

## Part B Insider (Multispecialty) Coding Alert

### CONSULTS: Don't Let Poor Documentation Thwart Your Consult Reimbursement

#### 5 timely tips will help you avoid consult paybacks

The feds are coming to look into your consult billings, and you could find yourself in the hotseat.

**The problem:** The **HHS Office of Inspector General** found that 75 percent of all consults billed in 2001 had coding or documentation problems (see PBI, Vol. 7, No. 13). Problem areas include level-three consults billed as level-five consults, bad documentation, and office visits billed as consults. The OIG's report planted a red flag on all of your consult billings, and you can expect to see more scrutiny in the near future.

Luckily, there are painless ways to improve your consult documentation. The experts offer the following tips:

**1. Beware of vague statements.** Many doctors still believe that they can write something like "thank you for referring Mr. X to me," and that will document the request for a consult, says **Jim Collins** with the **Cardiology Coalition** in Matthews, NC. These statements could appear to be a transfer of care (i.e., a referral) instead of a consult.

**2. Use a standard form to confirm consult requests.** This "takes the pain out of making sure there is a documented request" for the consultation, notes consultant **Pati Trites**, founder and CEO of **Healthcare Compliance Resources** in Augusta, MI. It also helps document the reason for the consult. (She offers a sample letter; see following article.)

**3. Make sure the provider documents** everything he or she does--and doesn't document the things he or she doesn't do, Trites says.