

Billing Workgroup Newsletter

April 2022

The Billing Workgroup is a newly formed initiative to help improve billing across the organization. We will look at helping everyone improve and understand how to code for office visits, procedures, and utilize counseling codes for services provided.

This is the first of a quarterly newsletter that will focus on helpful tidbits for billing.

Did you know that if you complete your documentation on the same day, or at least complete the billing on the same day, you are more likely to accurately capture the billing? If you wait and close out your note later you are more likely to under code a visit.

It's April which means seasonal allergies, flu, strep, and Covid are all being seen in the clinics.

Here is an example of a 99214 that you likely will "encounter:"

A 30 y/o patient is seen in the respiratory clinic with 3 days of a mild tactile fever, sore throat with 6/10 pain, and a headache. No swollen glands. No specific cough, but sometimes coughs w/ allergies. They work in a daycare and are worried about strep. Although no confirmed Covid or strep contacts this patient works with toddlers/preschool age children. Has a history of mild seasonal allergies, otherwise they are healthy.

Exam well appearing adult in no acute distress. HEENT no tonsillar exudate, erythema, or enlargement, +post nasal drip, mild nasal congestion, negative for cervical lymphadenopathy. Neck supple, full range of motion. Heart and lung sounds are normal. No rash.

Diagnosis: Acute pharyngitis, likely caused by viral URI

- 3 Tests ordered: Covid swab, rapid strep, strep culture all negative
- Medication Management: Viscous lidocaine.

This is billed as a 99214.

Steven Esrick, Amy Gumprecht, Shersten Killip, & Julianne Tauscher