, Inc.

Jerry is the founder of Clinicient, and serves as "the voice of the therapist" in all company undertakings. He has deep roots in physical therapy, and brings an immense amount of industry thought leadership to the company's therapist-facing activities.

Prior to Clinicient, he started three successful private practices and one of the first physical therapy specific EMRs. He has had extensive clinical experience in a variety of settings. He speaks regularly at industry conferences, and is published frequently in professional journals.



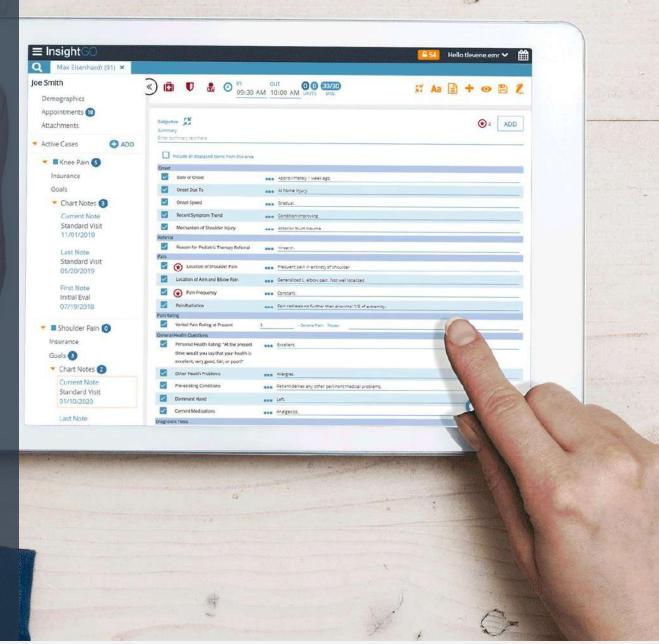


# WHAT'S ON THE AGENDA

Analyze Most Important and Common Documentation Errors

Name the Four Most Important Documentation Practices

Ensure Complete, Compliant, and Efficient Documentation





#### SOME HOUSEKEEPING

# Using GoToWebinar®

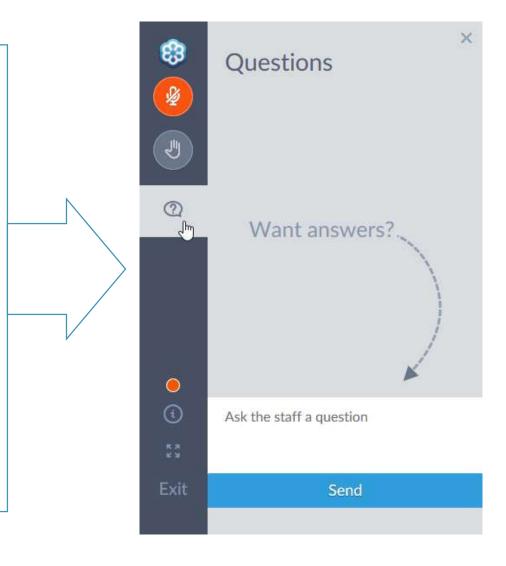
Click on orange arrow to show or hide panel

This Session will be recorded

• Link to the recording and resources will be emailed to all registrants

Please use the "Questions" Panel

- Please do not use the "raise hand"
- Questions will be answered at the end of the webinar as time allows
- Additional questions will be answered in emailed resources





# SOME FINE PRINT

The information provided herein is intended to be general in nature. It is not offered as legal or insurance related advice, and is not a complete description, or meant, or intended, to replace or be interpreted as specific, of Medicare requirements. Although every effort has been made to ensure the content herein is correct, we assume no responsibility for its accuracy. Contact Department of Health & Human Services (DHHS) Centers for Medicare and Medicaid Services (CMS) for more information.



# COMPREHENSIVE ERROR RATE TESTING - 2019



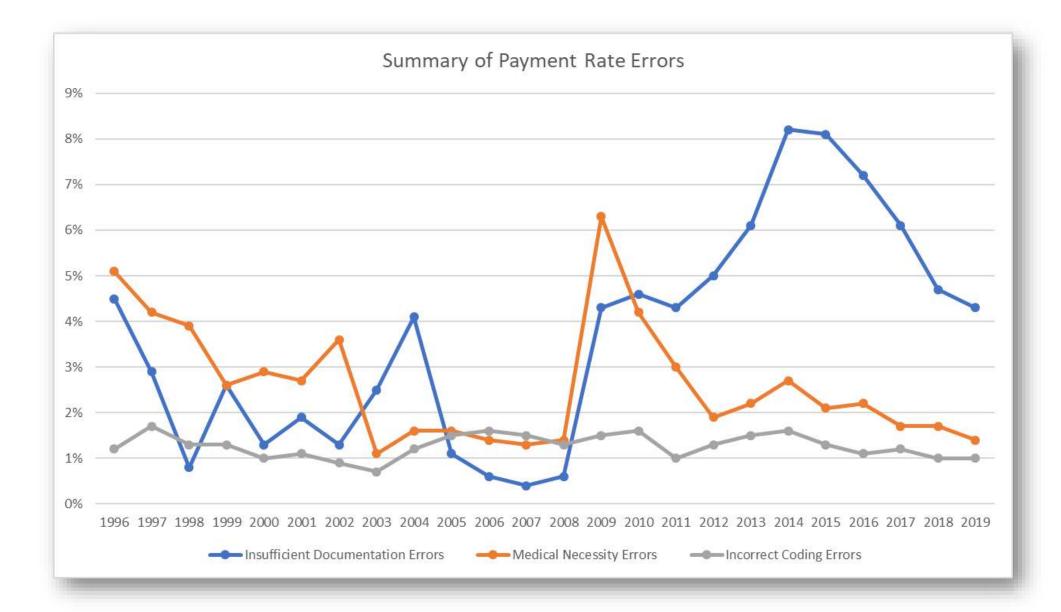
U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

