Webinar Audio

- To hear the webinar audio, you **must** call in to the conference line on the phone.

- Here is the call-in info:
  - 1-888-585-9008
  - Conference Room Number 527 770 938 #
Who We Are

Russ Evans, RN
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Group B (Clinical + Payment) Liaison

Katie Rukes
krukes@iupui.edu
Group A (Payment Only) Liaison
What we will cover today

- How CMS is encouraging self auditing
- Review of the OPTIMISTIC self-audit tool
- Billing Scenarios to help you succeed!
Self-Audits
CMS is encouraging Self Audits

- Audit results compared between the national projects by CMS
- CMS is committed to improving audit results
- A Self-Audit will prepare you for the CMS guided chart review
  - Can improve number of claims met
# Self-Audit Tool

www.optimistic-care.org/tools/general-project -&gt; Certification Audit Tool

<table>
<thead>
<tr>
<th>Resident Name</th>
<th>Condition</th>
<th>CIC Date</th>
<th>Certification Date</th>
<th>days to cert</th>
<th>Billing Start Date</th>
<th>Billing End Date</th>
<th>Length of Cert</th>
<th>Change in Condition Note in chart?</th>
<th>Provider Note in Chart?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pneumonia</td>
<td>1/1/2018</td>
<td>1/2/2018</td>
<td>1</td>
<td>1/1/2018</td>
<td>1/6/2018</td>
<td>6</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>CHF</td>
<td>1/2/2018</td>
<td>1/5/2018</td>
<td>3</td>
<td>1/2/2018</td>
<td>1/8/2018</td>
<td>7</td>
<td>no</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Pneumonia</td>
<td>1/3/2018</td>
<td>1/3/2018</td>
<td>0</td>
<td>1/3/2018</td>
<td>1/10/2018</td>
<td>8</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td></td>
<td>Skin Infection</td>
<td>1/4/2018</td>
<td>1/6/2018</td>
<td>2</td>
<td>1/4/2018</td>
<td>1/10/2018</td>
<td>7</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td></td>
<td>CHF</td>
<td>1/6/2018</td>
<td>1/7/2018</td>
<td>1</td>
<td>1/6/2018</td>
<td>1/11/2018</td>
<td>6</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td></td>
<td>COPD</td>
<td>1/7/2018</td>
<td>1/8/2018</td>
<td>1</td>
<td>1/7/2018</td>
<td>1/13/2018</td>
<td>7</td>
<td>no</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Dehydration</td>
<td>1/6/2018</td>
<td>1/7/2018</td>
<td>1</td>
<td>1/6/2018</td>
<td>1/11/2018</td>
<td>6</td>
<td>no</td>
<td>yes</td>
</tr>
</tbody>
</table>
How do I use the self-audit tool?

- Anything that is red is bad
- Contains drop downs and easy to use formatting
- Suggest you audit 10 previous certifications
- Only use documentation found in the medical chart!
How do I interpret the results?

- Pay close attention to timing
  - Days taken to certify
  - Average length of certification
  - Billing dates

- All documentation needs to be 100%

- Identify when your nurses stop documenting
How do I resolve systemic issues?

- **Timing Issues**
  - Make sure providers are seeing patients in person and ON TIME
  - Review dates before submitting for billing

- **Documentation**
  - Make sure providers are putting a note IN THE MEDICAL RECORD
  - Review CIC note and Provider Note in morning meeting

- **Nursing Documentation Trend**
  - Instruct the nurses to put in a note on the patient EVERY DAY
  - Ensure nurses are referencing the certification diagnosis
Billing Scenarios
Scenario #1

- Nursing staff documented a change in condition for Mrs. Smith on January 1st, and began providing enhanced monitoring and care
- The provider, Dr. X, visited on January 4th
  - Dr. X confirmed and documented that Mrs. Smith met the clinical criteria for Pneumonia
- Nursing staff documented in chart on January 4th, 5th, and 7th
- On January 8th, Mrs. Smith’s pneumonia resolved
- The billing office billed the G9679 code for the dates of January 1st - January 7th

Discussion: What issues are there with this certification?
## Scenario #1 - What are the issues?

<table>
<thead>
<tr>
<th>Resident Name</th>
<th>Condition</th>
<th>CIC Date</th>
<th>Certification Date</th>
<th>days to cert</th>
<th>Billing Start Date</th>
<th>Billing End Date</th>
<th>Length of Cert</th>
<th>Change in Condition Note in chart?</th>
<th>Provider Note in Chart?</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Day 6</th>
<th>Day 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mrs. Smith</td>
<td>Pneumonia</td>
<td>1/1/2019</td>
<td>1/4/2019</td>
<td>3</td>
<td>1/1/2019</td>
<td>1/7/2019</td>
<td>7</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
<td>no</td>
<td>yes</td>
<td>no</td>
<td>yes</td>
<td>no</td>
<td>yes</td>
</tr>
</tbody>
</table>

- Because the provider visited outside the 2 day window, the facility **must** start billing on the date of the provider visit (January 4th).
- Missing nursing documentation on Day 2, 3, and 6

**Discussion:** Would you bill for this episode?
BEST PRACTICE: If provider certifies CIC within this window, the facility begins billing back to the date of the CIC (Day 1).

If provider certifies CIC within this window, the facility begins billing on the date of the provider visit (either Day 4 or Day 5).

Provider cannot certify CIC – new CIC must be documented and process starts over.

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Day 6</th>
<th>Day 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Change in Condition identified</td>
<td></td>
<td>• Provider must certify by 11:59pm</td>
<td></td>
<td>• Provider must certify by 11:59pm</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Scenario #2

- Nursing staff documented a change in condition for Mr. Jones on March 15th, and began providing enhanced monitoring and care.
- The NP visited the following day and confirmed Mr. Jones met criteria for CHF.
- His condition showed improvement on March 19th.
- Nursing staff continued to monitor until March 21st and documented every day in the chart.

Discussion:
What are the correct billing dates for this certification?
Scenario #2: Answer

- What are the correct billing dates for this certification?

- Although the resident’s condition showed improvement on the 19th, because enhanced care (i.e. monitoring) was provided until the 21st, the facility may bill for the 7 day maximum from March 15th- March 21st.
Other Billing Reminders

- Provider certification window is 2 days, NOT 48 hours

- For UTIs
  - The certification date is the date of the PROVIDER IN-PERSON visit, NOT the date the labs come back
  - If UTI is certified within the 2 day window, but the labs come back AFTER the 2 day window, you STILL BILL ON THE DATE OF CIC

- Residents are meeting criteria for COPD/ CHF, but facilities/providers are not considering certification
Questions?
Upcoming Events/ Reminders

- We will be talking about use of the audit tool during our May engagement calls

- OPTIMISTIC Advisory Board Meeting
  - Tonight, 5:30pm, Regenstrief Institute, Indianapolis

- RTI surveys/ on-site meetings
  - Telephone interviews March - June
  - Site visits August & September
    - Save-the-dates will be sent out soon