

Medical Report Title

Full Hospital Name Here

March 1, 2023



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Section 1: Executive Summary

High level observations and recommendations are as follows:

Key Observations:

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Key Recommendations:

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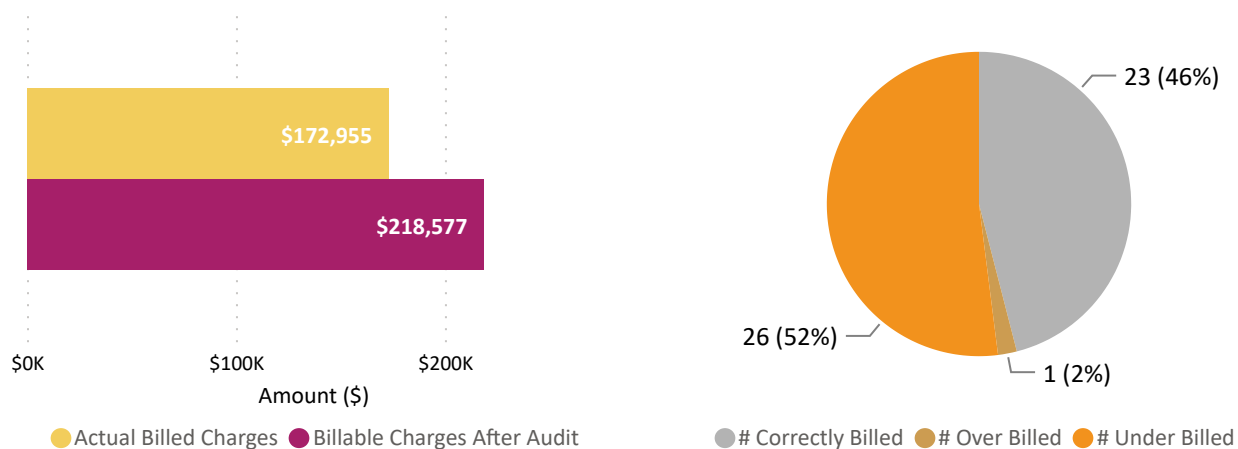
Emergency Department (OBED) Facility Level Accuracy Rate

The overall coding accuracy rate was 24%. See Appendix and correlating Full Hospital Name Here 50 samples – Supplemental Documentation (Excel) for detailed findings by patient chart. The net billing impact for the 50 charges in this audit sample utilizing the OBHG OBED Charge Level Worksheet is approximately \$45,621.88 in underbilling.

Diagnosis-related Observations

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Actual Billed Charges	Billable Charges After Audit	Total Over Billed	Total Under Billed	Net Under Billed
\$172,954.96	\$218,576.84	\$1,116.00	(\$46,748.00)	(\$45,621.88)



Section 2: Introduction

The Client engaged Full Hospital Name Here's (Short Name Here) leadership team as part of The Client's ongoing professional services to review Short Name Here's current OB Emergency Department (OBED) Charge Level Worksheet, as well as to conduct a sample audit of 50 OBED facility fee charges in order to provide recommendations around optimizing OBED documentation and charge capture processes. All findings and recommendations contained within this report are designed to provide general observations in line with The Client nationally benchmarked data and related experience. Ultimate charge capture policies, processes and documentation guidelines should be developed by Short Name Here in conjunction with appropriate compliance and billing guidance per Short Name Here's normal business operations.

The Client's assigned Compliance Medical Educator and Auditor completed a review of Short Name Here's OBED Charge Level Worksheet, reviewed documentation of medical records provided, and compared actual billed charges to charges deemed billable when utilizing The Client's OBED Charge Level Worksheet for patient visits randomly selected from the preceding year. The audited charges spanned dates of service from July 1, 2022 through July 28, 2022.

The Centers for Medicare and Medicaid Services (CMS) does not mandate a specific method or set of criteria for determining the correct outpatient facility visit code level. Facilities are therefore allowed the discretion to employ any industry or internal model for their billing of outpatient visit charges. However, CMS does recommend that facilities have a written internal policy, consistently applied, to guide their billing and charge capture process.

Short Name Here uses an intervention-based scoring tool for OBED services, provided by Change Healthcare. Short Name Here's OBED visit coding conformed to their tool, though some visits were coded as outpatient E/M services and did not conform to the tool.

