

IMPROVING PATIENT CARE & CLINIC INCOME - 2019



DON SELF, CMCS, CASA

RELAXING ON WHO DOCUMENTS

- + 2018 – Only Doctor can document HPI (and chief complaint per July 2018 Federal Register)
- + 2019 – “Practitioner could simply indicate in the medical record that they reviewed and verified





Medicare patients are the Most Profitable of all Insurance Patients you can see – in primary care

MEDICARE ANNUAL WELLNESS VISIT

- + TYPICAL \$135K - \$250K PER YEAR PROFIT PER SOLO FP
- + NOT AN ANNUAL PHYSICAL - NO PHYSICAL INVOLVED
- + CAN BE PERFORMED BY **NURSE** ONLY – DIRECT SPRVSN
- + SEVERAL PARTS OF AWV CAN BE PERFORMED TELEMEDICINE
- + INCLUDES SEPARATE PAYMENT FOR COGNITIVE, ALCOHOL MISUSE SCREENS, DEPRESSION SCREENS, ETC
- + TYPICAL MEDICARE PAYMENT IS \$260 - \$525 if you do what Medicare wants you to do instead of only billing G043x

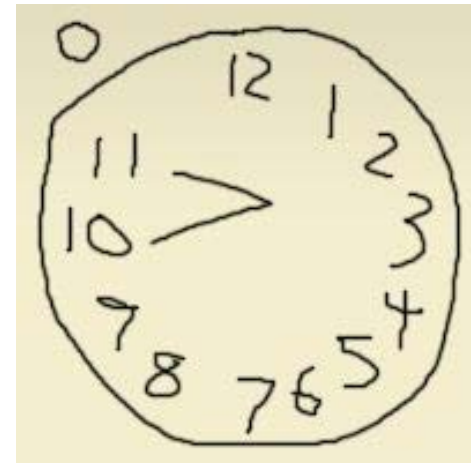
Cognitive Impairment Assessment and Care Planning



CPT 99483 IN 2019

COGNITIVE ASSESSMENTS

- ▶ MOST PRIMARY CARE PHYSICIANS DO NOT PERFORM A MEASURABLE OR THOROUGH COGNITIVE ASSESSMENT
 - ▶ Refer Patient to Neurologist
 - ▶ Totally miss cognitive dysfunction



MEDICARE AWWs REQUIRE ASSESSMENT

- ▶ “Detect Cognitive Impairment”
 - ▶ Doesn’t specify HOW
 - ▶ Doesn’t specify level of impairment
 - ▶ Lost keys
 - ▶ Walked into a room & cannot remember why
 - ▶ Forget important dates or names
 - ▶ Early dementia

99483 – PREVIOUSLY CODE G0505

- ▶ \$270 AVERAGE IN 2018
- ▶ Requires Physician Perform some services personally
- ▶ Not used for screening – provider must suspect impairment
- ▶ Ancillary Personnel may perform 4 of the 9 elements
 - ▶ Neurocognitive Testing -**ONLINE**
 - ▶ Functional Health Assessment Questionnaire -**ONLINE**
 - ▶ Depression Testing by Standardized instruments -**ONLINE**
 - ▶ Evaluation of Safety -**ONLINE**
 - ▶ Identification of caregiver(s), caregiver needs, social services & willingness of caregiver to take on caregiving needs (requires contact with caregiver)

99483 – INCREASED RVU'S BY 11% 2019

- ▶ Typical 50 minutes face-to-face with the patient and/or family or caregiver
 - ▶ **AS USUAL – AT LEAST HALF OF THE TIMED CODE MUST BE SPENT DOCUMENTED**
- ▶ Medical Practitioner must perform:
 - ▶ Medical decision making of moderate or high complexity
 - ▶ Medication reconciliation & review for high risk meds, if applicable
 - ▶ Address palliative care needs, if applicable
- ▶ Creation of a care plan, including initial plans to address any neuropsychiatric symptoms, neuro-cognitive symptoms, functional limitations, and referral to community resources as needed; care plan shared with the patient and /or caregiver with initial education and support

PROFITABLE TOO!

