

BEST PRACTICE CATALOG

Project Title: **MEDICARE PART B (FEE FOR SERVICE) REIMBURSEMENT**

Function Category: PATIENT-FOCUSED ORGANIZATION STRUCTURES

Subcategory: **Improving Organization Performance** Heading: **Quality Improvement**

Key Word(s): **Medicare Reimbursement**

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Hospital: **Metropolitan State Hospital**

Purpose: To maximize Medicare Part B reimbursement of physician and psychologist services.

Brief Description: Metropolitan State Hospital was not maximizing billing for physicians' and psychologists' fee for services. The auditors from the Office of Inspector General came in December 1997, and identified that we were deficient in the area of billed services without supporting documentation and vice-versa. Our internal audits from Health Information Management Department and Utilization Review Department showed there were deficiencies in billing services. For example, the service provided was documented on the form but not supported with physician's progress note (PPN) or the PPN was documented properly but not reported on the form. Our audits also showed that codes were not used consistently by the physicians. Code "90801" was overused. Roger Crawford and Gary Namisnic from Client Financial Services audited our records in June, 1998 for Medicare eligible patients to determine compliance of Medicare reporting for physician services at Metropolitan. Overall, there was 70% compliance.

Selection Basis/Criteria:

The following items are available regarding this Best Practice:

Photographs Video Tape Drawings Manual

Other : _____

DATE SUBMITTED: **October 13, 1998**

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