¹ <https://www.cms.gov/Regulations-and-Guidance/Regulations-and-Policies/QuarterlyProviderUpdates/Downloads/cms1392fc.pdf>

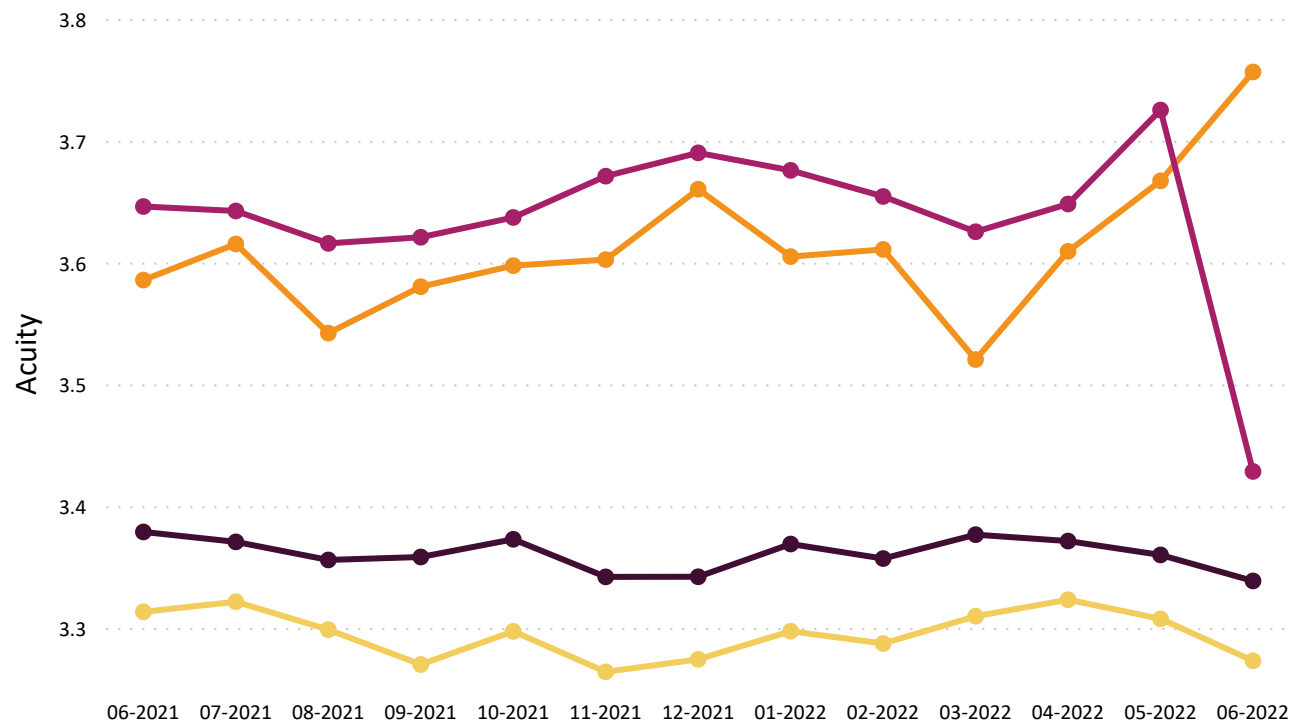
Section 3: The Client National Benchmark Data Comparison

The Client's current national footprint is comprised of approximately 250 hospital partners spanning over 20 states. More than 90% of The Client hospital partners have implemented and utilize and OBED Type A setting for the management of obstetrical patients. The Client reviewed Short Name Here's reported facility fee trends from June 2021 through June 2022. The results were as follows:

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	06-2021	07-2021	08-2021	09-2021	10-2021	11-2021	12-2021	01-2022	02-2022	03-2022	04-2022	05-2022	06-2022
Short Name Here - OBED Acuity, Facility	3.59	3.62	3.54	3.58	3.60	3.60	3.66	3.60	3.61	3.52	3.61	3.67	3.76
Short Name Here - OBED Acuity, Facility	3.31	3.32	3.30	3.27	3.30	3.26	3.27	3.30	3.29	3.31	3.32	3.31	3.27
All Programs - OBED Acuity, Facility	3.65	3.64	3.62	3.62	3.64	3.67	3.69	3.68	3.65	3.63	3.65	3.73	3.43
All Programs - OBED Acuity, Pro Fee	3.38	3.37	3.36	3.36	3.37	3.34	3.34	3.37	3.36	3.38	3.37	3.36	3.34

OBED Acuity - Facility & Professional Trends



Section 4: Facility Fee Chart Review Scope

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Scope of Work – Outpatient Coding Compliance Review