2019 Medicare Fee-for-Service Supplemental Improper Payment Data

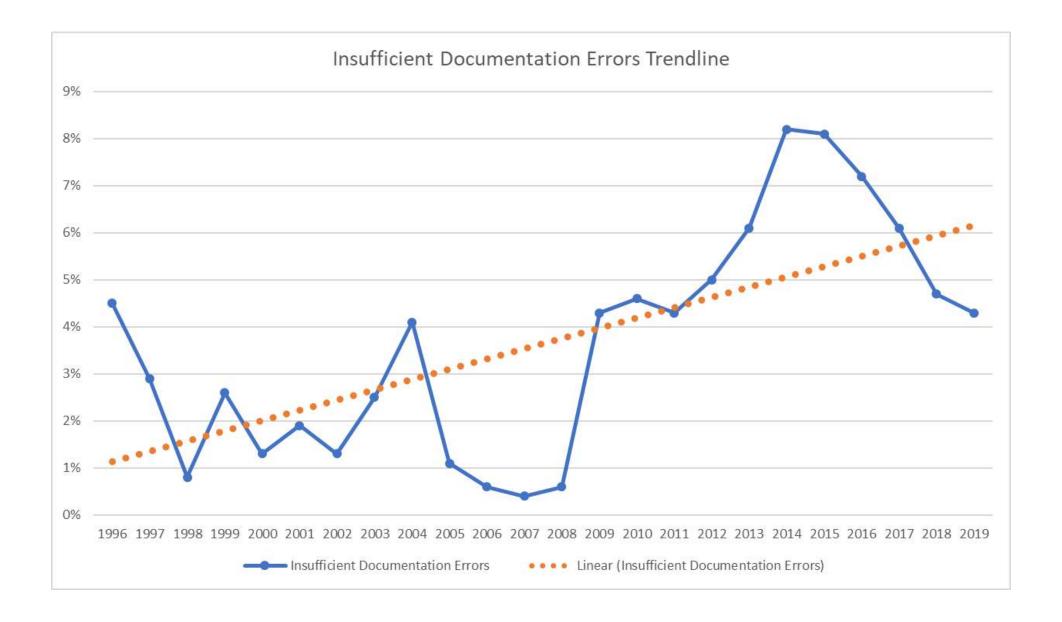
- Overpayment Data
- Root Cause Analysis
- Practice Setting Comparison
- Error Rate Trends