- ▶ 64% of PART B PATIENTS HAVE SECONDARY/SUPPLEMENTAL INSURANCE
- ▶ COST OF ONLINE TEST IS 25 PER PATIENT
- ▶ NET PROFIT SHOULD RANGE FROM \$220 TO \$313 PER 99483
- ▶ MORE PROFITABLE THAN THE 99214 FOR \$104
- ▶ CAN BE USED EVERY 180 DAYS – **WHEN MEDICALLY NECESSARY**

ANALYZING PRACTICE ANALYTICS

TO



2 WAYS TO REVIEW

1. **PROCEDURE CODE FREQUENCY REPORT FROM CLINIC, FOR ALL PATIENTS**
2. **SAME REPORT FROM MEDICARE ON MEDICARE ONLY (TRADITIONAL MEDICARE EXCLUDES ADVANTAGE MEDICARE CLAIMS)**

Almost every PM system will create a PCFR

Dr. GREGORY HOUSE DO							
Procedure Code	Billed Charge	Reporting Period		MTD (May)		# of Charges	
		# of Charges	Total Charges	# of Charges	Total Charges		
FAMILY MEDICAL ASSOCIATES							
10061	\$399.00	0.0	\$0.00	0.0	\$0.00	1.0	\$399.00
11200	\$160.00	1.0	\$160.00	1.0	\$160.00	3.0	\$480.00
11402	\$367.00	0.0	\$0.00	0.0	\$0.00	1.0	\$367.00
17000	\$210.00	2.0	\$420.00	2.0	\$420.00	13.0	\$2,730.00
17003	\$30.00	3.0	\$90.00	3.0	\$90.00	14.0	\$420.00
17110	\$274.00	2.0	\$548.00	2.0	\$548.00	16.0	\$4,384.00
20610	\$120.00	0.0	\$0.00	0.0	\$0.00	1.0	\$120.00
36415	\$6.00	295.0	\$1,770.00	295.0	\$1,770.00	1,615.0	\$9,690.00
69210	\$95.00	2.0	\$190.00	2.0	\$190.00	13.0	\$1,235.00
69210	\$190.00	0.0	\$0.00	0.0	\$0.00	1.0	\$190.00
93000	\$45.00	48.0	\$2,160.00	48.0	\$2,160.00	260.0	\$11,700.00
94010	\$62.00	0.0	\$0.00	0.0	\$0.00	1.0	\$62.00
94060	\$108.00	6.0	\$648.00	6.0	\$648.00	19.0	\$2,052.00
94640	\$29.00	0.0	\$0.00	0.0	\$0.00	2.0	\$58.00
94760	\$6.00	2.0	\$12.00	2.0	\$12.00	12.0	\$72.00
95806	\$320.00	1.0	\$320.00	1.0	\$320.00	5.0	\$1,600.00
96360	\$102.00	0.0	\$0.00	0.0	\$0.00	2.0	\$204.00
96372	\$51.00	254.0	\$12,954.00	254.0	\$12,954.00	1,375.0	\$70,125.00
99000	\$37.00	0.0	\$0.00	0.0	\$0.00	362.0	\$13,394.00
99201	\$84.00	0.0	\$0.00	0.0	\$0.00	2.0	\$168.00
99202	\$144.00	2.0	\$288.00	2.0	\$288.00	21.0	\$3,024.00
99203	\$209.00	16.0	\$3,344.00	16.0	\$3,344.00	100.0	\$20,900.00
99204	\$319.00	5.0	\$1,595.00	5.0	\$1,595.00	10.0	\$3,190.00
99211	\$38.00	0.0	\$0.00	0.0	\$0.00	2.0	\$76.00
99212	\$84.00	12.0	\$1,008.00	12.0	\$1,008.00	42.0	\$3,528.00
99213	\$140.00	286.0	\$40,040.00	286.0	\$40,040.00	1,450.0	\$203,000.00
99214	\$208.00	275.0	\$57,200.00	275.0	\$57,200.00	1,592.0	\$331,136.00
99215	\$281.00	8.0	\$2,248.00	8.0	\$2,248.00	33.0	\$9,273.00
99243	\$242.00	0.0	\$0.00	0.0	\$0.00	1.0	\$242.00

Sorted
Numerically is
usually much
easier than
alphabetically

ALL SERVICES TO
ALL PATIENTS

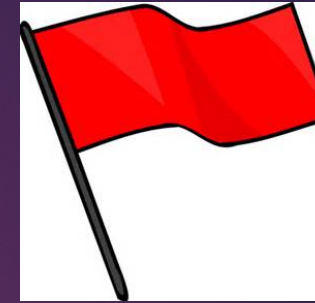
Dr. GREGORY HOUSE DO

Procedure Code	# of Charges
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FAMILY MEDICAL ASSOCIATES

10061	0
11200	1
11402	0
17000	2
17003	3
17110	2
20610	0
36415	295
69210	2
69210	0
93000	48
94010	0
94060	6
94640	0
94760	2
95806	1
96360	0
96372	254
99000	0
99201	0
99202	2
99203	16
99204	5
99211	0
99212	12
99213	286
99214	275
99215	8
99243	0

Billing all office visits as:



DOE	JOHN	M.D.	M	TX	FP	O	94010	Breathing capacity test	78	59	78
DOE	JOHN	M.D.	M	TX	FP	O	99204	E&M	21	21	21
DOE	JOHN	M.D.	M	TX	FP	O	99215	E&M	840	283	840
DOE	JOHN	M.D.	M	TX	FP	O	G0008	Admin flu virus vac	39	38	39

- **EVERY NEW PATIENT VISIT AS 99204**
- **EVERY ESTAB. PT VISIT AS 99215..... 840 TIMES!!**

WAIT – WHAT SPECIALTY ARE YOU?