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Facility Review Source References

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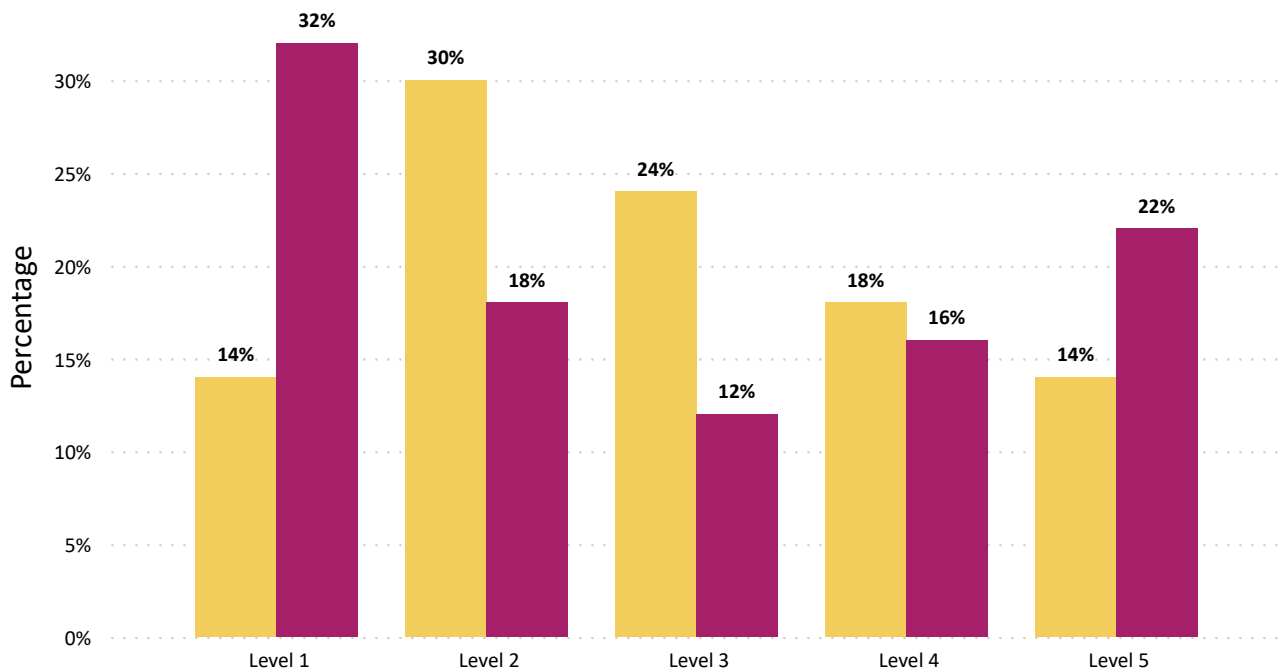
Section 5: OBED Facility Fee Findings and Recommendations

Chart Review Results Overview

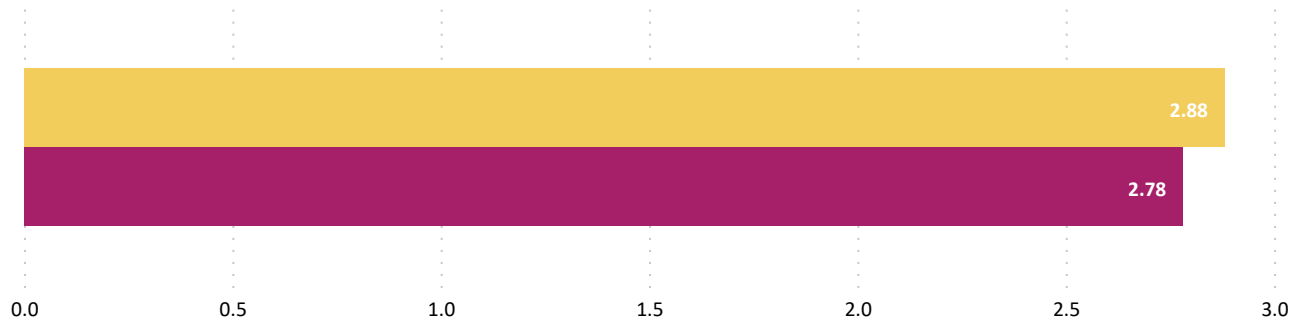
As previously outlined in the Executive Summary, The Client believes that Short Name Here has an opportunity to enhance its OBED charge level assignment to appropriately provide additional diagnosis and complaints not currently available yet reflected in the medical record documentation. All fifty (50) OBED patient charts were reviewed for the documentation available in the medical record, and then audited utilizing both Short Name Here's OBED Coding Summaries as well as The Client's OBED Charge Level Worksheet. Below outlines the relative facility fee distribution utilizing the two different methods, as well as average pre and post audit average acuity.