Medicare Supplemental Improper Payment Data 2019

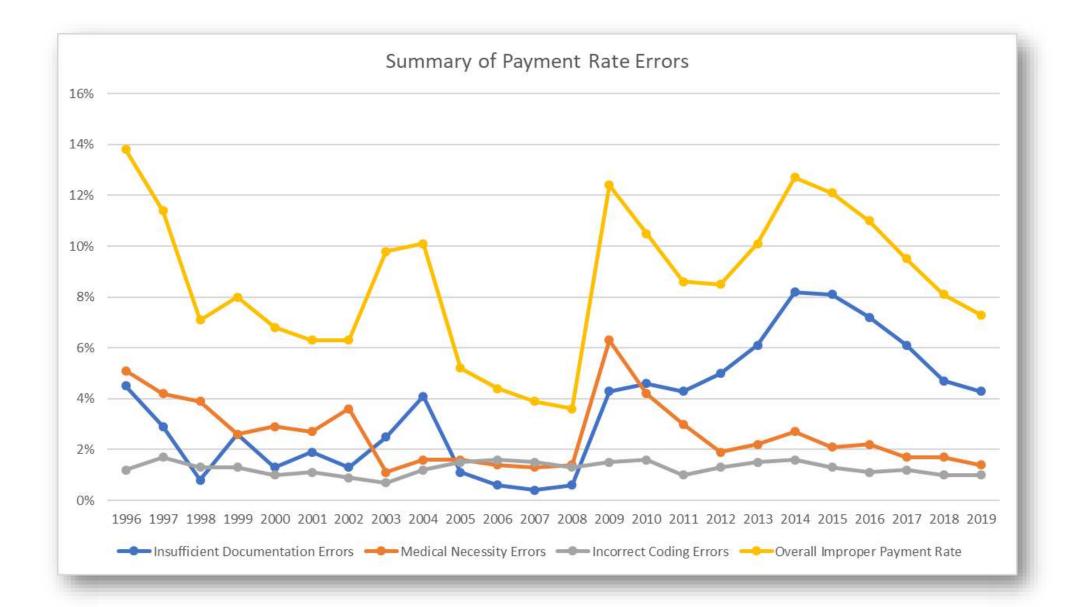




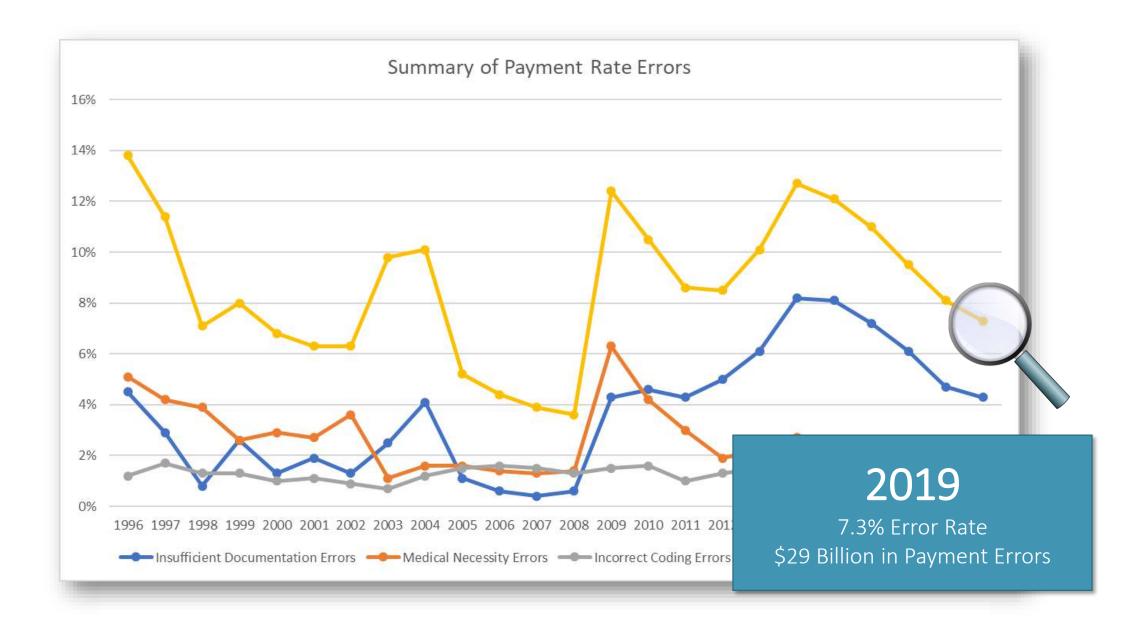






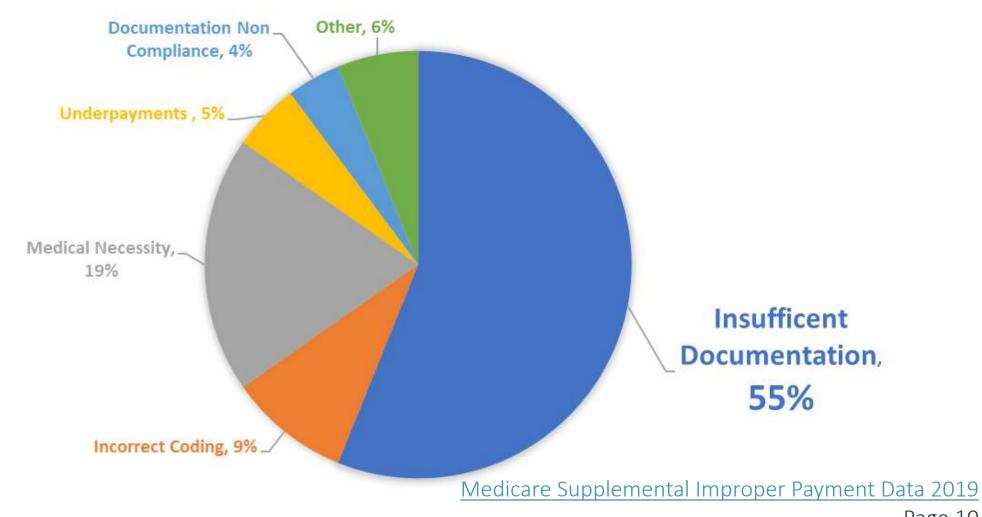




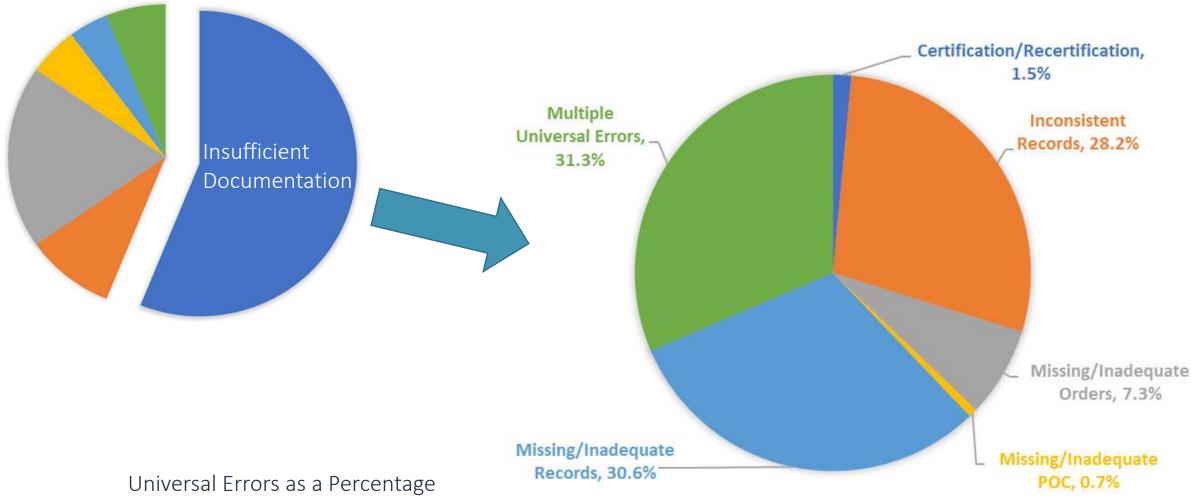




