ADVANCED DATA SYSTEMS RCM

INSIGHTS FOR PODIATRY

Articles of Interest in the World of Revenue Cycle Management for Podiatry

Presented by ADSRCM and our MedicsRCM Services for Comprehensive Outsourced Billing, Staffing, Analytics, and Clinical Charting for Podiatry

Podiatric Bingo: HCPCS G2211

If there was such a thing, that could be the winning number. But what's this really about?

HCPCS G2211 is a podiatric code used when complex conditions exist for an existing or new patient. When and when not to use it is a little tricky. That's what this is about. Here are the "ands/ors" of it:

✓ It's outpatient-related.

✓ Its E/M relevance is:

- Part of providing all needed health care services for that patient

and/or

- Part of ongoing care related to a patient's single, serious condition

and/or

- Part of ongoing care related to a patient's complex condition

The Ground rules for 2211 are never to submit it alone; it enjoys company. Use the E/M time or level of decision-making factor. Once that's determined, add G2211 to the claim, considering the bullets above.

When to not use G2211? If a 25 modifier has a relationship with the claim. G2211 doesn't like that type of company.

If the stars are aligned and G2211 can be included, be sure to also include documentation.

Good luck in using G2211 correctly.

(Luck isn't needed with ADSRCM, and you don't need to know about the "ands/ors," the 25 modifier, or the documentation *because we know it for you*! It's only one of the many reasons we'll guarantee to increase your revenue in 90 days!)

AMA Provides 2025 Code Sets

The new code set has 420 updates, AI-related medical services, and more.

Click here for the AMA press release. You can also visit www.ama.org to see the updates.

(ADSRCM has clients covered with coding, which has become unwieldy and complicated since it also includes E/M's nuances.)

No Surprises Surprise

Getting an occasional surprise can be good, assuming it's a good surprise. But more than 16,000 of them? And not good ones? It's unfathomable unless you're talking about the No Surprises Act (NSA).

As of the end of June (2024), CMS had handled 12,700 complaints related to the NSA, resulting in almost $4.2 million in relief paid to healthcare consumers.

Reminder that the NSA went into effect in January 2022 to help consumers/patients not be the victims of unknown or previously unexplained medical charges. The Act calls for providers or entities to fully explain costs to consumers/patients so they don't get a surprise statement for something they had no knowledge about.

By the way, "entities" include air ambulance service providers, accounting for more surprise billings than might be thought.

Click here for the CMS report on NSA violations. You can also visit www.cms.gov for NSA violations.

(Don't be an NSA victim! ADSRCM supports access to a patient responsibility estimator that is ideal for advising patients/guarantors about close approximations of their balances after insurance is reimbursed. It's accessible as part of scheduling appointments and produces results based on appointment reasons. The estimator can be viewed again as patients leave for an even more accurate picture now that actual procedures have been performed. It's also available with MedicsPremier from ADS if an in-house platform is preferred.)

Noncompete Nonstarter

It was set to be quite the watercooler conversation topic, but now, a TX judge blocked the noncompete ban that was ironically set to take effect a few days after Labor Day.

The ban would've barred most types of post-employment agreements and prevented employees from working for a competitor within specific time constraints. With the ban being struck down, employers can continue to use noncompete agreements, at least for now, as it could take quite some time to overturn if appealed.

Click here for an American Hospital Association article with more details about the noncompete ban. Or visit www.aha.org for their noncompete information.

Purchasable Products and Podiatry

You might already sell products or may be considering doing so. Products can produce noteworthy revenue for podiatry.

You'll need inventory management, sales tax calculations, financial and operational reports on products, payments for products separately from those for "regular" podiatry visits, and possibly even payments by gift cards and coupons.

Ideally, the RCM service or in-office financial and management system you're using now has a built-in capability to handle products. If so, you'd eliminate needing a separate system, another vendor, and no doubt, a related interface.

Your revenue from selling products would be more significant if the automation needed is built into your

existing RCM or automation platform.

(ADSRCM supports a built-in products manager as described, as does the MedicsPremier platform from ADS if in-house automation is preferred!)

Podiatry Marketing and Advertising

You know that podiatry can be competitive, which is why it's not unusual to see podiatry involved in marketing campaigns. Print advertising, postcards/mailers, billboards, back-of-the-bus ads, local TV and radio spots, and social media advertising are all ways to spread the word about your podiatry group.

You'll want a CRM (customer relationship manager) to track results and ROI if you advertise. As with a system described above for products/non-medical services, you'll ideally have a CRM capability built into your existing RCM service or in-house billing platform because stand-alone CRMs can be astoundingly expensive, especially with the interfaces needed.

That said, if you prefer to use a particular CRM, it should be interfaceable with your RCM or in-house financial system.

The bottom line is that regardless of how much or little you spend on marketing in terms of expense and time, you'll want to know if it's working. A CRM will do that for you.

(ADSRCM clients can use a built-in CRM at no additional cost, as can ADS clients who prefer to use an in-house financial/operations platform. Both also support interfaces with virtually any other stand-alone CRM!)