- **ARE YOU AN INTERNAL MEDICINE SPECIALIST?**
- **WHAT SPECIALTY DOES MEDICARE SHOW?**

TUSCUMBIA	AL	US	General Practice	Y	O	99203	Office/outpatient visit new	119	119
TUSCUMBIA	AL	US	General Practice	Y	O	99211	Office/outpatient visit est	66	18
TUSCUMBIA	AL	US	General Practice	Y	O	99213	Office/outpatient visit est	14	13
TUSCUMBIA	AL	US	General Practice	Y	O	99214	Office/outpatient visit est	3,315	596

Billing Initial Hospital as:

NGUYEN	NHU NGUYEN	MD	F	EL PASO	TX	FP	F	99223	init hosp	438	409
NFOR	TONGA	MD	M	MILWAUKEE	WI	FP	F	99223	init hosp	12	12
MILLS	SHELLY	MD	F	DEFIANCE	OH	FP	F	99222	init hosp	17	17
MORCOM	KATHRYN	M.D.	F	FAIRFAX	VA	FP	F	99222	init hosp	12	12
MCMILLAN	WILLIAM	MD	M	JAMESTOWN	ND	FP	F	99223	init hosp	25	23
MARQUETTE	PAUL	M.D.	M	TINTON FALLS	NJ	FP	F	99222	init hosp	70	60
MULBERRY	BRIAN	MD	M	CYNTHIANA	KY	FP	F	99222	init hosp	31	26
NAPOLITANO	LOUIS	M.D.	M	WOOD-RIDGE	NJ	FP	F	99223	init hosp	110	97
MCELLIGOTT	JOAN	D.O.	F	PALOS HEIGHTS	IL	FP	F	99223	init hosp	111	80
MARTIN	JONATHAN	M.D.	M	CORPUS CHRISTI	TX	FP	F	99223	init hosp	39	35

THINK ABOUT IT....

MORRIONE	THOMAS	MD	M	PORTLAND	ME	FP	F	99231	Subsequent hospital care	110	72
MORRIONE	THOMAS	MD	M	PORTLAND	ME	FP	F	99232	Subsequent hospital care	752	222
MORRIONE	THOMAS	MD	M	PORTLAND	ME	FP	F	99233	Subsequent hospital care	148	95
MORRIONE	THOMAS	MD	M	PORTLAND	ME	FP	F	99239	Hospital discharge day	159	156

EVERY discharge that year took the doctor longer than 30 minutes?? REALLY?

How do I know what is out of the average?

THE AVERAGE WILL VARY BY SPECIALTY.

	99238	
99239		
INTERNAL MEDICINE	43%	57%
FAMILY PRACTICE	55%	45%
GASTRO	70%	30%
NEUROLOGY	84%	16%

ALL SPECIALTIES OVER-CODE!

MOHAI	PETER	MD	M	SEATTLE	WA	Rheumatology	Y	O	99214	872	301
MOHAI	PETER	MD	M	SEATTLE	WA	Rheumatology	Y	O	99215	21	20
MOLL	DAVID	M.D.	M	DERBY	CT	Endocrinology	Y	O	99211	53	11
MOLL	DAVID	M.D.	M	DERBY	CT	Endocrinology	Y	O	99213	93	69
MOLL	DAVID	M.D.	M	DERBY	CT	Endocrinology	Y	O	99214	960	415
MOLL	DAVID	M.D.	M	DERBY	CT	Endocrinology	Y	O	99215	17	17

WOW!

METCALFE	MONTY M.D.	LEXINGTON	KY Hem/Oncology O	99211	19	1%
METCALFE	MONTY M.D.	LEXINGTON	KY Hem/Oncology O	99212	18	1%
METCALFE	MONTY M.D.	LEXINGTON	KY Hem/Oncology O	99214	1,494	98%

an hour, I identified **at least 40** physicians that have flagged an audit and that was only physicians with last names starting with M and N

LESION DESTRUCTION

17000	Destruct premalg lesion	22	22	\$70.83
17003	Destruct premalg les 2-14	1	1	\$6.69

17000 DESTRUCT PREMALG LESION

17003 DESTRUCT PREMALG LES 2ND THROUGH 14, EA

17004 DESTRUCT PREMALG LES, 15 OR MORE LESIONS

Based on the average Dermatology billing of 17000, 17003 to Medicare, the average patient has 3.1 to 5.4 premalignant lesions, when you consider frequency of 17004 billed as well.