#### TOP CAUSES OF IMPROPER PAYMENTS — ALL PROVIDERS





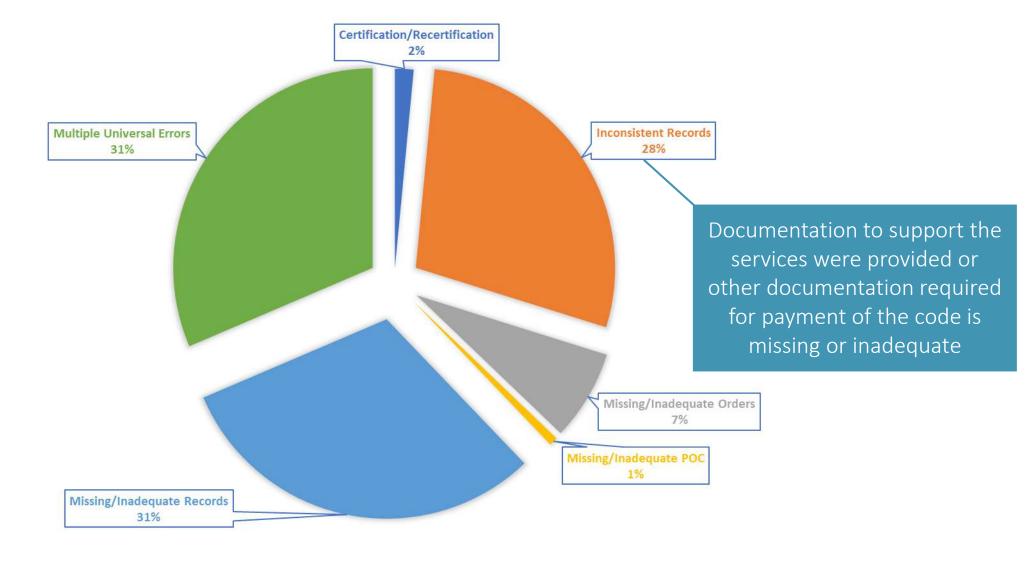


of Part B Improper Payments Due to Insufficient Documentation

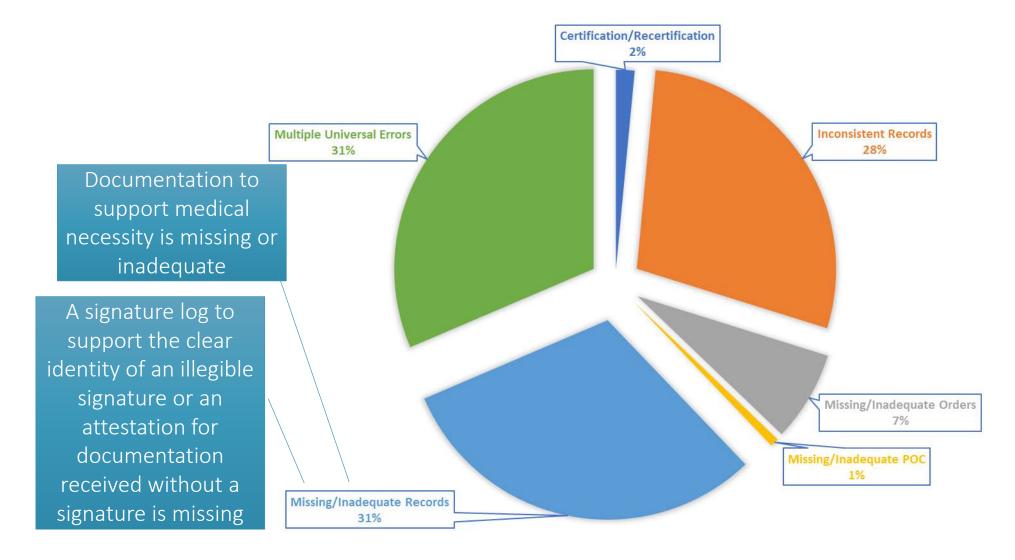
Medicare Supplemental Improper Payment Data 2019