Postage Reminder

We'd mail you a reminder, but it's become too expensive.

On July 14, the cost of first-class postage rose .5 cents from .68 to .73 cents. Paper, envelopes, handling, and printing also increased.

You'll want patient statements to be digital through interactive texts, email, or both. Both should support a way for patients to pay you directly through their texts or emails.

Each format should provide other advantages. They should be trackable, with you able to see if they're received and then if they're opened. Have they been paid, or are they still unpaid if received and opened? If unopened, why? Based on each result, you're able to make intelligent follow-up calls.

Balance-due texts and emailable statements can dramatically reduce your need for postage and paper and provide you with powerful ways to track and follow up.

(ADSRCM clients take advantage of digital statements and a portal as described, as to ADS clients with MedicsPremier if an in-house platform is preferred.)

Podiatric Telehealth

Podiatry is a very telehealth-friendly specialty, especially since podiatric patients may find it challenging to come in even when they're local to the practice.

Certainly, not every encounter can be virtual. But when they can, patients are able to take advantage of the

convenience, mobility, and engagement that telemedicine sessions present. And you can avoid the resources needed for those in-office visits (intake, exam rooms, magazines going home with patients, etc.).

Revenue from telemedicine sessions can be significant assuming your staff knows how to bill for them (there are some specific billing considerations).

You should take full advantage of telemedicine for the efficiency, engagement, and revenue it produces.

(ADSRCM works with the Medics Telemedicine app option, which is embedded into our billing and EHR platform, and we're proficient in telemedicine billing and claims. The scheduler is ideal for telemedicine appointments. The app is also available with the MedicsCloud Suite from ADS if in-house automation is preferred.)

Medical Practice Staffing Issues Continue

Staffing issues continue to be a concern in healthcare settings, and podiatry is no exception. This includes both sides of staffing: clinical/providers and administrative/"back-of-the-house" personnel.

According to a recent Harvard Undergraduate Health Policy Review (HUHPR) study, factors such as burnout/stressful environments, fewer educational resources and an increasingly aging workforce, have contributed to the current situation, most if not all of which can be traced back to the COVID-19 pandemic.

Click here for the HUHPR review. Or visit www.HUHPR.org for their staffing review.

Practices and groups have found that making relationships with colleges and universities to identify potential providers and clinicians. The same is true for vocational schools and academies with medical office management and administration curricula.

However, for administrative staff, another viable option is to work with an outsourced RCM company that has staff with expertise in claims, billing, EDI, and analytics to help supplement in-house staffing by offloading so many routines.

You have staffing options; you must determine which options work best for you.

(ADSRCM, with our outsourced, behind-the-scenes staffing, can help consolidate an array of your in-house routines to help maximize revenue and efficiency.)

The Case of the Fraudulent Foot Baths

It may sound like a detective story from years ago, but it's recent and real.

On June 27, a podiatrist in TN was sentenced to four years for a scheme to defraud Medicare and TennCare, a TN state Medicaid program, by prescribing and dispensing medically unnecessary foot bath medications for which he obtained millions of dollars in reimbursements.

According to court documents, the podiatrist, who owned and operated a podiatry clinic and two pharmacies, regularly prescribed antibiotic and antifungal drugs to be mixed into a tub of water for patients to soak their feet.

These drug cocktails included capsules, creams, and powders that were not indicated to be dissolved in water. Some were not even water-soluble, but the podiatrist chose them based on their anticipated reimbursement amount rather than medical necessity.

From October 2018 through September 2021, his pharmacies submitted nearly $4 million in claims to Medicare and TennCare for dispensing the expensive foot bath medications that were not medically necessary and not eligible for reimbursement.

Click here for details from the Department of Justice.

Converse with Patients and get Hands-Free AI Charting and Data Capture!

You're speaking with the patient about their vacation, which turns at some point to their plantar fasciitis issue. Suddenly, your EHR comes alive and begins to capture that conversation using real language understanding. It inserts relevant information into the patient's record so that the encounter can be completed—essentially as part of speaking with the patient!

Often referred to as "ambient data capture," this type of AI-driven technology makes encounters more personal without locking you into your computer screen. It is also hands-free since data flows in automatically. Of course, this all works to make encounters more efficient as well.

Real language data capture is ideal for podiatry, a report-oriented, content-heavy specialty. Simply conversing with patients can overcome many obstacles!

(ADSRCM clients can access the ONC-certified MedicsCloud EHR for Podiatry with its built-in MedicsSpeak and MedicsListen platforms for natural language data capture as described. ADS clients can do the same with the MedicsCloud Suite if in-office automation is preferred.)

<<< >>>

We hope you enjoyed the read.

Contact us at 844-599-6881 or email rcminfo@adsc.com for more about our services for driving revenue, productivity/staffing, and clinical charting, either with ADSRCM as an outsourced service or, alternatively, with the MedicsCloud Suite from ADS if in-practice automation is better for you.

ADSRCM for Podiatry   ADS for Podiatry

ADVANCED DATA
SYSTEMS RCM