

THE CODING NETWORK, LLC
Confidential Coding Review For
 ----- **Cardiology Associates, P.C.**



Patient	Physician	Original RBRVU	TCN's RBRVU	Difference in RBRVU	Unbundled	Missed Procedure	Billed but Not Done or Documented	Wrong Code	Modifiers	Ordering or Pairing	Documentation Deficiency	DX
1	A	41.55	38.91	2.64			1			1		3
2	A	71.53	41.41	30.12	9	1		3		2	1	4
3	A	67.45	44.67	22.78	5				2	1		2
4	B	47.11	44.99	2.12	1					1	1	4
5	B	33.33	25.14	8.19	4				1	1		3
6	B	11.48	11.48	0.00						1		5
7	C	27.94	21.92	6.02	3				1	1		3
8	C	35.40	35.40	0.00					1	1		3
9	C	37.71	34.35	3.36			2			1		3
10	D	60.56	61.22	-2.10	2	1			3	1	1	2
Totals					24	2	3	3	8	11	3	32

Positive Difference in RBRVU means original coding overvalued the case.

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Patient: 1	Date of Service: 06.26.2007	Physician: XXXXXXXX, MD																																																
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Original Coding</th> <th style="text-align: right; border-bottom: 1px solid black;">RVU's</th> </tr> </thead> <tbody> <tr><td>93510-26.....</td><td style="text-align: right;">6.84</td></tr> <tr><td>93543</td><td style="text-align: right;">0.42</td></tr> <tr><td>93545</td><td style="text-align: right;">0.59</td></tr> <tr><td>93539</td><td style="text-align: right;">0.59</td></tr> <tr><td>93540</td><td style="text-align: right;">0.63</td></tr> <tr><td>93555-26-59.....</td><td style="text-align: right;">1.19</td></tr> <tr><td>93556-26-59.....</td><td style="text-align: right;">1.22</td></tr> <tr><td>92980-LC.....</td><td style="text-align: right;">22.50</td></tr> <tr><td>92978-26.....</td><td style="text-align: right;">2.64</td></tr> <tr><td>92973</td><td style="text-align: right;">4.93</td></tr> <tr> <td>Total</td> <td style="text-align: right;">41.55</td> </tr> </tbody> </table>	Original Coding	RVU's	93510-26.....	6.84	93543	0.42	93545	0.59	93539	0.59	93540	0.63	93555-26-59.....	1.19	93556-26-59.....	1.22	92980-LC.....	22.50	92978-26.....	2.64	92973	4.93	Total	41.55	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">The Coding Network Coding</th> <th style="text-align: right; border-bottom: 1px solid black;">RVU's</th> </tr> </thead> <tbody> <tr><td>92980-LC</td><td style="text-align: right;">22.50</td></tr> <tr><td>93510-26</td><td style="text-align: right;">6.84</td></tr> <tr><td>92973</td><td style="text-align: right;">4.93</td></tr> <tr><td>93556-26-59</td><td style="text-align: right;">1.22</td></tr> <tr><td>93555-26-59</td><td style="text-align: right;">1.19</td></tr> <tr><td>93540</td><td style="text-align: right;">0.63</td></tr> <tr><td>93545</td><td style="text-align: right;">0.59</td></tr> <tr><td>93539</td><td style="text-align: right;">0.59</td></tr> <tr><td>93543</td><td style="text-align: right;">0.42</td></tr> <tr> <td>Total</td> <td style="text-align: right;">38.91</td> </tr> <tr> <td><i>Difference.....</i></td> <td style="text-align: right;"><i>+2.64 upcoded</i></td> </tr> </tbody> </table>	The Coding Network Coding	RVU's	92980-LC	22.50	93510-26	6.84	92973	4.93	93556-26-59	1.22	93555-26-59	1.19	93540	0.63	93545	0.59	93539	0.59	93543	0.42	Total	38.91	<i>Difference.....</i>	<i>+2.64 upcoded</i>	<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> Billed but Not Documented: Intravascular ultrasound of the coronary vessel, 92978, was not documented. Order: Claims should be submitted in RVU order to optimize reimbursement.
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<p style="text-align: center;"><u>Diagnoses</u></p> <p>410.01 AMI of anterolateral wall, initial episode of care</p> <p>414.01 Atherosclerosis, native coronary artery</p> <p>401.1 Hypertension, benign</p> <p>593.9 Acute renal insufficiency</p>	<p style="text-align: center;"><u>Diagnoses</u></p> <p>410.71 NSTEMI</p> <p>414.01 Atherosclerosis, native coronary artery</p> <p>414.02 Atherosclerosis, venous bypass graft</p> <p>593.9 Acute renal insufficiency</p>	<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> Wrong Diagnosis x 2: The diagnosis for non-ST elevation MI is 410.71. Hypertension, 401.1, is not documented in this report. Missing Diagnosis: Stenosis of the bypass graft, 414.02, should also be reported. 																																																