JOINT INJECTIONS

17 PATIENTS RECEIVED CORTICOSTEROIDS

12 PATIENTS WERE INJECTED

20610	Drain/inject joint/bursa	15	12
36415	venipuncture	238	149
99213	OV - LEVEL 3	358	215
99214	OV - LEVEL 4	229	127
J3301	Triamcinolone acet	20	17
Q2038	Fluzone vacc, 3 yrs & >	82	80

FLU VACCINE

**82 CHARGES OF Q2038 (VACCINE)
NOT ONE OF G0008? (ADMINISTRATION)**

20610	Drain/inject joint/bursa	15	12
36415	venipuncture	238	149
99213	OV - LEVEL 3	358	215
99214	OV - LEVEL 4	229	127
J3301	Triamcinolone acet	20	17
Q2038	Fluzone vacc, 3 yrs & >	82	80

Look at J Codes

**NOW – LOOK UP FOR
96372**

NONE

**OVER 600 UNITS OF
INJECTABLES**

95921	Autonomic nerv function test	111	97
95922	Autonomic nerv function test	111	97
98929	Osteopathic manipulation	27	20
99203	Office/outpatient visit new	44	44
99211	Office/outpatient visit est	553	100
99213	Office/outpatient visit est	214	111
99214	Office/outpatient visit est	762	247
99215	Office/outpatient visit est	16	16
G0008	Admin influenza virus vac	47	46
G0179	MD recertification HHA PT	76	30
G0180	MD certification HHA patient	25	24
G0431	Drug screen multiple class	42	42
G0434	Drug screen multi drug class	826	104
J0696	Ceftriaxone sodium injection	56	11
J1040	Methylprednisolon e 80 MG inj	62	43
J1100	Dexamethasone sodium phos	504	43
J3420	Vitamin b12 injection	74	22

Venipuncture - 36415

36415	Routine venipuncture	174	111
80053	Comprehen metabolic panel	247	166
80061	Lipid panel	188	132
81000	Urinalysis nonauto w/scope	24	19
81002	Urinalysis nonauto w/o scope	58	52
82306	Vitamin d 25 hydroxy	53	49
82607	Vitamin B-12	70	58
82728	Assay of ferritin	12	12
82962	Glucose blood test	22	16
83036	Glycosylated hemoglobin test	121	72
83540	Assay of iron	15	15
83550	Iron binding test	14	14
84153	Assay of psa total	11	11
84443	Assay thyroid stim hormone	188	135
85025	Complete cbc w/auto diff wbc	231	155

- 174 blood draws

- 247 CMPs

- 231 CBCs

Pneumonia Vaccine

90732	Pneumococcal vaccine	11	11
93000	Electrocardiogram complete	39	37
99213	Office/outpatient visit est	103	77
99214	Office/outpatient visit est	545	202
99215	Office/outpatient visit est	107	81
G0008	Admin influenza virus vac	120	120
G0103	PSA screening	11	11

**HOW DID THEY GET THE PNEUMONIA VACCINE INTO THE
MEDICARE PATIENT? NO G0009!**

94010/94060- Spirometer

93010	Electrocardiogram report	53	50
94640	Airway inhalation treatment	22	22
96372	Ther/proph/diag inj sc/im	23	16

94010 – MEDICARE OK \$ 32.82

94060 – MEDICARE OK \$ 55.05

Primary Care – no 93922 or 93923 ABIs?

92547	Supplemental electrical test	70	13
93000	Electrocardiogram	133	93
94060	Evaluation of wheezing	89	74

93922 = \$89.77

93923 = \$140.73

- 1 IN EVERY 3 PEOPLE WITH DIABETES HAVE PAD
- 1 IN EVERY 4 BLACK PEOPLE OVER 50 HAVE PAD
- 1 IN EVERY 5 PEOPLE OVER 50 HAVE PAD
- 1 IN EVERY 3 PEOPLE WITH HEART DISEASE HAVE PAD

NIH PUBLICATION 06-5835

INITIAL HOSPITAL CARE

99219	Initial observation care	13	13
99222	Initial hospital care	11	11
99232	Subsequent hospital care	94	37
99238	Hospital discharge day	33	33
G0008	Admin influenza virus vac	84	84

MADE HOSPITAL VISITS ON 37 PATIENTS BUT ONLY SAW
11 OF THEM INITIALLY IN THE HOSPITAL? NOT POSSIBLE

99222 IS FOR FIRST VISIT PER HOSPITAL STAY – NOT JUST
FOR ADMITS ANYMORE

WHAT IS MISSING?

