Documentation, Coding and Reimbursement for Medical Oncology in 2018

Please stand by. The webinar will begin shortly.

For more than 15 years, Oncology Management Consulting Group has provided the finest professional consulting services to oncology providers across the US. Our highly knowledgeable consultants are nationally recognized specialists that assist organizations to achieve their business goals and to maximize their organizational performance. With solutions tailored to each client's very precise needs, OMC Group offers the leadership, vision, and collaboration that oncology organizations need to adapt to and to succeed in the rapidly changing healthcare industry.

- Financial and Market Analyses
- New Center Development
- Hospital/Physician Integration
- Strategic Planning
- Operational Assessments
- Revenue Cycle Reviews
- Implementation and Interim Leadership
- Performance and Financial Benchmarking

Oncology MANAGEMENT CONSULTING GROUP

610-597-9799
solutions@oncologymgmt.com

Documentation, Coding and Reimbursement for Medical Oncology in 2018

December 15, 2017

Teri U. Guidi, MBA, FAAMA

Elaine Kloos, RN, NE-BC, MBA

Oncology MANAGEMENT CONSULTING GROUP

610-597-9799

solutions@oncologymgmt.com

Teri U. Guidi, MBA, FAAMA

Teri Guidi is the President and CEO of Oncology Management Consulting Group. With more than 30 years of experience in oncology management, Ms. Guidi is expert in the areas of strategic planning, reimbursement, program development, and market assessment. She has worked with health networks, hospitals, private practices, and the pharmaceutical industry. Recent projects have included strategic and business planning, joint venture development, hospital/physician alignment, educational programs, and program assessments. She has held positions at institutions ranging from NCI-designated comprehensive cancer centers to large teaching hospitals in integrated health systems to small community hospitals. She has served as Executive Director and System Vice President of cancer service lines, and as Vice President of a health system-owned medical oncology practice. Ms. Guidi's experience spans all areas of outpatient oncology including infusion services, radiation oncology, clinical trials, and tumor registry. Among her major areas of interest are financial analysis and profitability reporting.

Ms. Guidi is a frequent speaker at national and regional professional conferences, with numerous publications on a wide variety of oncology-related topics. She serves on the Editorial Boards of *Oncology Issues* and *Oncology Practice Management*, on several professional society committees, and served two terms on the American College of Surgeons Commission on Cancer. Ms. Guidi received her Master's Degree in Business Administration from the Carroll School of Management at Boston College in 1995 and earned Fellowship in the American Academy of Medical Administrators in 1999.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Elaine Kloos, RN, NE-BC, MBA

Elaine Kloos is Senior Consultant with Oncology Management Consulting Group and brings over 25 years of experience in the healthcare field. Ms. Kloos also has over 18 years of expertise in Oncology Administration and Women's Breast Health Services with specific areas of focus in clinical service line development, comprehensive breast care centers, strategic planning, facility design and project management. As a Registered Nurse, Ms. Kloos adds significant clinical expertise to the OMC Group and is very well versed in clinical operations, patient satisfaction, radiation oncology equipment selection, new program development as well as JCAHO, ACoS, ACR and ACRO accreditation processes. She has served as a Cancer Service Line Director and Vice President for numerous healthcare systems and community based hospitals. Ms. Kloos' oncology experience includes inpatient medical and GYN oncology, radiation oncology, outpatient chemotherapy infusion, medical and GYN oncology physician practices, comprehensive breast centers, high-risk breast cancer and high-risk colon cancer programs, clinical research, community outreach, and cancer registry. Among her major areas of proficiency are revenue cycle analysis of the oncology service line (both medical oncology and radiation oncology), strategic planning, market analysis and positioning, operational efficiency, new program development and facility design.

Ms. Kloos is board certified as a Nurse Executive by the American Nurses' Association. She is active in multiple national organizations including the Association of Cancer Executives, the Oncology Nursing Society and the Association of Community Cancer Centers. Ms. Kloos serves on the Board of Directors for the Association of Cancer Executives and is the current Treasurer and active on the Vendor Relations Committee. Ms. Kloos received her Nursing Degree from the University of Tennessee, a Bachelor of Science degree in Healthcare Administration from Auburn University and a Master's Degree in Business Administration from Louisiana State University.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Agenda

- 2018 Rules
- Code Selection and Documentation
  - Initial Codes
  - Substance
  - Route
  - Time
  - Add-on Codes
- Wasted drugs
- Q&A

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

2018 Rules: 340B

- For hospital infusion centers, drugs will be paid as follows:
  - Drugs costing <$120/day are not paid
  - Drugs purchased through conventional channels will be paid at ASP + 6%
  - On-campus hospital centers will be paid ASP + 6% for pass-through drugs and ASP – 22.5% for other drugs when purchased through 340B (PPS exempt centers, CAH's and rural hospitals <100 beds will still get ASP + 6%)
  - On-campus hospital centers will bill drugs with modifier"JG" and exempt centers will use "TB" to indicate drugs purchased through 340B