Patient: 2	Date of Service: 06.14.2007	Physician: XXXXXXXX, MD
<u>Original Coding RVU's</u> 93544..... 0.37 75630-26..... 2.54 75716-26..... 1.82 35472..... 10.23 75966-26..... 1.86 37205..... 12.64 75964-26..... 0.51 37206-59..... 5.89 75960-26-59..... 1.16 37250..... 3.08 75945-26..... 0.58 37251..... 2.33 75946-26..... 0.59 37251-59..... 2.33 75946-26-59..... 0.59 75960-26..... 0.59 93539..... 0.59 35473..... 8.97 37206..... 5.89 75960-26..... 0.59 35473-59..... 8.97 Total71.53	<u>TCN RVU's</u> 37205.....12.64 75960-26.....1.16 35473-51.....8.97 75962-26.....0.75 37206.....5.89 75960-26-59.....1.16 36200.....4.26 37250.....3.08 75945-26.....0.58 37251.....2.33 75946-26.....0.59 Total.....41.41 <i>Difference+30.12 upcoded</i>	<u>Discussion</u> <ul style="list-style-type: none"> • Unbundled x 9: Diagnostic angiography, 75630 and 75716, is included in the planned procedure. A lesion at the junction of two arteries should be treated as one vessel. Procedure codes 35473, 37206 and 75960, 37251 and 75946 should not be reported multiple times. Angioplasty, 35472 and 75966, performed to deploy a stent, 37205, should not be reported separately. • Missed Procedure: The catheter placement, 36200, should also be billed. • Wrong Code x 3: Procedure codes 93539 and 93544 are for injections performed with a cardiac catheterization and should not be reported on this claim. Procedure code 75964 should be billed for radiological supervision of a subsequent vessel. The code should have been 75962 for the initial vessel. • Order: Claims should be submitted in RVU order to optimize reimbursement. • Pairing: Surgical codes should be linked to the corresponding radiological code. • Documentation Deficiency: The left internal mammary angiography does not make sense in the context of this note. The physician should confirm this was performed.
<u>Diagnoses</u> 443.9 424.1 401.1 425.4	<u>Diagnoses</u> 440.0 440.20	<u>Discussion</u> <ul style="list-style-type: none"> • Wrong Diagnosis x 4: Peripheral vascular disease, 443.9, is not as specific as 440.0 and 440.20. Aortic valve disorder, 424.1, hypertension, 401.1, and cardiomyopathy, 425.4, are not documented.

Patient: 3	Date of Service: 04.02.2007	Physician: XXXXXXXX, MD																																								
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Patient: 4	Date of Service: 03.08.2007	Physician: XXXXXXXX, MD																																																								
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<p style="text-align: center;"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native coronary artery</p> <p>413.9 Angina</p> <p>401.1 Hypertension, benign</p> <p>250.00 Diabetes mellitus</p>	<p style="text-align: center;"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native coronary artery</p> <p>414.02 Atherosclerosis, venous bypass graft</p>	<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> • Missing Diagnosis: Stenosis of the bypass graft should be reported with diagnosis code 414.02. • Wrong Diagnosis x 3: Hypertension and diabetes, 401.1 and 250.00, were not documented in this report. Angina, 413.9, is included as a probable diagnosis and should not be reported. 																																																								

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 ----- Cardiology Associates, P.C.



