Paul Firth, MD FAAP Medical Efficiency Systems 503 W. Country Club Elk City, OK 73644

"Should this be coded as a 99213 or 99214?"

How many times have you asked yourself this same question? Documentation and coding used to be one of the most frustrating parts of my practice. How come it seems so difficult to code correctly? I can tell the difference between asthma and pneumonia. I can tell the difference between an ear infection and strep throat. Why am I unsure whether to code a 99214 or not?

For me, it is because I was taught poorly. I was trying to base my coding on whether a patient was "easy" or "hard". Sound familiar? What I've learned is the coding guidelines are very straight forward. Once you understand them, there really are no more difficult decisions to make. Usually within 1 minute of talking with a patient I already know what their level of service will be.

Guess what else I learned? *I was coding over half of my visits too low*. When I decided to commit to changing my coding, documentation, and reimbursement, my practice has exceeded all of my expectations. Because of this I have consistently earned more than twice the national average for my specialty while working fewer hours.

I want to show you how you can achieve these same things in your practice by simply becoming more accurate with your coding. I will be hosting a workshop entitled *Coding Growth Strategies*, which is approved for 6 *AMA PRA Category 1 Credit(s)*TM through a joint sponsorship with the University Of Oklahoma College Of Medicine.

Did you know that the average pediatric office should probably code at least 40% of their visits as 99214's or higher? Family Medicine and Internists should code even more. At Medicare

rates, if you are under-coding just 2 patients a day, you are losing over \$16,000 dollars per year. Undercoding 8 patients per day (which is common in the practices we work with) means you are losing over \$5,000 per month.

Still unsure if your practice can benefit from this material? Take 3 minutes to complete our free coding analyzer. Go to <u>www.CodingGrowthStrategies.com/Analyzer</u> and find out how much money your coding is costing you every year. How would you code the following three patients?

- Generalized dermatologic eruption
- Fever and enteritis
- Follow-up of stable hypertension on 2 medications

Did you know that the 2011 CPT book would characterize all three of these patients as level 4 (99214) visits? How did you code them?

Patient-Centric Coding

My take on coding is quite different from most instruction I have received in the past. I was taught: see the patient, write your note, and then look at your note to determine the level of service. This method leads to poor notes, poor compliance, poor reimbursement, and an unorganized approach to coding and compliance.

I teach the following: While you are seeing the patient, determine what possible level(s) of service the visit will be. Then write your note to reflect the appropriate level of service. This will ensure that compliance is foremost on the mind of the practitioner. It also tends to

Watch a video clip about Patient Centric Coding from our April seminar in Chicago: www.CodingGrowthStrategies.com

eliminate both under-coding and over-coding problems.

For example: I walk in the room and the patient is there for follow-up of a chronic problem (asthma, hypertension, etc.). By the end of the second hour of the seminar, you will realize the following things:

- If you simply refill one medication, you would bill a 99213.
- If you refill multiple medications, you would bill a 99214.
- If they have a mild exacerbation, code 99214.
- If you make a medication change, code 99214.
- If they have a severe exacerbation, code 99215.
- If they have a severe exacerbation and you spend more than 30 minutes with the patient, you may be able to code 99291 (which pays twice what a 99215 pays!)

What You will Learn

The workshop is divided into 3 sections. The first 2 hours are spent focusing on the specifics of outpatient E&M coding. The next 3 hours are spent reviewing dozens of specific examples. Video vignettes are presented showing actual patients and problems. We discuss why particular patients are 99213s, 99214s, or 99215s. We then cover specifics of writing notes to be sure you don't fall into the "insufficient documentation" trap. The last hour is spent discussing workflow and implementation strategies. Many issues are discussed ranging from utilizing your nurses

effectively to integrating an Electronic Medical Record system into your practice. Here are just a few of the things you will learn:

- Streamlining notes to ensure compliance on every visit while saving time.
- Absolutely know the difference between a level 3 and a level 4 patient.
- The right and wrong ways to use an EMR system.
- Avoid the "cut and paste" trap of documentation. Quality not quantity is key.
- Avoid the 3-page progress note. Learn how easy it is to write a brief 99214.
- The very few differences between high-level new patient visits (99203-99205).
- Why some EMR systems will actually make your life harder!
- Not including a complete review of systems will limit new patient visits to 99202.
- Utilizing your nurses to help your documentation.
- Most practitioners see 99215s several times per day but don't code for them.
- Why you shouldn't worry if you code higher levels of service than your peers.
- Maximizing reimbursement for Health Maintenance visits.
- Templates vs. Dictation vs. Paper vs. Computers.
- Knowing when to create your own templates vs. buying them.
- How templates and EMR systems <u>should</u> be organized.
- Become an expert note-writer for high-level E&M services.

