



Orthopaedic Coding and Billing Rules 101

COA 2017 Resident Forum

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"Improving the Financial Health of the Practices we Serve."



Common Modifiers for Office Services

- -25 Modifier:
- -24 Modifier:
- -58 Modifier:



Common Modifiers for Surgery

- -51 Modifier:
- -59 Modifier:
- -22 Modifier:



RAC Audits

- Enacted in 2003, expanded to all states in 2010
- Recovery Audit Contractor
- Post payment Audits: Automated vs. Complex
- Data Mining = Inevitable Audits
- Documentation is the Key



RAC Prevention 101

- Documentation is your ally
- Avoid copy and paste documentation
- Know E&M coding requirements for Level 3 and 4
- Focus on MDM
- Medical Necessity matters - Clarify



E&M Documentation

- Chronological Order
- Detail HPI
- Template: Define/Name external documents like PSFH
- Detail MDM, may be templated for most common diagnoses.
- Template: ROS
- Template: PE, procedures, routine services
- Codeable diagnoses are important.



E&M Documentation

- [Example 1-Dictation](#)
- [Example 2-Template](#)
- [Example 3-Template](#)



Total Joints Medical Necessity

- Follow CMS's Medical Necessity Guidelines and you have met the requirements for all other carriers
 - Google “[MLN Matters Number: SE1236](#)”
 - Use this as your guide for:
 - H and P Document Template.
 - THR, TKR Op Report Templates.



Sample Templates

- [LT THA Template](#)
- [RT TKA Template](#)
- [Gold Standard Template](#)



Gold Standard Template

- Intra Operative Findings (Deviations from the norm)
- Medical Necessity for the assist/co-surgeon
- Complexity Indications
- Template the rest

Q and A

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