Patient: 6	Date of Service: 01.26.2007	Physician: XXXXXXXX, MD																																										
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Patient: 7	Date of Service: 09.05.2006	Physician: XXXXXXXX, MD																				
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Confidential Coding Review For
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Patient: 8	Date of Service: 01.12.2007	Physician: XXXXXXXX, MD																																						
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Patient: 9	Date of Service: 01.29.2007	Physician: XXXXXXXX, MD																																																		
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Patient: 10	Date of Service: 03.08.2007	Physician: XXXXXXXX, MD																																																		
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 Heart, P.S.
Summary



Patient	Physician	Original RBRVU	TCN's RBRVU	Difference in RBRVU	Unbundled	Missed Procedure	Billed but Not Documented	Wrong Code	Modifiers	Ordering or Pairing	Documentation Deficiency	DX
		31.02	27.65	3.37	1			2	2	1	1	1
		23.70	19.06	4.64	2			1	1		1	1
		59.84	59.84	0					1	1		
		59.84	59.84	0					1	1		
		76.66	40.38	36.28	2		3	1	2	1		1
		9.53	9.91	-0.38				1		1		1
		32.76	32.76	0					1			1
		27.54	27.54	0					1	1		1
		74.95	40.87	34.08	2	1	1	2	2	1		3
		10.26	10.26	0						1	1	2
Totals					7	1	4	7	11	8	3	11
Positive Difference in RBRVU means original coding overvalued the case.												

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Patient: E. XXXXXXX	Date of Service: 02.19.2007	Physician: 00000000, MD																			
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Patient: Gordon XXXXXXXX	Date of Service: 02.12.2007	Physician: 00000000, MD																										
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Patient: Debbie XXXXXXXX	Date of Service: 02.15.2007	Physician: 000000000, MD																														
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 Heart, P.S.



Patient: Irwin XXXXXXXX	Date of Service: 02.16.2007	Physician: 0000000, MD																																		
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Original Coding</th> <th style="text-align: right; border-bottom: 1px solid black;">RVU's</th> </tr> </thead> <tbody> <tr><td>93613-59.....</td><td style="text-align: right;">10.51</td></tr> <tr><td>93620-26-59.....</td><td style="text-align: right;">17.59</td></tr> <tr><td>93621-26-59.....</td><td style="text-align: right;">3.15</td></tr> <tr><td>93623-26-59.....</td><td style="text-align: right;">4.27</td></tr> <tr><td>93651.....</td><td style="text-align: right;">24.32</td></tr> <tr><td>93662-26.....</td><td style="text-align: right;">4.11</td></tr> <tr><td>93527-26-22-59.....</td><td style="text-align: right;">11.27</td></tr> <tr><td>36620-59.....</td><td style="text-align: right;">1.44</td></tr> <tr> <td>Total</td> <td style="text-align: right;">76.66</td> </tr> </tbody> </table>	Original Coding	RVU's	93613-59.....	10.51	93620-26-59.....	17.59	93621-26-59.....	3.15	93623-26-59.....	4.27	93651.....	24.32	93662-26.....	4.11	93527-26-22-59.....	11.27	36620-59.....	1.44	Total	76.66	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">TCN</th> <th style="text-align: right; border-bottom: 1px solid black;">RVU's</th> </tr> </thead> <tbody> <tr><td>93651-22.....</td><td style="text-align: right;">24.32</td></tr> <tr><td>93613.....</td><td style="text-align: right;">10.51</td></tr> <tr><td>93662-26.....</td><td style="text-align: right;">4.11</td></tr> <tr><td>36620.....</td><td style="text-align: right;">1.44</td></tr> <tr> <td>Total</td> <td style="text-align: right;">40.38</td> </tr> <tr> <td colspan="2"><i>Difference.... +36.28 upcoded</i></td> </tr> </tbody> </table>	TCN	RVU's	93651-22.....	24.32	93613.....	10.51	93662-26.....	4.11	36620.....	1.44	Total	40.38	<i>Difference.... +36.28 upcoded</i>		<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> • Unbundled: Procedure code 93527 is included in the ablation procedure, 93651. It is not correct to use this code to report a transeptal puncture as all elements of the service were not performed. • Billed but not done x 3: An EP study with induction of arrhythmia, 93620, 93621, and 93623 was not documented. Procedure codes 93621 and 93623 cannot be reported without the primary procedure 93620. • Wrong code & Unbundled: Left atrial pacing was not documented so the left atrial recording would be reported with code 93602. This would be included in 93651. • Modifiers x 2: The use of modifier -59 is not indicated for codes 93613, 93620, 93621, 93623, and 36620. There are no code combinations that would cause bundling. Modifier -22 should be appended to code 93651 to report the transeptal puncture. Modifier 22 should not be appended to code 93527. This code includes a transeptal puncture. • Order: Claims should be submitted in RVU order to optimize reimbursement.
Original Coding	RVU's																																			
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THE CODING NETWORK, LLC
Confidential Coding Review For
 Heart, P.S.



