



## HEALTHCARE COMPLIANCE + NETWORKING INC.

### MAXIMIZE YOUR BILLING INFORMATION

An integrated billing system can convert patient and billing data into extremely powerful tools known as performance indicators. Performance indicators help you manage your facility and determine where to concentrate your resources. While a great deal of information and a number of reports should be available from your billing data, we recommend that you pay particular attention to the following areas:

- **Average modalities per visit** – Monitoring the average modalities per visit will assist you in determining staff efficiency. Although various factors (e.g. patient demographics, type of services performed, etc.) affect these figures, comparing available hours to the modalities performed, assists in evaluating if clinical staff is performing at expected levels. Average modalities per visit that are too high or too low can affect your facility operations.
- **Average visits per patient** – Determining the average visits per patient will help you market your facility properly based on outcomes. Some payers and referral sources carefully monitor this performance indicator and the average visits per diagnosis. Ask your billing agent for the data you need to calculate average visits per patient and per diagnosis for your facility.
- **Physician referrals** – Understanding the referrals your facility receives provides guidance and focus for your marketing efforts in the community. A physician referral report identifies the physicians who are referring to your facility and at what rate, the average collection per physician and other important information.

*Make your billing agent work for you. Do not settle for just claims transmitting, take advantage of your billing data and use it to increase performance.*

*By Healthcare Compliance & Networking, Inc.*

### GROUP THERAPY (HCPCS CODE #97150)

Group Therapy Services are defined as, “Any therapy services provided simultaneously to two or more individuals by a practitioner. The individuals can be, but need not be, performing the same activity.” If a physician or therapist performs any of the Physical Medicine Procedures with two or more individuals concurrently or simultaneously, only a 97150 is required for each patient.

You must maintain documentation in each patient’s medical record identifying the specific treatment technique(s) used in the group; how the treatment technique will restore function; the frequency and duration of the particular group setting; the treatment goal in the individualized plan; and the number of persons in the group.

CMS has developed a Questions & Answer document on this issue. You will find the document titled “Group Therapy Q&A” posted at <http://www.ehcan.net/documents.asp>. We strongly recommend that you read it thoroughly.

### IMPORTANT CORF & ORF LINKS/DOCUMENTS

1. Visit <http://www.ehcan.net/documents.asp> to find the following documents:
  - a. **Billing for CORF & ORF** – Explains the allowable services; how to determine the number of modalities provided; how payments are made for different types of services provided in a CORF and ORF setting, and much more.
  - b. **CORF Survey Questionnaire** – The same questionnaire an AHCA surveyor uses to test your compliance with the CORF Conditions of Participation.
  - c. **ORF Survey Questionnaire** – The same questionnaire an AHCA surveyor uses to test your compliance with ORF Conditions of Participation.
  - d. **CORF and ORF Conditions of Participation** – All CORF/ORF owners and management personnel must understand this document in its entirety.
2. **Florida Providers** you can find AHCA information for CORF & ORF at [http://www.fdhc.state.fl.us/MCHQ/Health\\_Facility\\_Regulation/Hospital\\_Outpatient/comprehensive.shtml](http://www.fdhc.state.fl.us/MCHQ/Health_Facility_Regulation/Hospital_Outpatient/comprehensive.shtml)

tel 904.398.0506  
fax 904.398.0503  
4940 Emerson Street, Suite 200  
Jacksonville, Florida 32207  
[www.hcan.net](http://www.hcan.net)

# news + updates

## HIPAA and CORF/ORF

**WARNING! *Be prepared!*** When OCR/CMS arrives for an inspection it is imperative that your CORF/ORF staff understands HIPAA guidelines and the facility has implemented and/or corrected all findings as stated in your GAP Analysis. At a minimum your facility must have the following:

- A person in charge of the privacy and security issues – designated in writing
- A Notice of Privacy Practices accessible to patients and employees
- Contingency, data back-up, and disaster plans
- Employee Confidentiality Agreements
- Patient/Employee Complaint Forms
- All employees must complete HIPAA training and re-train once a year
- Chain of Trust Partner Agreements
- Business Associate Agreements
- A Facility Policy & Procedure Manual encompassing, but is not limited to:
  - Fax and e-mail
  - Employee termination
  - Workstation use
  - Password protection
  - Authorization for use/disclosure of PHI
  - Request for inspection, restriction, and accounting of disclosures of PHI
  - Hardware and software installation/review
  - Amendments of PHI
  - Visitor access

## REMEMBER THIS QUARTER!

Your Medicare Credit Balance Report is due 30 days after the end of each quarter. Failure to file this report will result in 100% withholding of your Medicare payments. You must file the Medicare Credit Report with the assistance of your billing agent. A copy of the Credit Balance report and instructions are available at:

<http://www.ehcan.net/documents.asp>

## LOOK INSIDE FOR:

- Maximize your billing information
- Group Therapy HCPCS Code #97150
- Important Internet Links for CORF/ORF

want more information?

Visit [www.hcan.net](http://www.hcan.net) or call 904.398.0506



4940 Emerson Street, Suite 200  
Jacksonville, Florida 32207

PRSR STD  
U.S. POSTAGE  
PAID  
JACKSONVILLE, FL  
PERMIT NO. 1617