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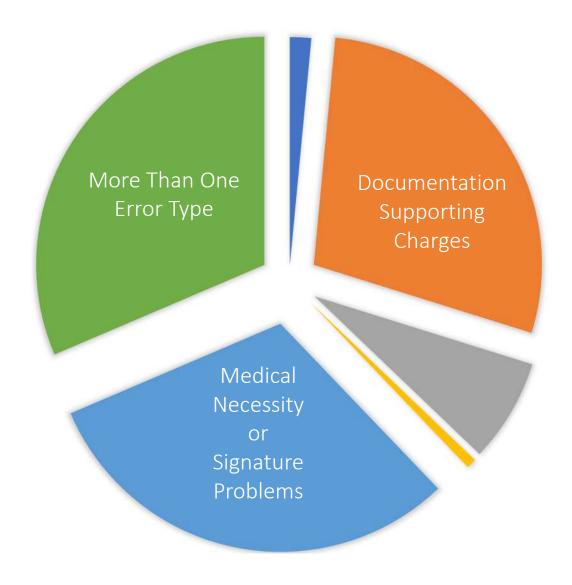






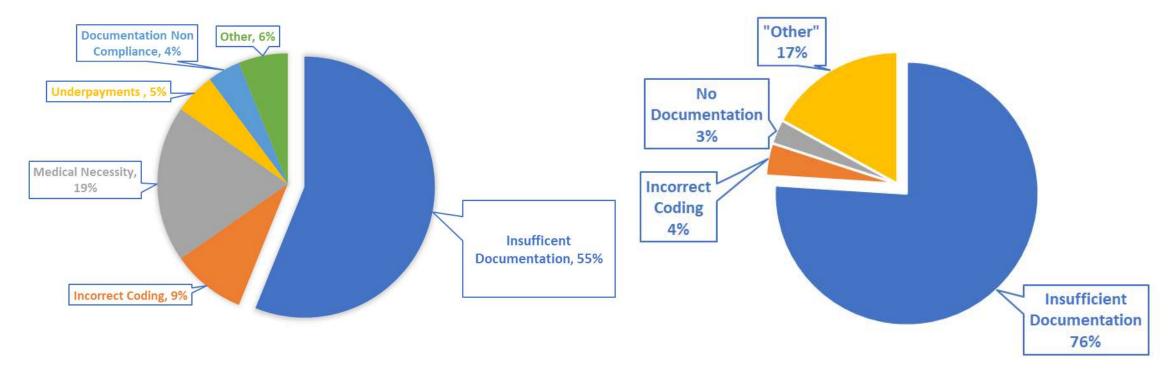








# PTIP ERROR TYPES



All Providers

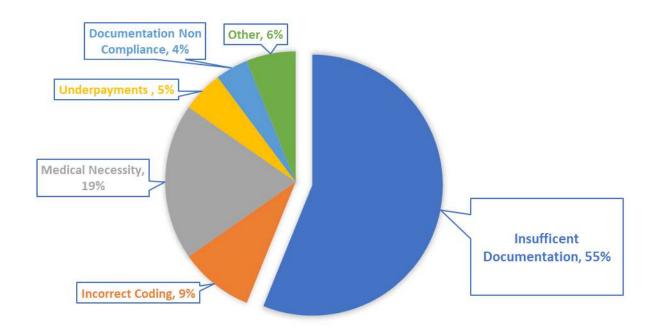
Physical Therapists in Private Practice

Medicare Supplemental Improper Payment Data 2019

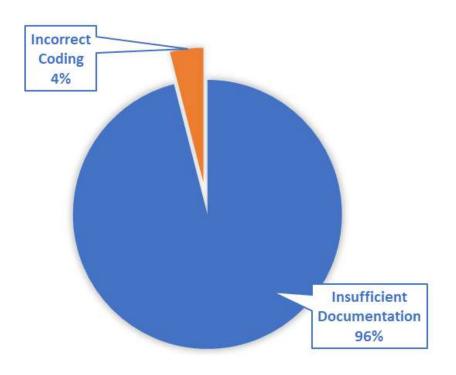
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# OTIP ERROR TYPES



All Providers



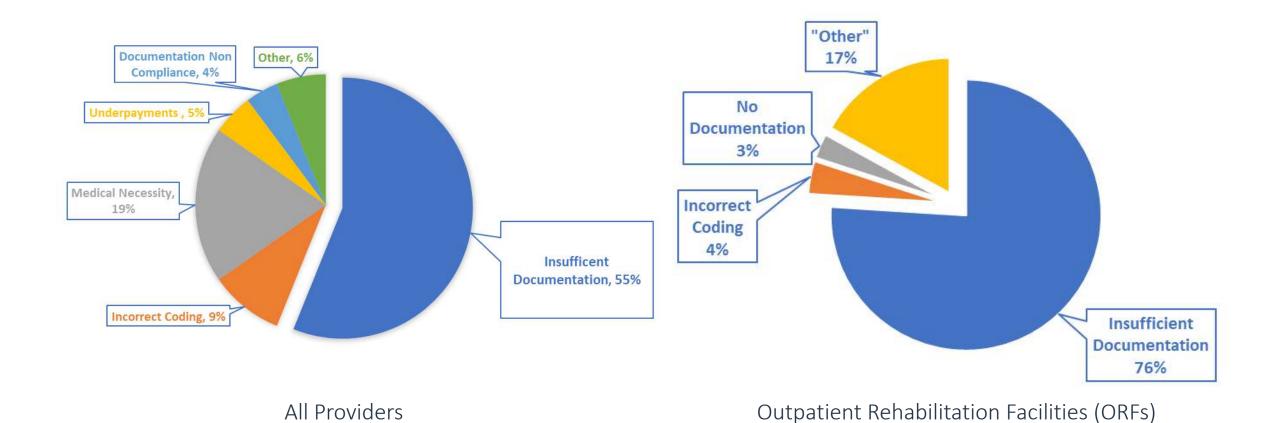
Occupational Therapists in Private Practice