We will pack as much information as you can handle into this 6 hour presentation. Included in your registration is the complete 100+ page syllabus with all examples and documentation aids. The price of the seminar is \$425 for the first person from your office. Each additional person is \$295.

Taught by a physician

I have attended many coding seminars--some were great but most were awful. I'm not a professional coder. Instead I will give you advice from a doctor's perspective.

View comments by past attendees by clicking on **Testimonials** at: www.CodingGrowthStrategies.com

All of the strategies I discuss are things I implement in my practice. My goal is to have a life while being a physician. By implementing intelligent coding and business strategies, I can have all these things while still earning more than twice the national average for my specialty. *These are real strategies meant to be put in use in real doctor's offices.* Your practice should be an enjoyable part of your life--your life should not be a part of your practice. Smart coding and business strategies are the easiest way to start down that path.

What's new?

We are now beginning our 9th year of coding education and we continue to refine our teaching format to maximize the learning experience. Instead of having hours of continuous lectures, we begin hands-on documenting and coding early and continue throughout the day. The patient

examples are arranged to present progressively complex scenarios. Small groups are utilized extensively to improve coding skills, retention of the material, as well as facilitating networking with like-minded peers.

You will get to know 7 patients in depth. Two are pediatric and five are adults. However, they present problems and issues common to all practices. Learn how to quickly assess patients to determine their level of risk and know what level of service they are. Is it a 99203? A 99215? Something else? How do we know?

We've brought our teaching full-circle. With documentation examples and worksheets, learn how to not only recognize the level of service but quickly analyze and write notes appropriately.

Documentation: Coding Part 2

During the second set of examples, you will write actual notes. Learn how easy it is to document accurately using the sample templates provided. The entire group watches the video example. The templates in the workbook have the chief complaint and history of present illness written down for you. You will learn exactly how much physical exam, history, and decision-making it takes to document the correct level of service.

We then grade each other's notes and find that most people still have put in too much of something or not enough of other things. That is perfect! *This is where the real learning starts!* We cover another patient. Then another. Then a new patient. Then an established patient. We practice documenting patients with no history. Other times we practice documenting notes with no exam. Over and over until everyone is an expert.

Over the next few hours of patient examples, we continue this cycle of auditing and correcting notes then writing our own. By the end of this section, usually the entire audience is comfortable writing a high-level note in 20-30 seconds. *Don't guess how to code correctly—become an expert!*

Learn to recognize 99214 and 99215 patients as soon as you begin talking with them. Know exactly what is required to quickly complete your documentation and move on to the next patient.

Unconditional Guarantee

This program will be the best coding and documentation program you have ever attended! I guarantee it. I will show you specific techniques to code more accurately and improve reimbursement. If you are unsatisfied, turn in your course materials at any time for a complete refund. No questions asked. You will still receive the *AMA PRA Category 1 Credit(s)*TM for the portion of the seminar attended. If you register and are unable to attend the seminar for any reason, contact me before the seminar date and your registration fee will be refunded.

Audio/Video Course Available

If you are unable to attend the seminar, you can order the entire course for \$395 (**it includes the same information, syllabus and CME's as the live conference**). This includes a digital copy of the syllabus (also a hard copy) and the 6 hour seminar both in video (DVD) and audio (CD) format. Choose the learning format that best fits your lifestyle. And the same money-back guarantee applies. If you are unhappy for any reason, simply return the course for a full refund. *Note: all attendees of a live conference will receive the DVD's to take home for free.*

Coding Growth Strategies at Your Place

Each year we also make available on the schedule opportunities to present the *Coding Growth Strategies* program to private organizations. If your local hospital or physician group has an interest in this type of education let us know. There are many situations where it is simply easier and more cost effective for us to come to your group as opposed to cycling all your people through our regularly scheduled conferences. Visit with David at **866-335-2040 (toll-free)** about customizing a program to meet your needs.

