

#### WHO IS DENISE HELLE?

Denise Helle, CPOC (AOA credentialed) has over 20 years of billing and coding experience. She worked as a respiratory therapist for 15 years at the University of Iowa as a pediatric specialist. She then worked for 5 years at a rehabilitation billing company, worked for a major insurance company, and now works for Dr. DeAnn Fitzgerald managing vision and medical billing claims.

This is the third year that Denise Helle has provided a free seminar about billing and coding at the NORA conference. This year, Denise will teach attendees how to score their own notes to determine whether they meet billing requirements. She will provide insider secrets to maximizing insurance reimbursement and surviving insurance audits. Denise is also available for free one-on-one consultations during the conference.

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## SCORING FOR SUCCESS: CHARTING TIPS TO MAXIMIZE INSURANCE REIMBURSEMENT

Denise Helle, CPOC  
Powered by Dr. Fitzgerald & Associates  
denise.eyecare@gmail.com 319-366-3500

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### Disclaimer

- This presentation and discussion is a suggestion based on our experiences.
- Your state and insurance panels may be different.
- Make sure to do your own research and use this information as a guide.

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### Review

- Always Verify Insurance
  - Workers Comp
  - Car Accidents

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## ICD 10 DX codes

Here is just a sample of some of the most common diagnosis codes we use at our practice for our neuro patients.

F07.81 Post-concussion Syndrome

S06.0X0A Concussion First Visit

R27.8 Lack of Coordination

H53.40 Visual Field Defects

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## 97 codes

- In some states optometrists are able to bill 97 codes (go for it), yet some insurances refuse to pay them. You can even try using the GP modifier.
- If you are not sure, try billing on one patient, follow the claim and see how it pays out.
- In the state of Iowa, we do not get paid for 97 codes.
- Be careful, some states have paid 97 codes and now they will not.
- Are 3 modalities (97 codes), paying more than 99 codes—bill one find out.

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## CPT Codes used for new neuro evaluation patients

99205

99204

After the initial evaluation, you must think like a therapist, not an optometrist.

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## FEAR of Billing 99 code (False Evidence Appearing Real)

- E/M codes are billable as long as you have the documentation to support it.
- Think in ink. If you considered it, suspected it, reviewed it, discussed it, monitored it or ruled it out. Document it.
- Not documented not done. If it is not documented, even if everyone knows it was done, you cannot bill it.

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## Determine the Level of E/M

- Established patient E/M codes require 2 of 3 components.
- It is easier to get to a 99214 E/M code than most providers think, since it only requires moderate decision making.
- The 99214 does require a detailed history and detailed exam.
- In some cases, you will need use the testing you do to help support the level of E/M code you select. If you bill those tests as separate CPT codes, you may need to down-code your E/M if you no longer meet the requirements.

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### New Patient (Office or Outpatient) Coding Guide (3 of 3 required)

<b>99201</b> Straight-Forward	<b>History:</b> Chief Complaint & HPI 4 elements <b>Exam:</b> Limited exam of affected body area or organ system <b>Medical Decision Making:</b> Diagnosis, Management options minimal amount of complexity, straightforward
<b>99202</b> Low	<b>History:</b> Chief Complaint, HPI 4 elements and 2-9 ROS <b>Exam:</b> 2-4 body areas Limited exam of affected body area and other related system <b>Medical Decision Making:</b> Diagnosis, Management options minimal amount of complexity, straightforward
<b>99203</b> Extended	<b>History:</b> Chief Complaint, HPI 4 elements and 2-9 ROS, 1 PFSH <b>Exam:</b> 5-7 body areas Limited exam of affected body area and other related system <b>Medical Decision Making:</b> Diagnosis/management options limited amount/complexity low decision making
<b>99204</b> Moderate	<b>History:</b> Chief Complaint, HPI 4 elements and 10 ROS or more, 2 or 3 PFSH <b>Exam:</b> 8 or more systems <b>Medical Decision Making:</b> Diagnosis/management options multiple, moderate complexity and moderate risk
<b>99205</b> High	<b>History:</b> Chief Complaint, HPI 4 elements and 10 ROS or more, 2 or 3 PFSH <b>Exam:</b> 8 or more systems <b>Medical Decision Making:</b> Diagnosis/management options extensive amount/high & high risk

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### Established Office or Outpatient Coding Guide (2 of 3 required)