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# ERROR RATES BY PROVIDER TYPE

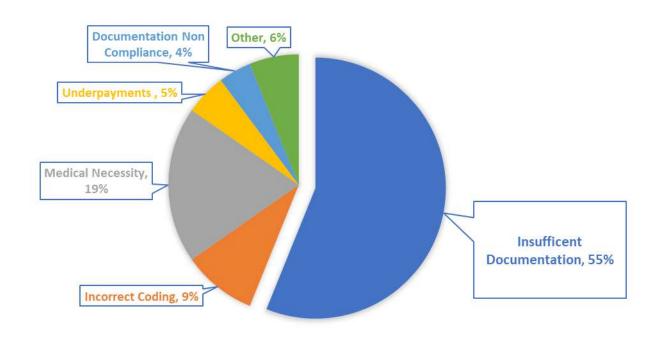


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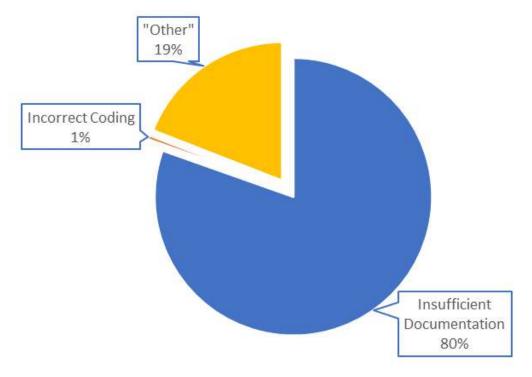
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Medicare Supplemental Improper Payment Data 2019

#### ERROR RATES BY PROVIDER TYPE



All Providers



Comprehensive Outpatient Rehabilitation Facilities (CORFs)

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# PART B IMPROPER PAYMENT RATE

Part B Provider Type	Improper Payment Rate	Projected Total Improper Payments	Percent of Total	Rank
Internal Medicine	13.5%	\$1,171,140,876	3.9%	1
Clinical Laboratory	19.2%	\$720,194,509	2.4%	2
Family Practice	10.3%	\$615,595,816	2.1%	3
Ambulance Service Supplier	9.8%	\$476,977,483	1.6%	4
Physical Therapist in Private Practice	15.2%	\$386,542,656	1.3%	5
Occupational Therapist in Private Practice	16.0%	\$38,171,727	0.1%	42

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# IMPROPER PAYMENT RATE COMPARISON

Practice Setting	Error Rate	Projected Cost	% of Total
PTIP	15.2%	\$386M	1.3%
OTIP	16.0%	\$38M	0.1%
ORF	5.8%	\$39M	0.1%



# IMPROPER PAYMENT RATE COMPARISON

Overall Error Rate: 7.3%

Practice Setting	Error Rate	Projected Cost	% of Total
PTIP	15.2%	\$386M	1.3%
OTIP	16.0%	\$38M	0.1%
ORF	5.8%	\$39M	0.1%



# OVERPAYMENT RATES BY CODE

Part B Services (HCPCS Codes)	Claims Reviewed	Lines Reviewed	Sample Dollars Overpaid	Total Sample Dollars Paid	Projected Dollars Overpaid	Overpayment Rate
All Codes With Less Than 30 Claims	4,996	8,497	\$57,357	\$961,044	\$2,128,970,771	5.8%
Initial hospital care (99223)	685	686	\$31,867	\$132,362	\$432,620,087	24.0%
Office/outpatient visit est (99214)	483	483	\$2,189	\$47,369	\$404,796,293	4.7%
Subsequent hospital care (99233)	719	963	\$17,734	\$94,438	\$345,812,409	18.0%
Emergency dept visit (99285)	321	321	\$7,338	\$53,017	\$228,420,881	13.8%
Therapeutic exercises (97110)	304	320	\$2,448	\$13,741	\$202,697,906	17.5%
Office/outpatient visit new (99204)	313	313	\$6,773	\$45,697	\$200,369,057	15.0%

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# OVERPAYMENT FOR THERAPEUTIC EXERCISE - 97110

Initial hosper Over	paymer	nt Rate	<i>−</i> 17.5%		
Office/outpatient visit est (99214) Proje	cted Ov	verpaid	- \$202,6	97.906	4.7%
Emergence ARanks (99285)	s 6 <sup>th</sup> in	list of C	Overpaid	Codes	