Patient: Jack XXXXXX	Date of Service: 02.19.2007	Physician: 00000000, MD																														
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<p align="center"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native vessel</p>	<p align="center"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native vessel 414.02 Atherosclerosis, vein graft</p>	<p align="center"><u>Discussion</u></p> <ul style="list-style-type: none"> • Missed diagnosis: Occlusion of the vein grafts, 414.02, should also be reported. 																														

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Confidential Coding Review For
 Heart, P.S.



Patient: Donald XXXXXXXX	Date of Service: 03.02.2007	Physician: 00000000, MD																																		
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<p style="text-align: center;"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native vessel</p> <p>413.9 Angina pectoris NEC</p>	<p style="text-align: center;"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native vessel</p>	<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> • Wrong diagnosis: Angina, 413.9, is not documented in this report. 																																		

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Confidential Coding Review For
 Heart, P.S.



Patient: John XXXXXXXX	Date of Service: 02.23.2007	Physician: 00000000, MD																																						
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<p style="text-align: center;"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native vessel 786.51 Precordial pain</p>	<p style="text-align: center;"><u>Diagnoses</u></p> <p>414.01 Atherosclerosis, native vessel</p>	<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> Wrong diagnosis: Precordial pain, 786.51, was not documented in this report. 																																						

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Confidential Coding Review For
 Heart, P.S.



Patient: P. XXXX	Date of Service: 12.12.2006	Physician: 0000000000, MD
<p><u>Original Coding RVU's</u></p> <p>93651..... 23.70 93662-26..... 4.00 93527-26-22-59 11.10 36620-59..... 1.45 93613-59..... 10.25 93620-26-59..... 17.22 93621-26-59..... 3.07 93623-26-59..... 4.16</p> <p>Total 74.95</p>	<p><u>TCN RVU's</u></p> <p>93651-22..... 23.70 93609-26..... 7.30 93610-26..... 4.42 93662-26..... 4.00 36620..... 1.45</p> <p>Total.....40.87</p> <p><i>Difference +34.08 upcoded</i></p>	<p><u>Discussion</u></p> <ul style="list-style-type: none"> • Unbundled: Procedure code 93527 is included in the ablation procedure, 93651. • Billed but not done: An EP study with induction of arrhythmia, 93620 was not documented. • Missed Procedure: Atrial pacing should be reported with code 93610. • Wrong Code: The mapping, 93609, was not described as 3D, 93613. • Wrong code & Unbundled: Left atrial recording would be reported with code 93602, not 93621. This is included in 93651. • Modifiers x 2: The use of modifier -59 is not indicated for codes 93613, 93620, 93621, 93623, and 36620. There are no code combinations that would cause bundling. Modifier -22 should be appended to code 93651 to report the transeptal puncture. Modifier 22 should not be appended to code 93527. This code includes a transeptal puncture. • Order: Claims should be submitted in RVU order to optimize reimbursement.
<p><u>Diagnoses</u></p> <p>427.31 Atrial fibrillation 420.90 Acute pericarditis NOS</p>	<p><u>Diagnoses</u></p> <p>427.31 Atrial fibrillation 428.0 CHF NOS 425.4 Cardiomyopathy NEC</p>	<p><u>Discussion</u></p> <ul style="list-style-type: none"> • Wrong diagnosis: Acute pericarditis, 420.90, was not documented in this report. • Missed diagnosis x 2: Additional diagnoses include CHF, 428.0, and cardiomyopathy, 425.4.

THE CODING NETWORK, LLC
Confidential Coding Review For
 Heart, P.S.



Patient: Patricia XXXXXXX	Date of Service: 02.20.2007	Physician: 00000000, MD																														
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<p style="text-align: center;"><u>Diagnoses</u></p> <p>786.51 Precordial pain 794.30 Abnormal function study, cardiovascular NOS</p>	<p style="text-align: center;"><u>Diagnoses</u></p> <p>786.50 Chest pain NOS 794.39 Abnormal stress test</p>	<p style="text-align: center;"><u>Discussion</u></p> <ul style="list-style-type: none"> Wrong diagnosis x 2: The chest pain, 786.50, was not described as precordial pain, 786.51. An abnormal thallium stress test is reported with 794.39, not 794.30. 																														