99203	Office/outpatient visit new	19	19
99204	Office/outpatient visit new	42	42
99213	Office/outpatient visit est	1,041	433
99214	Office/outpatient visit est	912	386
99239	Hospital discharge day	18	16
99291	Critical care first hour	25	19
G0008	Admin influenza virus vac	66	66
G0439	PPPS, subseq visit	15	15

**TOTAL
UNIQUE
MEDICARE
PATIENTS =
699**

**699 PATIENTS & NO HHA
CERTS/RECERTS?**

HOW MANY AWWVs?

99203	Office/outpatient visit new	19	19
99204	Office/outpatient visit new	42	42
99213	Office/outpatient visit est	1,041	433
99214	Office/outpatient visit est	912	386
99239	Hospital discharge day	18	16
99291	Critical care first hour	25	19
G0008	Admin influenza virus vac	66	66
G0439	PPPS, subseq visit	15	15
J3301	Triamcinolone acet inj	75	37

**TOTAL
UNIQUE
MEDICARE
PATIENTS =
699**

699 PATIENTS & 15 AWWVs....

**NO G0442 ALCOHOL SCREENS, DEPRESSION
SCREENS, ACP OR COGNITIVE TESTING ?**

Edward's entire report

99213	Office/outpatient visit est	329	103
99214	Office/outpatient visit est	1,111	164
99215	Office/outpatient visit est	24	21
99349	Home visit est patient	334	33
G0008	Admin influenza virus vac	133	130
Q2037	Fluvirin vacc, 3 yrs & >, im	134	131

- **NO PROCEDURES**
- **NO INJECTIONS**
- **NO DIAGNOSTIC TESTING**
- **NO LAB TESTS**
- **NO AWVS**
- **EDWARD IS ONLY PROFIT CENTER**

Internal Med. - What is missing?

99232	Subsequent hospital care	19	12
99233	Subsequent hospital care	862	308
99238	Hospital discharge day	84	81
99239	Hospital discharge day	180	172
G0008	Admin influenza virus vac	43	41

881 HOSPITAL VISITS..... 264 DISCHARGES....

NOT ONE CRITICAL CARE CHARGE!



**WHAT SHOULD A FAMILY
PRACTICE EXPECT EACH
YEAR FROM MEDICARE
PATIENTS?**

THESE DOCTORS ARE AVERAGING \$101 TO \$354 PER YEAR PER MEDICARE PATIENT

Last, First							# Of Pat	Med Only	Dual Cnt	\$ Per P		
MCCULLOH,	DO	1104 WALNUT DR	ARDMORE	OK	73401	Family Practice	17000	1467	1165	302	\$219	
HANCOCK,	DO	400 WYANDOTTE	RAMONA	OK	74061	Family Practice	81002	1067	872	195	\$226	
RICE, JOHN	DO	116 SW 2ND ST	CHECOTAH	OK	74426	Family Practice	10061	1042	874	168	\$340	
FELL, JOHN	DO	562 S ELLIOTT ST	PRYOR	OK	74361	Family Practice	96372	972	628	344	\$187	
PARDUE, VICTORIA	DO	1201 E JACKSON ST	HUGO	OK	74743	Family Practice	36415	933	452	481	\$259	
FLATT, GERALD	DO	603 NE 2ND ST	ROWLAND FLATT	ANTLERS	OK	74523	Family Practice	17000	884	522	362	\$354
LEWIS, BRIAN	DO	615 E MAIN ST	JENKS	OK	74037	Family Practice	36415	877	400	477	\$345	
LAMBERT, GARY	DO	620 E OKMULGEE	MUSKOGEE	OK	74403	Family Practice	36415	875	536	339	\$303	
ANDERSON,	DO	700 N MAIN	GORE	OK	74435	Family Practice	99306	841	298	543	\$238	
BALL, CURTIS	DO	1117 SOUTH DOUGLAS BLVD	STE D	MIDWEST CITY	OK	73130	Family Practice	93010	797	547	250	\$102
MEISSEN,	DO	6160 S YALE AVE	TULSA	OK	74136	Family Practice	10060	782	679	103	\$101	
JONES, THOMAS	DO	601 SE WASHINGTON ST	IDABEL	OK	74745	Family Practice	36415	750	523	227	\$14	
DISALVATORE,	DO	10502 N 110TH EAST AVE	OWASSO	OK	74055	Family Practice	99217	705	504	201	\$248	
GERARD, TERRY	DO	1301 LINCOLN RD	IDABEL	OK	74745	Family Practice	93010	685	364	321	\$135	

