



**Payment and Practice Management Memo
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NGS Announces Prepayment Review for Specific Evaluation and Management Services

National Government Services (NGS) recently announced it will conduct prepayment reviews on claims for higher level Evaluation and Management (E/M) codes for both inpatient and office services. NGS states that the results of these reviews will serve as the starting point for provider-education materials. If you receive a request for documentation, please make sure to address it promptly. You will have 30 days to respond.

E/M Services Impacted by This Review

CPT Code	CPT Descriptor
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity
99215	Office or other outpatient visit for the evaluation and management of an established of an established patient, which requires at least 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity
99223	Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity
99233	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of high complexity

All ASA members - especially those who practice Pain Medicine and report E/M more often - should make sure that they are appropriately and accurately documenting the E/M services they provide per the documentation guidelines outlined in CPT and available on the Centers for Medicare and Medicaid Services (CMS) website. While NGS is the Medicare Administrative Contractor (MAC) for MN, WI, IL, NY, CT, MA, RI, VT, ME and NH, this information and guidance is important to you even if NGS is not your Medicare contractor. The Office of the Inspector General (OIG) has long been interested in E/M coding and the issue is part of the 2014 OIG Workplan. The 2014 Workplan states,

Evaluation and management services—Inappropriate payments

Billing and Payments. We will determine the extent to which selected payments for evaluation and management (E/M) services were inappropriate. We will also review multiple E/M services associated with the same providers and beneficiaries to determine the extent to which electronic or paper medical records had documentation vulnerabilities. **Context—**Medicare contractors have noted an increased frequency of medical records with identical documentation across services. Medicare requires providers to select the billing code for the service on the basis of the content of the service and to have documentation to support the level of service reported.

Claims Processing Manual, Pub. No. 100-04, ch. 12, § 30.6.1.) (OEI; 04-10-00181; 04-10-00182; expected issue date: FY 2014; work in progress)

Be proactive and ensure complete documentation and proper code selection when reporting E/M services.

Resources:

CMS Evaluation and Management Services Documentation Guidelines: [MLN Matters: Evaluation and Management Services Guide](#)

The NGS Announcement: [NGS ANNOUNCEMENT: Service-Specific Prepayment Reviews of Evaluation and Management Services](#)

HHS OIG 2014 Workplan: <http://oig.hhs.gov/reports-and-publications/workplan/index.asp>