

Palliative Care Billing and Coding Tip Sheet

Key Concepts

1. Make sure you are **reimbursed for all of your time**, consider patient visits in all venues, transitional care management, complex patient care and care oversight.
2. **Coding Decision Points**
 - New or Established? Understanding of how they are defined.
 - Level of CPT coding? Understanding of threshold times.
 - Component or Time-based? Be careful about defaulting to time-based alone as lose revenue. However, understand the 50% rule.
 - Diagnoses to code? Familiarity with palliative care codes that are frequently used
 - Place of service?
 - For Advanced Practice Provider? ‘Incident to’ or ‘Shared Visit’
3. **Complexity of Medical Decision-Making**
 - Risk assessment
 - Data ordered or reviewed
 - Diagnosis and Management
4. **Documentation must support coding and billing. General principles.**
 - If it’s not documented, it wasn’t done
 - If it’s not legible – it doesn’t count
 - If it’s not signed – it’s not acceptable
5. Understand key terms – components of an evaluation, face-to-face,
6. You are a “*Palliative Care Specialist*.” Your **notes convey the specialty** and what types of service(s) you provide.
7. Consider how to **organize the plan of care**. One possibility is the Domains of Quality Palliative Care to organize your plan of care at www.nationalcoalitionhpc.org
8. **Understand the legality of billing and reimbursement** as it pertains to coding.
 - “Under coding” is no more acceptable than “over coding.”
9. Understand the various community billing situations.
 - **Advance Care Planning**
 - *Please refer to the ACP booklet in CAPC’s Billing and Coding Toolkit*
 - **Care Plan Oversight**
 - *Please refer to the Supplemental Resource Sheet in CAPC’s Billing and Coding Toolkit*
 - **Transitional Care Management**
 - *Please refer to the Supplemental Resource Sheet in CAPC’s Billing and Coding Toolkit*
 - **Chronic and Complex Care Management**
 - *Please refer to the Supplemental Resource Sheet in CAPC’s Billing and Coding Toolkit*
10. Get to **know your regional “coding culture”** which is greatly determined by your Fiscal Intermediary and may also be influenced by institutional bylaws.
11. Have team billing and coding sessions to **assure consistency and compliance** with regulations. Get external auditing or compliance checks at least annually.

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