

Review of Systems... Reminder

The Medicare 1995 and 1997 Documentation Guidelines require that references to other documentation for the ROS and the Past Medical, Family, and social History (PFSH) note the date and location of that documentation (see below):

“A ROS and/or a PFSH obtained during an earlier encounter do not need to be re-recorded if there is evidence that the physician reviewed and updated the previous information. This may occur when a physician updates his or her own record or in an institutional setting or group practice where many physicians use a

common record. The review and update may be documented by:

- Describing any new ROS and/or PFSH information or noting there has been no change in the information; and
- Noting the date and location of the earlier ROS and/or PFSH.

Without documenting the date of the “review of systems sheet,” the ROS documentation does not meet the “noting the date” requirement. ■

Inside this Issue:

<i>Review of Systems... Reminder</i>	1
<i>Hospice Service</i>	1
<i>Temporary Pay Fix</i>	1
<i>Simple or Intermediate Wound Closures</i>	2

Hospice Services

Providers who are not employed by or under a financial arrangement with the hospice may bill Medicare Part B, with the appropriate modifiers, when seeing the patient for reasons other than the hospice care. The modifiers are:

GV—Attending physician not employed or paid under agreement by

the patient's hospice provider.

GW—Service not related to the hospice patient's terminal condition.

If the ED service is hospice related, the claim will be sent to the Hospice. Documenting whether the ED service is hospice or not related, effects where the claim is sent. ■

Temporary Pay Fix

The 21.29% cut to Medicare payments has been delayed until March 1, 2010. Congress passed a two-

month pay fix with the hope legislation will be drafted for a permanent fix by March 1. ■

Simple or Intermediate Wound Closures

Separately documenting simple vs. intermediate closure can effect your reimbursement significantly.

A wound closure is a simple repair if the procedure:

- Is a single-layer closure involving the epidermis, dermis, or subcutaneous tissues; and
- Does not involve deeper structures

Intermediate repair should be reported by:

- document the anatomical level, with depth, (ie. involved the superficial fascia (non-muscle),
- layered closure or
- extensive debridement or removal of particulate matter. ■