



IN THIS ISSUE:

- Proper Reporting of Outpatient Revenue Codes and Their Associated Procedure Codes
- Reporting Other Clinician Type

Newsletter Spotlight

DID YOU KNOW?

IHA's COMPdata is planning some expansion of data reporting in 2012. More details to come in an upcoming newsletter.



PROPER REPORTING OF OUTPATIENT REVENUE CODES AND THEIR ASSOCIATED PROCEDURE CODES

- As you are aware, beginning with 2nd quarter 2011 outpatient cases, all outpatient CPTs/HCPCS must be reported in the service line item fields.
- We would like to clarify the importance of making sure your outpatient procedure codes are properly matched with their associated revenue codes.
- When reporting revenue codes, their associated procedures must be listed in the same sequence in the service line items.
- For example, whatever rev code is reported in rev code field #3 should have its associated CPT/HCPCS reported in service line item field #3.
- This is the only way we can match the proper revenue codes and charges with the procedures.
- It's vital for data integrity to match these properly.
- Some revenue codes do not require procedures, which means their associated service line item will be blank.
- If you have a revenue code with multiple procedures associated to it, you will need to report the revenue code multiple times and put the CPTs/HCPCS in the matching sequence.
- The following revenue codes must have outpatient procedure codes reported with them, or the record will reject, as noted in previous communication:
- 0290-0299, 0300-0319, 0320-0329, 0350-0359, 0360-0369, 0400-0409, 0450-0459, 0460-0469, 0480, 0481, 0482-0489, 0490-0499, 0511, 0610-0619, 0723, 0730-0731, 0733-0749, 0750-0759, 0790-0799, 0860-0869, 0920-0929, 0960-0989

REPORTING OTHER CLINICIAN TYPE

- The recent addition of Other Clinician Type reporting is especially important because so many facilities now use hospitalists, who get reported as the Attending Clinician.
- This means that the Attending Clinician can no longer be relied upon to reflect the referring/discharging clinician, which is data relied upon by your planners, decision support, finance, and quality staff.
- Therefore, the reporting of Referring Clinician has become vitally important, which can only be done using the 1st and 2nd Other Clinician fields and their associated Other Clinician Type designations.
- At times the Attending may be the same as Referring, which is fine, and does indeed need to be reported in both fields. The Data Coordinator Manual will be updated to reflect this in an upcoming version.