

THE CODING NETWORK, LLC
Confidential Coding Review For
 ----- **Podiatry Group, PC**



Patient: , Frank	Date of Service: 01/12/10	Physician:														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>Original Coding</u></td> <td style="text-align: right;">RVU's</td> </tr> <tr> <td>99203</td> <td style="text-align: right;">2.71</td> </tr> <tr> <td>Total</td> <td style="text-align: right;">2.71</td> </tr> </table>	<u>Original Coding</u>	RVU's	99203	2.71	Total	2.71	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>The Coding Network Coding</u></td> <td style="text-align: right;">RVU's</td> </tr> <tr> <td>99202</td> <td style="text-align: right;">1.87</td> </tr> <tr> <td>Total</td> <td style="text-align: right;">1.87</td> </tr> <tr> <td><i>Difference</i></td> <td style="text-align: right;"><i>+0.84 upcoded</i></td> </tr> </table>	<u>The Coding Network Coding</u>	RVU's	99202	1.87	Total	1.87	<i>Difference</i>	<i>+0.84 upcoded</i>	<u>Discussion</u> <ul style="list-style-type: none"> • Upcoded E&M: Documentation does not support CPT 99203. CPT 99203 requires a detailed history and exam and low complexity medical decision making. The history expanded problem focused based on the HPI. The exam was expanded problem focused based on the documentation of 2 organ systems. The complexity of medical decision making was low based on the complexity of data and overall risk. • <i>Evaluated using 1995 guidelines. The 1997 guidelines would have yielded a problem focused examination.</i>
<u>Original Coding</u>	RVU's															
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<i>Difference</i>	<i>+0.84 upcoded</i>															
<u>Diagnoses</u> 724.2 736.1	<u>Diagnoses</u> 719.46 736.1	<u>Discussion</u> <ul style="list-style-type: none"> • Incorrect Diagnosis: The medical record does not state back pain. Do not assign ICD 724.2. Assign ICD 719.46 for knee pain as indicated. • Documentation Deficiency: The medical record must support ICD codes submitted on claim forms. 														

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Patient: , Nancy	Date of Service: 01/13/10	Physician:														
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<u>Diagnoses</u> 703.0 991.2	<u>Diagnoses</u> 703.1 735.9	<u>Discussion</u> <ul style="list-style-type: none"> • Incorrect Diagnosis: The medical record does not state frostbite. Do not assign ICD 991.2 • Missed Diagnosis: The medical record states hallux of left toe. Assign ICD 735.9, acquired deformity of toe. (type of hallux was not documented). • Documentation Deficiency: The medical record must support ICD codes submitted on claim forms 														

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Patient: , Susan	Date of Service: 01/14/10	Physician:
<u>Original Coding</u> _____ RVU's 99203 2.71 Total 2.71	<u>The Coding Network Coding</u> _____ RVU's 99202 1.87 Total 1.87 <i>Difference +0.84 upcoded</i>	<u>Discussion</u> <ul style="list-style-type: none"> • Upcoded E&M: Documentation does not support CPT 99203. CPT 99203 requires a detailed history and exam and low complexity medical decision making. The history expanded problem focused based on the HPI and ROS. The exam was detailed. The complexity of medical decision making was low based on the complexity of data and overall risk. • <i>Evaluated using 1995 guidelines. The 1997 guidelines would have yielded a problem focused examination.</i>
<u>Diagnoses</u> 724.2 728.71 735.0 727.1	<u>Diagnoses</u> 735.0 727.1 724.2 728.71	<u>Discussion</u> <ul style="list-style-type: none"> • Correct

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Patient: , Beth	Date of Service: 12/30/09	Physician:
<u>Original Coding</u> _____ RVU's 99212.....1.03 Total1.03	<u>The Coding Network Coding</u> _____ RVU's 99212 1.03 Total 1.03 <i>Difference..... 0.00</i>	<u>Discussion</u> <ul style="list-style-type: none"> • Correct
<u>Diagnoses</u> 703.0	<u>Diagnoses</u> 703.0	<u>Discussion</u> <ul style="list-style-type: none"> • Correct

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Patient: , Debra	Date of Service: 12/01/09	Physician:														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>Original Coding</u></td> <td style="text-align: right;">RVU's</td> </tr> <tr> <td>99213.....</td> <td style="text-align: right;">1.70</td> </tr> <tr> <td>Total</td> <td style="text-align: right;">1.70</td> </tr> </table>	<u>Original Coding</u>	RVU's	99213.....	1.70	Total	1.70	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>The Coding Network Coding</u></td> <td style="text-align: right;">RVU's</td> </tr> <tr> <td>NA</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Total</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td colspan="2"><i>Difference..... + 1.70 upcoded</i></td> </tr> </table>	<u>The Coding Network Coding</u>	RVU's	NA	0.00	Total	0.00	<i>Difference..... + 1.70 upcoded</i>		<u>Discussion</u> <ul style="list-style-type: none"> • Billed but not supported: There is no indication that an E&M service was performed. There is only a procedure documented.
<u>Original Coding</u>	RVU's															
99213.....	1.70															
Total	1.70															
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NA	0.00															
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<u>Diagnoses</u> 728.71 729.5	<u>Diagnoses</u> NA	<u>Discussion</u> <ul style="list-style-type: none"> • Documentation Deficiency: There is no indication that an E&M services was performed to support the ICD codes. • Documentation Deficiency: The medical record must support ICD codes submitted on claim forms 														