THESE DOCTORS ARE AVERAGING \$130 TO \$439 PER YEAR PER MEDICARE PATIENT

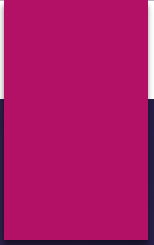
TURRENTINE,	DO	800 ISABEL ST		ARDMORE	OK	73401	Family Practice	20610	654	500	154	\$313
WILLIAMS,	DO	702 W BROADWAY ST		SPIRO	OK	74959	Family Practice	20610	648	391	257	\$189
LIVINGSTON,	DO	3400 W TECUMSEH RD	STE 106	NORMAN	OK	73072	Family Practice	81002	648	574	74	\$126
GRELLNER, RANDY	DO	1025 E 2ND ST		CUSHING	OK	74023	Family Practice	17000	638	572	66	\$439
GLIDDEN, CARL	DO	300 ROCKEFELLER DR		MUSKOGEE	OK	74401	Family Practice	93010	616	326	290	\$127
LO, PATRICK	DO	1506 S AGNEW AVE		OK CITY	OK	73108	Family Practice	36415	605	248	357	\$231
MOODY, ROBERT	DO	1600 W UNIVERSITY BLVD		DURANT	OK	74701	Family Practice	93010	592	292	300	\$132
JANG, JAMES	DO	1401 E VAN BUREN AVE		MCALESTER	OK	74501	Family Practice	71020	590	470	120	\$193
RICHARDS,	DO	114 N HIGHWAY 18		CHANDLER	OK	74834	Family Practice	20610	590	504	86	\$194
BELT, JAY	DO	1104 E CENTRAL BLVD		ANADARKO	OK	73005	Family Practice	36415	577	463	114	\$195
LEMING, LUKE	DO	620 S MADISON ST	SUITE 209	ENID	OK	73701	Family Practice	93010	568	268	300	\$196
MILLER, LAURA	DO	305 S 5TH ST	ST. MARY'S,	ENID	OK	73701	Family Practice	93010	565	400	165	\$130
DENNIS, GREGORY	DO	520 S MUSTANG RD		YUKON	OK	73099	Family Practice	20610	564	529	35	\$156

THESE DOCTORS ARE AVERAGING \$95 TO \$421 PER YEAR PER MEDICARE PATIENT

DENNIS, GREGORY	DO	520 S MUSTANG RD		YUKON	OK	73099	Family Practice	20610	564	529	35	\$156
FLEGEL, ERIC	DO	400 SE FRANK PHILLIPS BLVD		BARTLESVILLE	OK	74003	Family Practice	36415	560	212	348	\$151
VONFELDT,	DO	1334 N HARVILLE RD		DUNCAN	OK	73533	Family Practice	20610	557	348	209	\$296
GRIGSBY, JOHN	DO	310 2ND AVE SW	STE. 203	MIAMI	OK	74354	Family Practice	17000	551	440	111	\$251
HOPKINS, RONALD	DO	210 SW 89TH ST		OKLAHOMA CITY	OK	73139	Family Practice	17000	549	505	44	\$193
FAUBION, SHELLY	DO	303 SE 4TH ST		MOORE	OK	73160	Family Practice	69210	548	424	124	\$151
MANSCHRECK,	DO	301 N 2ND ST	STE 205	MCALESTER	OK	74501	Family Practice	36415	545	401	144	\$174
MULKEY, LOUIS	DO	1111 S ST LOUIS AVE		TULSA	OK	74120	Family Practice	81003	540	129	411	\$109
MEFFORD,	DO	319 E JOSEPHINE AVE		FREDERICK	OK	73542	Family Practice	20610	535	370	165	\$217
OPONG-KUSI,	DO	1145 S UTICA AVE	SUITE 460	TULSA	OK	74104	Family Practice	99220	533	286	247	\$188
RAY, MICHAEL	DO	700 24TH AVE NW		NORMAN	OK	73069	Family Practice	36415	516	474	42	\$95
BATTLES, PAUL	DO	562 S ELLIOTT ST		PRYOR	OK	74361	Family Practice	36415	508	436	72	\$421
HINSHAW, STEVEN	DO	110 W BROADWAY AVE		WAURIKA	OK	73573	Family Practice	71020	502	274	228	\$219
BROCK, RICHARD	DO	800 24TH AVE NW		NORMAN	OK	73069	Family Practice	71020	494	458	36	\$103