	Level 1	Level 2	Level 3	Level 4	Level 5
Per Coding Summary (Reported)	7	15	12	9	7
Per The Client Audit (Audited)	16	9	6	8	11

Reported vs. Audited OBED

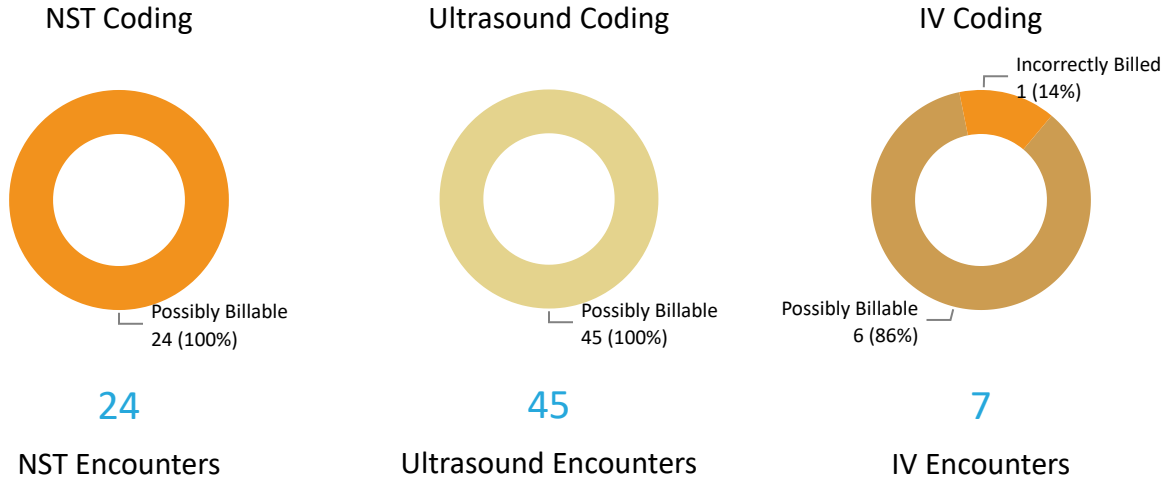


Reported vs. Audited OBED Average Acuity Score



Ancillary Service Findings

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Other Coding Observations

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Additional Observations

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Appendix

OBED Charge Level Worksheet (Valued October 2020)