# OVERPAYMENT RATES FOR MANUAL THERAPY - 97140

Part B Services (HCPCS Codes)	Claims Reviewed	Lines Reviewed	Sample Dollars Overpaid	Total Sample Dollars Paid	Projected Dollars Overpaid	Overpayment Rate
Initial hospital care (99222)	131	131	\$2,490	\$17,305	\$111,987,273	15.0%
Hospital discharge day (99239)	176	176	\$4,107	\$17,696	\$107,795,571	22.6%
Office/outpatient visit est (99215)	261	262	\$3,709	\$33,619	\$107,640,375	9.8%
Manual therapy 1/> regions (97140)	277	290	\$1,789	\$8,402	\$98,946,482	19.8%

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# OVERPAYMENT RATES FOR MANUAL THERAPY - 97140

Part B Services (HCPCS Codes)						
• Overp	aymen	l Rate	<b>- 19.8%</b>	\$17,305		
• Projec	ted Ov	erpaid	- \$98,94	46,482		
Office/outpatient visit		262				
Ranks	20 <sup>11</sup> in	list of	Overpa	id Code	\$98,946,482	

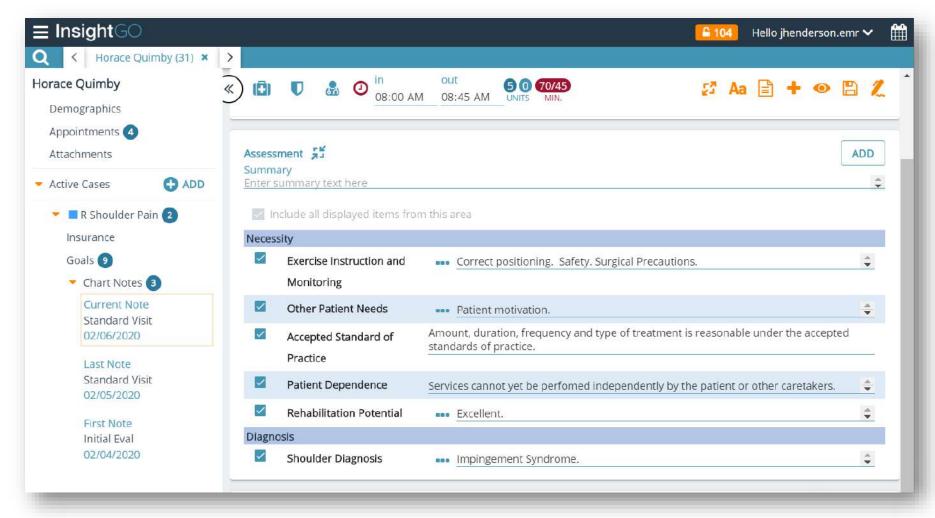


# FOUR MOST IMPORTANT DOCUMENTATION PRACTICES

Risk	Do	Don't
Medical Necessity	Be explicit. State <i>why</i> treatment is necessary and track goals	Don't assume someone else will intuitively understand the medical necessity of your treatment
Inconsistent Records	Make sure <i>descriptions</i> of services match the <i>intent</i> of the procedure code	Don't "chase codes"
Inconsistent Records	<i>Review</i> and <i>revise</i> documentation as necessary	Don't clone notes
Signature Problems	Use <i>signature lines.</i> Make sure all signatures are <i>dated</i> .	Don't accept illegible, undated signatures from anyone.



