PCC Coding Weblab

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Roadmap – Version 7.4

- *Planned* deployment
  - Sunday 6/26/16
- Release Resources (weblabs, videos, manuals)
  - Will soon be at http://learn.pcc.com/updates/

PCC v7.4 Highlights

- inscoar: show total charges for the visit
  - HCFA and ECS lines will include total
- eligibility: verify secondary (medicaid) as well
  - Patient eligibility screen will have a selector
- Add visit notes to inscoar output
  - Billing history will include notes
Q: I found a SNOMED which matches my need but the ICD-10 mapped to it isn't quite right. How can I find a SNOMED which maps to the ICD-10 I really want to bill?

A: You don't. You create a map to meet both documentation and billing needs.

Q: Do we have to record XYZ at every visit to get “credit”?

A: Record what you think and do and the billing works itself out.
Your Coding Q's (cont'd)

Q: When do I bill 96110 vs. the 96127 for periodic screenings?
A: Depends upon the reason/tool. AAP offers “Standardized Screening/Testing Coding Fact Sheet for Primary Care Pediatricians: Developmental/Behavioral/Emotional”

Your Billing Q's

Q: Do I need modifier X on CPT 12345 to get it paid?
A: Unless a modifier accurately enhances the CPT to better match your record, it’s a billing requirement. Get the requirement in writing.

AAP Coding Newsletter

May 2016 Issue
- Mental/Behavioral Health in Medical Home
- Medicaid NCCI Edit Updates
  - Placement of urinary catheter (51701)
- ICD-10
  - Initial, subsequent, sequela guidance
  - Coding for feeding problems which began before 29th day
What Questions Do You Have?

Feature Demo?

Next Coding Weblab: Tues 6/14/16 12pm EST