Level 1 - Lowest Level Visit (CPT 99281)	
<input type="checkbox"/> Evaluation of membrane rupture	<input type="checkbox"/> Rx refill only, non-narcotic
<input type="checkbox"/> Scheduled f/u visit, no further care required	<input type="checkbox"/> Suture removal, no complications, no further care required
<input type="checkbox"/> Initial nursing assessment/measurement	<input type="checkbox"/> Wound check, no further care required
<input type="checkbox"/> Note for school/work	<input type="checkbox"/> Discharge instructions, straightforward
Level 2 - Low Level Visit (CPT 99282)	
<input type="checkbox"/> Administration of oral, topical, rectal, PR, NG, or SL medications (non-narcotic)	<input type="checkbox"/> Oxygen administration & adjustment
<input type="checkbox"/> Assistance with fecal impaction	<input type="checkbox"/> Rash
<input type="checkbox"/> Fetal heart tones - doppler check	<input type="checkbox"/> Suture removal, complicated or infected, may require f/u care
<input type="checkbox"/> Frequent monitoring-minimum of 3 sets of vital signs	<input type="checkbox"/> Test by OBED staff (urine dipstick, Accucheck, etc)
<input type="checkbox"/> Obtain clean catch urine	<input type="checkbox"/> Discharge instructions, simple
Level 3 - Mid Level Visit (CPT 99283)	
<input type="checkbox"/> 1 diagnostic test (labs, EKG, x-ray, excludes urine dipstick & accucheck)	<input type="checkbox"/> Minor bleeding, vaginal
<input type="checkbox"/> Electronic fetal monitoring, <1 hour (ex: decelerations)	<input type="checkbox"/> IM/SQ medication given, monitoring patient response (ex: Rhogam)
<input type="checkbox"/> Continuous ongoing nursing assessments by at least 3 sets of vital signs and other assessments integral to current interventions and/or the patient's condition (ex: assessment of CV, pulmonary or neuro status, assessment of pain scale or pulse oximetry)	<input type="checkbox"/> Minor MVA or fall, no complications, minimal impact accident (only 1 treatment, lab, or x-ray)
<input type="checkbox"/> Mental health anxious - simple treatment, not admitted	<input type="checkbox"/> SOB/dyspnea, minimal
<input type="checkbox"/> Assist MD with minor procedure (ex: I&D, FB removal)	<input type="checkbox"/> No prenatal care
<input type="checkbox"/> Oral hydration (ex: emesis)	<input type="checkbox"/> Language barrier (ex: translation services needed)
<input type="checkbox"/> Arrangements and/or social services intervention (includes required reporting)	<input type="checkbox"/> Pre-hospital delivery
<input type="checkbox"/> Scheduling & coordination of ancillary services (ex: RT)	<input type="checkbox"/> Arrives via EMS/Ambulance
	<input type="checkbox"/> Dispensing narcotic prescription
	<input type="checkbox"/> Fever >101 (need not be present in OBED, must include degree in documentation)
	<input type="checkbox"/> Discharge instructions, moderate complexity
	<input type="checkbox"/> Catherizations; Foley or In/Out (straight)
Level 4 - High Level Visit (CPT 99284)	
<input type="checkbox"/> 2 diagnostic tests (labs, EKG, x-ray)	<input type="checkbox"/> Delivery of placenta
<input type="checkbox"/> Electronic fetal monitoring, >1 hour	<input type="checkbox"/> Preparation for standard admission or observation
<input type="checkbox"/> Frequent vital signs monitoring - minimum of 4 sets	<input type="checkbox"/> Sexual assault exam w/o specimen collection
<input type="checkbox"/> Assist MD with complicated or multiple procedures	<input type="checkbox"/> Arrangements and/or social services intervention (includes required reporting) (Includes concerns of abuse/neglect, victims of violence & reporting to law enforcement-extended SW involvement)
<input type="checkbox"/> Pelvic exam by MD	<input type="checkbox"/> Assessment, crisis intervention & supervision of imminent behavioral crisis threatening self or others
<input type="checkbox"/> Pre-eclampsia (mild/moderate)	<input type="checkbox"/> Discharge instructions, complex
<input type="checkbox"/> Admin/monitoring of IV hydration or medication (ex: hyperemesis)	
<input type="checkbox"/> Preparation for special imaging study (ex: US, CT, MRI)	
<input type="checkbox"/> Seizures	
Level 5 - Highest Level Visit (CPT 99285)	
Critical care time is less than 30 minutes.	
<input type="checkbox"/> Core temperature interventions	<input type="checkbox"/> Abdominal trauma workup-pregnancy related
<input type="checkbox"/> 3 or more diagnostic tests (labs, EKG, x-ray)	<input type="checkbox"/> Abdominal pain (severe) workup-pregnancy related
<input type="checkbox"/> Preparation for special imaging (US) combined with multiple test or parenteral medication or oral or IV contrast	<input type="checkbox"/> Vaginal bleeding (abnormal/heavy)-pregnancy related
<input type="checkbox"/> Electronic fetal monitoring (continuous extended monitoring)	<input type="checkbox"/> Post-partum hemorrhage
<input type="checkbox"/> Administration of multiple concurrent infusions through multiple lines (ex: insulin drip & mag sulfate)	<input type="checkbox"/> Amniocentesis
<input type="checkbox"/> Continuous ongoing nursing assessments by at least 4 sets of vital signs/cervical checks & other assessments integral to current interventions and/or the patient's condition (ex: monitoring, IV fluids, blood products, prep for surgery)	<input type="checkbox"/> Moderate sedation
<input type="checkbox"/> Sexual assault exam with specimen collection	<input type="checkbox"/> Administration of blood or blood products
<input type="checkbox"/> Pre-eclampsia (severe)	<input type="checkbox"/> Spontaneous AB, miscarriage
	<input type="checkbox"/> Fetal demise; post mortem care
	<input type="checkbox"/> Precipitous delivery of a baby, pre-term or full-term
	<input type="checkbox"/> Extended social worker intervention or suicide watch
	<input type="checkbox"/> Coordination of hospital admission/transfer