#### BE EXPLICIT ABOUT MEDICAL NECESSITY

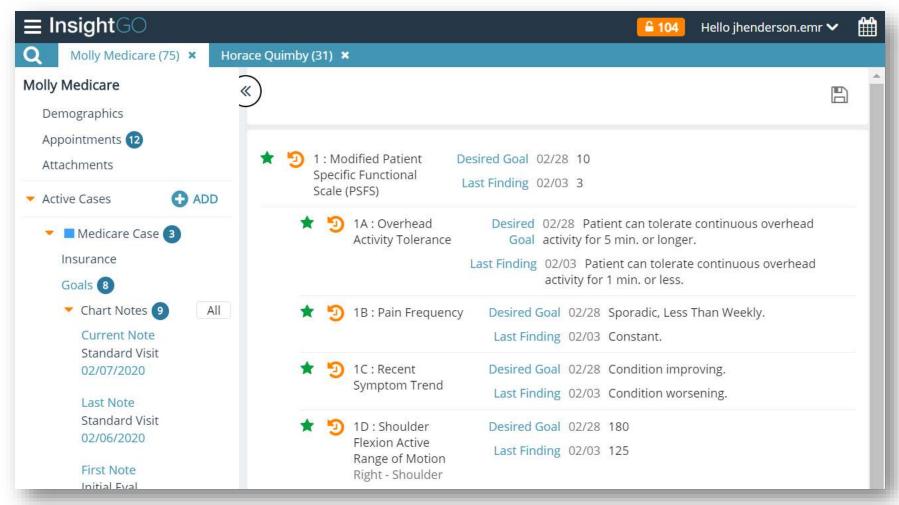


Medicare Benefits Policy Manual, Chapter 15

Section 220.2



#### TRACK GOALS

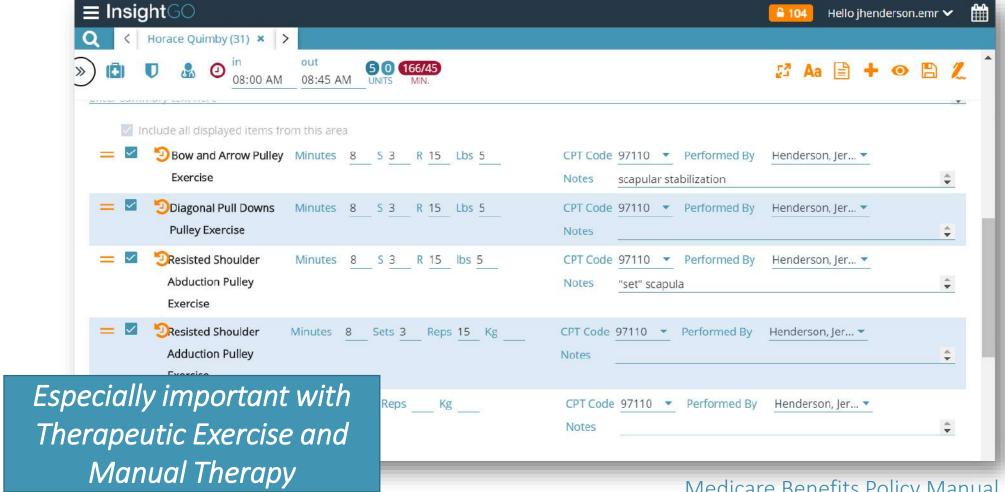


Medicare Benefits Policy Manual, Chapter 15

Section 220.3, page 190



#### COUPLE PROCEDURE DESCRIPTION TO CODE INTENT



Medicare Benefits Policy Manual, Chapter 15

Section 220.2

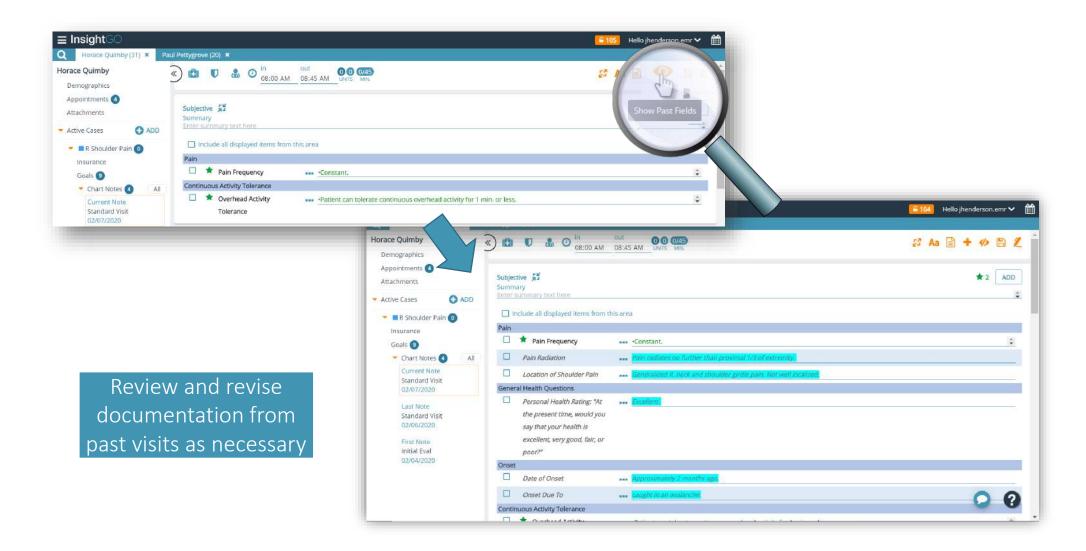


# REVIEW AND REVISE DOCUMENTATION AS NECESSARY





# TELL A STORY





# USE SIGNATURE LINES

Plan of Care Approval Thank you for this referral. We are required to obtain an		Please fax approval to (555) 555-5555		
approval of Horace's plan of care. You may approve the plan of care and make any changes to the plan of care by		Approval of the plan of care as documented		
commenting below. As always, please feel free to call us at (555) 555-5555 if you have any questions or concerns.		Plan of care is not approved. Ask patient to return to my office.		
Respectfully yours,		Approval of the plan of care with these changes:		
Jeng Housage	Sig	nature and Date:		
Electronically signed by: Jerry Henderson, PT 02/08/20 12:26 pm License: ID 12345678		Doogie Howser, MD		

#### IN A NUTSHELL...

- PTs and OTs in independent practice have high error rates
- PTIPs rank 5<sup>th</sup> overall in total improper payments
- "Insufficient Documentation" is our biggest risk
  - Establish Medical Necessity
  - Tell a Story
  - Eliminate Signature Problems
- Support Procedure Code Intent with Documentation
  - Special Caution with High Overpayment Codes (97110, 97140)



# QUESTIONS AND COMMENTS



# POLL QUESTION



