

E/M Coding for Vascular Surgeons Workshop November 1, 2024 OLC Education & Conference Center Rosemont, IL

Course Agenda

(Subject to Change)

7:00am – 8:00am Registration / Continental Breakfast

8:00am - 10:30am

E/M Coding

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- E/M Guidelines: 2024 Update
 - o Time vs MDM: What Works Best for Vascular Surgeons
 - Using Time: Opportunities and Limitations
- Element #1: Number and Complexity of Problems Addressed
 - Defining the Problem: The Basics
 - o Acute vs Chronic, Stable vs Exacerbating
 - Documenting the Problem(s), Why it's the Most Important Component
 - o Is Severity More Important than the Number of Problems?
- Element #2: Data to Be Reviewed and Analyzed
 - Documenting Data: The Basics
 - Defining Data: Category 1
 - What is an External Note?
 - What is a Unique Data Test?
 - What is a Unique Source?
 - Who Qualifies as an Independent Historian and How is this Role Documented?
 - Defining Data- Category 2
 - Documenting Independent Interpretation
 - Defining Data: Category 3
 - What Constitutes a Discussion of Management or Tests?
 - Who Qualifies as an External or Other Source?
- Element #3: Risk of Complications and/or Morbidity or Mortality of Patient Management
 - Defining Risk: It's Your Plan!
 - Documenting Level of Risk
 - What Does CPT Say? Does Documentation of Procedure Risk Impact Level of Risk? New 2024 Directive!
 - Does Medicare's Table of Risk Still Apply?
 - Does Urgency or Severity of a Problem Impact Risk?



• Applying MDM in a Practice Setting

- Going from Level 3 to Level 4: Key Considerations.
- Going from Level 4 to Level 5: What Determines a High Problem and High Risk in Vascular Surgery.
- When Does Data Order or Review Make a Difference. What is a Common Forgotten Documentation for Vascular Surgeons?

10:30am – 10:45am

Break

10:45am - 12:00pm

Payer Audit Risk with E/M. Circa 2024.

How Do Payors React to Increasing Volume of Level 4, Level 5?

Highlights of E/M Category Changes

- Revisions to Categories of E/M: impact on Billing
- A Road Map to Choosing a Category

E/M Modifiers

Defining and Applying Modifier 25 and 57

Medicare Modifiers FS and FT: Use in Vascular Surgery

Advanced Practice Provider/Qualified Health Care Provider (NP/PA) Billing

- Incident vs. Direct Billing vs Shared Services
- Medicare Guidelines for NP/PA in the Outpatient and Inpatient Setting
- Medicare FS Modifier for Shared Services
- What About Private Payers? Will They Pay for PA or NP Services and Will a Modifier Be Needed?

12:00 pm Adjourn / Lunch