MEDICARE PATIENT CARE PER YEAR

- + Typical = 4 Visits per year \$360 per year – **most patients**
- + AWWs are another \$225 - \$350 per year if performed properly – **all patients**
- + Cognitive Assessments \$270 per year – **some patients**
- + If following MIPS– multiple diagnostics like EKG, spirometer, ABI,
- + CCM – Another \$154 to \$420 per year – **most patients**
- + Signing HHA 485 Forms - \$154 per year – **some patients**
- + Remote Patient Care – Avg \$60 p/m net profit (\$720 p/y) **some patients**
- + Prolonged Care, Removing Cerumen, Vaccines, Labs, Injections, Lesion Destruction & More – **most patients**



**WHAT SHOULD A FAMILY
PRACTICE EXPECT TO MAKE
EACH YEAR FROM
MEDICARE PT ON AVERAGE?**

Minimum \$1105.00

Office visits

Diagnostic Testing & CLIA waived testing

Chronic Care Management

Annual Wellness Visits

Cognitive Testing & Assessments

Remote Patient Monitoring

REMOTE PT MONITORING?

Improved Pt Outcomes in in KLAS Study – CMS currently in 3rd year study w Medi-Medi pts

- **38% Reduced hospital admissions**
- **25% Improved Patient Satisfaction**
- **25% Reduced hospital re-admissions**
- **25% Reduced emergency room visits**
- **17% Quantified cost reductions**
- **13% Improved medication compliance**

REMOTE PT MONITORING?

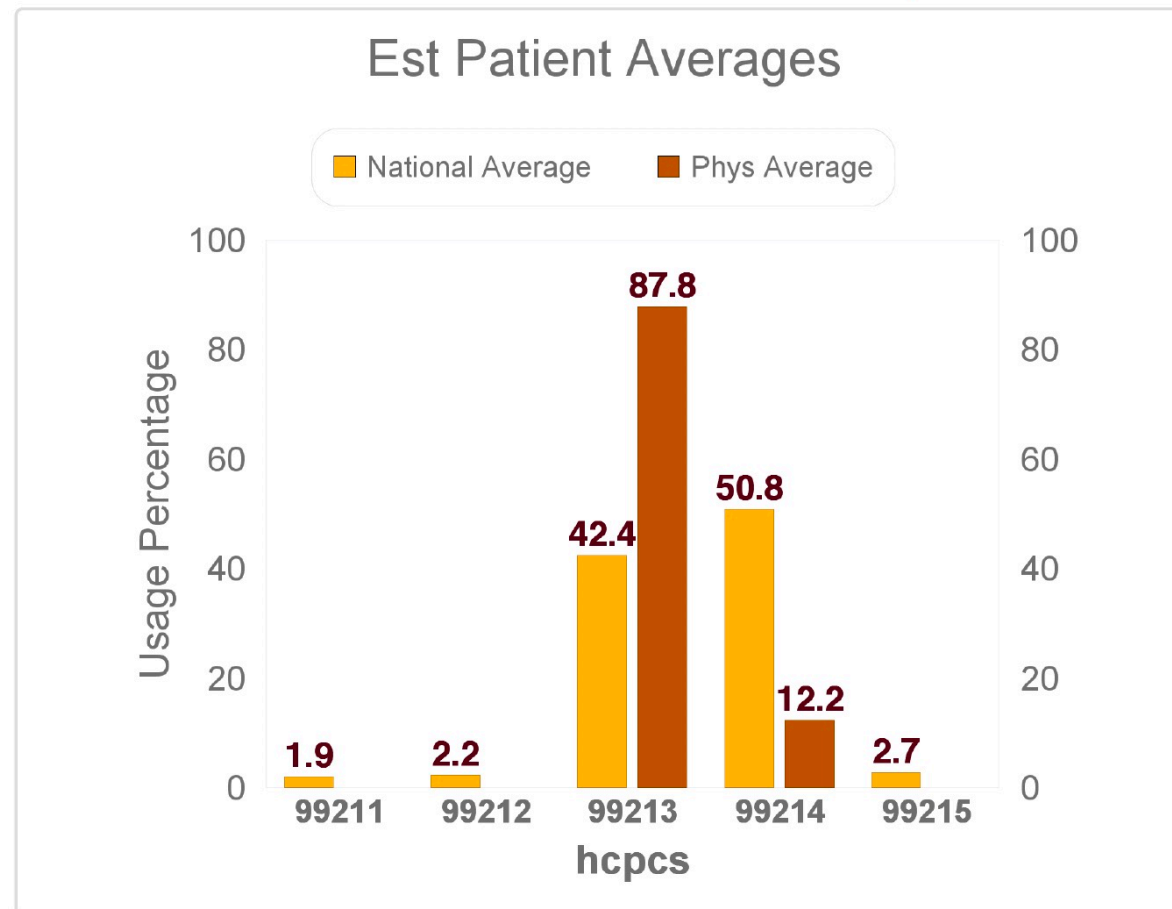
Improved Clinic Income

- 3 NEW CPT CODES FOR 2019
- Not Subject To TeleHealth Regulations
- Monitors Rental \$42 p/Month
- Net Profit **\$63 p/Month**

