

Part B Insider (Multispecialty) Coding Alert

Studies & Surveys: Don't Sell Yourself Short

Physicians systematically undercode their services, survey shows

Family doctors manage an average of 3.05 problems per encounter but only bill for 1.97 problems, according to a new survey.

A group of 29 physicians in the **Wisconsin Research Network** reported on encounters with 572 patients in a "physician problem log." The survey found the doctors were leaving out one of every three problems, on average, according to a paper called "How Many Problems Do Family Physicians Manage at Each Encounter" by **John Beasley** with the **University of Wisconsin Medical School**, published in the Annals of Family Medicine.

For patients older than 65, the physicians treated an average of 3.88 problems per visit and 4.60 problems per visit for diabetic patients. The doctors were especially likely to leave out diagnoses relating to mental health or substance abuse on their bills.

Additional Problems May Not Matter To Payers

Even if you manage to list three or four separate problems on a claim, there's no guarantee you'll get paid for multiple procedures or a higher level evaluation and management visit, say coders.

"Medicare in general only looks at the primary diagnosis," says **Rachel Mitchell**, a coder with **Applied Medical Services** in Durham, NC. She tells the coders she works with to bill the most important or serious problem first and then list other problems. "We always code everything that's on the note, but it's not essential," she adds.

If a physician ends up providing a lot of counseling to a patient on an issue such as obesity or a mental health or substance problem, the added time may not lead to more reimbursement, Mitchell says. The physician must spend at least 50 percent of the visit on counseling before he or she can bill for counseling and coordination of care based on time, she notes.

Fight Bundles By Providing Separate Diagnoses

If the physician provides multiple services to a patient in one encounter, he or she must list separate diagnoses, says **Ryan Price** with **Aviacode** in Salt Lake City, UT. If you're providing additional services but having them bundled with your E/M Codes, then you should "bill it and fight it," he urges providers. "The squeaky wheel will get paid."