Sincerely,

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Paul Firth, MD

P.S. We certainly appreciate the fact that many of you are return customers to *Coding Growth Strategies*. And we want to reward your support of our program. *This year we are offering the Coding Growth Strategies "Alumni" discount.* If you have attended a live conference in the last two years come see us again in 2011 for only \$200. Complete the registration form on the back of this letter.

Program Agenda:

8:00 - 8:30	Registration & breakfast (provided)
8:30 - 10:30	Outpatient E&M Coding & Examples part 1
10:30 - 10:45	Morning Break
10:45 - 12:30	Outpatient E&M Coding & Examples part 2
12:30 - 1:30	Lunch (provided)
1:30 - 2:45	Advanced Coding Examples
2:45 - 3:00	Afternoon Break
3:00 - 4:00	Coding Workflow
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Program Description:

Focus will be placed on office-visit E&M codes (99201-99215). Special emphasis on learning to quickly identify office visits that should be coded as a 99214 and the supporting documentation. Systems will also be taught to improve compliance and patient care through correct coding. Also discussion of work flow solutions to enhance profits as they apply to EMR's and staff utilization.

Purpose, Objectives, and Target Audience: Upon completion of this course the attendee will be able to describe and identify new coding laws and guidelines outlined in the 2011 CPT Code Book. The attendee will also be able to apply and integrate new and existing coding laws and guidelines to improving medical care in the office setting, thereby enhancing services and revenue. This seminar is intended for all office-based medical providers (physicians, residents, nurse practitioners, and physicians assistants). Other professions that are involved with coding will also benefit (OM, A/R, RN, LPN).

Audio/Video CME available: You may order the audio/video CME conference risk-free. It includes the same information, syllabus and CME's as the live conference. It has been approved for 6 *AMA PRA Category 1 Credit(s)*TM by the University of Oklahoma College of Medicine. Check the box on the order form and we will send you the video and invoice you. Take up to 30 days to view the video and implement changes. If you are unsatisfied, contact us and we will return it at our expense. Otherwise simply pay the invoice for \$395 plus shipping and handling. You have nothing to lose and could see increases in revenue of thousands of dollars per month.

About the speaker: Dr. Paul Firth has been in primary care practice in Elk City, Oklahoma, since 1998. In 2002, he began a consulting company, Medical Efficiency Systems LLC, which focuses on helping physicians take charge of their businesses, enhance their practices, and increase their profits. Through his teaching, consulting, and publishing, he has helped thousands of doctors throughout the United States run better organizations and has enhanced their joy in practice on many levels. Dr. Firth is a much sought-after lecturer and continues to maintain his own full-time medical practice devoted to pediatrics.

New Orleans / Saturday, February 19 *Harrah's New Orleans Hotel* 228 Poydras Street, New Orleans, LA 70130 Sleeping room rate is **\$159** for February 18 For reservations call **800-427-7247**

Las Vegas / Saturday, February 26 Mandalay Bay Resort and Casino

3950 Las Vegas Blvd. South, Las Vegas, NV 89119 Sleeping room rate is **\$125** for February 25 For reservations call **877-632-9001**

Atlanta / Saturday, April 9

Renaissance Waverly Hotel 2450 Galleria Parkway, Atlanta, GA 30339 Sleeping room rate is **\$119** for April 8 For reservations call **800-468-3571**

Philadelphia / Saturday, April 2 Crowne Plaza Philadelphia Downtown

1800 Market Street, Philadelphia, PA 19103 Sleeping room rate is **\$139** for April 1 For reservations call **888-233-9527**

Chicago / Saturday, April 30 Chicago Marriott Downtown

540 N. Michigan Ave., Chicago, IL 60611 Sleeping room rate is **\$169** for April 29 For reservations call **800-266-9432**

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Atlanta, GAChicago, IL	April 9, 2011 April 30, 2011	800	866-335-2040 (toll-free)			
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If you are unable to attend, notify me by the confe your materials by the end of the seminar for a corr		ill be retunded. It you are us	nsatisfied with the ser	ninar for any re	eason, turn in	

American Disabilities Act Statement: For accommodations on the basis of disability, call: 580-225-6033

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the University of Oklahoma College of Medicine and Medical Efficiency Systems LLC. The University of Oklahoma College of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

The University of Oklahoma College of Medicine designates this educational activity for a maximum of 6 AMA PRA Category 1 Credit(s)TM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The University of Oklahoma College of Medicine, Office of Continuing Medical Education has reviewed this activity's speaker and planner disclosures and resolved all identified conflicts of interest, if applicable.