Medicare Allowed	CODES
\$ 17.36	99453
\$ 57.18	99454
\$ 48.41	99457
\$ 105.59	

UNDER-CODING?

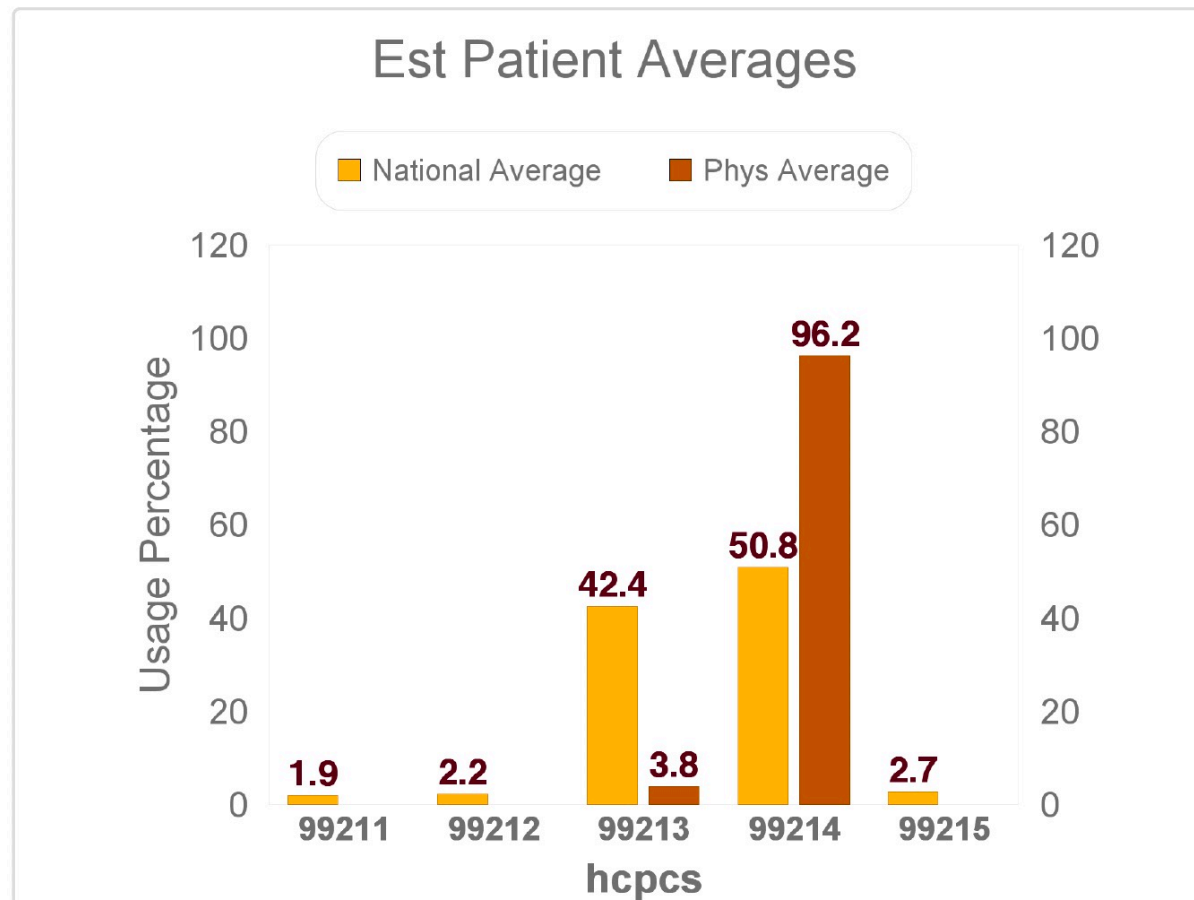
FAMILY PHYSICIAN D.O. IN STILLWATER, OK



FLAGGING AUDITS

+ If you use a higher level code more than 10% above average for your specialty – you will be audited

D.O. FAMILY PHYSICIAN IN ARDMORE, OK



donsel@donself.com

www.donself.com

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