

Eli's Rehab Report

Reimbursement: 5 Tips to Bill PT and Avoid OIG Audits

Use these expert tips to secure payment and stay out of the **U.S. HHS Office of the Inspector General's** (OIG's) crosshairs. Proper documentation, applying your clinical judgement, and familiarizing yourself with current codes should be your predominant medical objective. Fortunately, there are several things in addition to the basics that your physical therapy practice can and should do to avoid OIG scrutiny.

- **1. Utilize a comprehensive, certified electronic health record** (EHR) that is up-to-date with the new ICD-10 codes, imbibed with physical therapy know-how, and is easy for you and your staff to operate. This will help keep your practice in compliance, make documentation easier, and also, aid in the delivery of patient information and care.
- **2. Keep your notes clear and concise** using descriptive language and outlines, ensuring that they support the treatment that was suggested and administered. Strong defensible documentation proves and explains how you came to your conclusions and kept your billing in compliance with Medicare standards. You can always refer back to good notes that show you followed the law and that the treatment was justified.
- **3. Communicate with both your clinical and administrative staff** [] it's just that simple. Savvy practices maintain a practice plan and encourage questions and dialogue about governmental policies, patient rights, and proper billing. An organized practice avoids using medical or coding abbreviations and constantly re-educates staff on new laws, procedures, and technologies.
- **4. Pay attention to Medicare minutiae, language, and time requirements when billing.** For example, 97110 (Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility) requires that a physician or physical therapist be there providing "direct (one-on-one) patient contact" during the treatment, is reported in 15-minute increments, and requires an understanding of state provider rules on who can actually bill for the care.
- **5. Don't underestimate the importance of your professional integrity** as a provider of medical care. As Medicare ushers in a new era of patient care with the implementation of statutes through MACRA, the onus will be on providers to get with the program. If Part B payments become dependent on adapting to these new standards of performance and care, now is the time to familiarize yourself with new codes, policies, and procedures that put the patient first.

Resources: For a link to the OIG report A-04-15-07055, visit <u>go.usa.gov/cu8EP</u>. For more information on Defensible Documentation, visit WebPT at <u>www.webpt.com/blog/post/what-is-defensible-documentation-and-why-does-it-matter</u>. For a breakdown of mandates, links, and physical therapy education and information, visit the APTA's Center for Integrity in Practice at <u>integrity.apta.org/home.aspx</u>.