<b>99211</b> Straight-Forward	<b>History, Exam and Medical Decision Making:</b> No key elements required. Problem severity does not require physician presence, service is provided under physician's supervision
<b>99212</b> Low	<b>History:</b> Chief Complaint, 1-2 HPI elements <b>Exam:</b> Brief exam of affected body area <b>Medical Decision Making:</b> Diagnosis, Management options minimal amount of complexity, straightforward
<b>99213</b> Extended	<b>History:</b> Chief Complaint, HPI 1-3 elements and 1 ROS <b>Exam:</b> 2-4 body areas Limited exam of affected body area and other related system <b>Medical Decision Making:</b> Diagnosis/management options limited amount/complexity low decision making
<b>99214</b> Moderate	<b>History:</b> Chief Complaint, HPI 4 elements and 2-9 ROS <b>Exam:</b> 5-7 body areas <b>Medical Decision Making:</b> Diagnosis/management options multiple, moderate complexity and moderate risk
<b>99215</b> High	<b>History:</b> Chief Complaint, HPI 4 elements and 10 ROS or more, 2 or 3 PFSH, & 3 Past Medical history/Family history areas <b>Exam:</b> 8 or more systems <b>Medical Decision Making:</b> Diagnosis/management options extensive amount/high & high risk

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## E/M Code Selection

Select the E/M code based on selection of level of history, examination, and medical decision making:

History	Problem focused	Expanded problem focused	Expanded problem focused	Detailed	Comprehensive
Examination	Problem focused	Expanded problem focused	Expanded problem focused	Detailed	Comprehensive
Medical Decision Making	Straightforward	Low complexity	Moderate complexity	Moderate complexity	High complexity
E/M Code	99211/5 min	99212/10 min	99213/15 min	99214/25 min	99215/40 min

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Right Eye is an eye tracking test that supports objective assessment of eye movement after stroke, concussion or any other acquired brain injury.

92545- Oscillating tracking test, with recording.  
 92060- Can now be used with their new report.

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- ImPACT assists qualified healthcare providers in the evaluation and management of concussion.
- 96120- Neuropsychological testing, administered by a computer, with qualified health care professional interpretation and report.

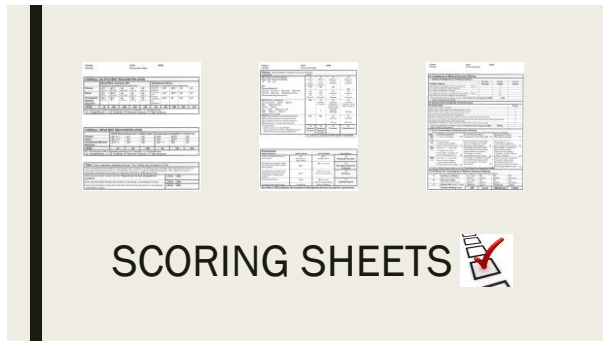
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## Audit

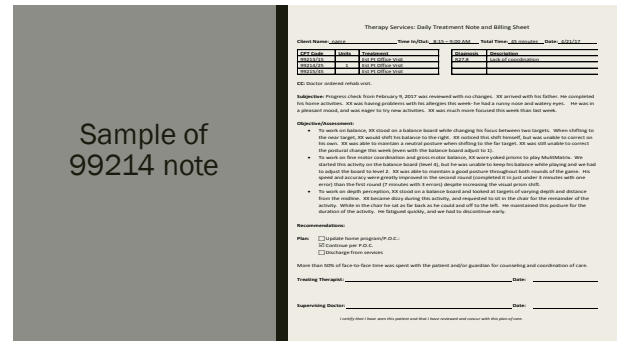
- Audit is a word that should not be feared.
- Insurance companies want to pay, but they want the combination of coding and documentation to verify what was done.

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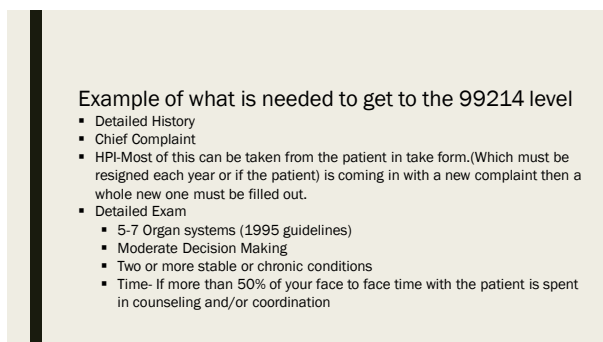




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