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

2018 Rules: Off-Campus Centers

- Off-campus centers that began billing after 11/1/2015 will be paid at 40% of the OPPS rates except for drugs. This is down from 50% in 2017.
- Drugs for these centers will be paid at current rates (i.e., ASP + 6%) unless packaged.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Packaged vs. Bundled

- A “packaged” code is one that can and should be billed, although when billed with certain other codes, there will be no payment from Medicare and some other payers.
- A “bundled” code is one that may not be billed to Medicare when the service is provided in conjunction with other specified codes because it is considered part of those other codes. Some other payers will still permit and pay for these.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

2018 Rules: Packaged Infusion Codes

- When these codes are billed at the same encounter as another infusion code, they will not be paid. An example is a therapeutic injection at the same encounter as a chemotherapy infusion.

Packaged Codes	
96371	Sc ther infusion reset pump
96372	Ther/proph/diag inj sc/im
96377	Application on-body injector
96379	Ther/prop/diag inj/inf proc
96401	Chemo anti-neopl sq/im
96402	Chemo hormon antineopl sq/im
96405	Chemo intralesional up to 7

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Initial Encounters

- Only a few codes are termed “initial”
- “Initial” has nothing to do with the sequence of procedures
- Only one initial code can be billed for the same encounter. Everything else is “sequential” (aka “add’l hour” or “add-on”).
- In the physician office it is the main reason for the encounter
- In the HOPD there is a hierarchy
  1. Chemotherapy administration
  2. Therapeutic substance administration
  3. Hydration

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Initial Codes

Code	Description
96360	Hydration iv infusion init
96365	Ther/proph/diag iv inf init
96369	Sc ther infusion up to 1 hr init
96374	Ther/proph/diag inj iv push init
96409	Chemo iv push sngl drug init
96413	Chemo iv infusion 1 hr init
96425	Chemotherapy infusion method
96440	Chemotherapy intracavitary
96446	Chemotx admn prtl cavity
96450	Chemotherapy into cns

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Hierarchy Example

- 96360 IV hydration initial (>30 minutes)
- 96361 IV hydration each add'l hour
- 96365 therapeutic IV initial
- 96367 therapeutic IV each add'l hour
- 96413 chemotherapy IV initial
- 96415 chemotherapy IV each add'l hour

- Hydration from 9:00 to 10:00
- Therapeutic infusion from 10:00 to 11:00
- Chemotherapy infusion from 11:00-12:00

Bill 96413, 96367, 96361

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Substance

- A therapeutic substance provides support to mitigate potential response to other substances. The most common example is diphenhydramine to prevent possible allergy-type reactions.
- A chemotherapeutic substance is one intended to attack disease.
- Occasionally a drug could be one or the other such as leucovorin, (most payers view as therapeutic, but not all).

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Documentation for Drugs

- Physician order for specific drugs and dosage must exist, including route and duration.
- Pharmacy documentation of drugs and dosage dispensed must exist, including any single dose vial waste.
- Nursing documentation of drugs and dose given must exist, including start and stop time.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Drugs

- The vast majority of drugs are assigned HCPCS codes beginning with the letter J.
- Each code has a defined dose.
- The units billed for each code will require calculation based on definition.
- Example: J9000 is billable in 10 mg increments. If 50 mg are given, bill 5 units of J9000. One should round up to the next increment: if 55 mg are given, bill 6 units.
- Calculation of units is best done via IT systems (which should be checked quarterly for any HCPCS changes).

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Diagnosis

- Most drugs are approved by the FDA for specific diagnoses.
- Most payers will not pay for a drug given for non-approved diagnoses, including anti-emetics and supportive drugs.
- Accurate and complete diagnoses must exist in the record.
- Documentation is best done by certified coders based on physician documentation.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Route

- Intravenous (IV)
- Subcutaneous/intramuscular (SQ/IM)
- Intra-arterial (IA)
- Intralesional
- Intracavitary
- Peritoneal cavity
- CNS

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Documentation for Route

- Physician order must specify the route for each substance ordered.
- Nursing documentation must specify the route for each substance given.
- Physician order must specify the duration for each substance ordered.
- Nursing documentation of start and stop time must match the ordered duration.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Time (duration) for All Administrations

- Up to 15 minutes is a “push”
- Over 15 minutes is an “infusion”
- Each hour may be billed, but not until the 91st minute.
  - 9-10 is first hour
  - 10-11 is second hour but can't bill until 10:31
  - 11-12 is third hour but can't bill until 11:31
  - 12-1 is fourth hour but can't bill until 12:31

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Stand Alone Codes

Code	Description
96372	Ther/proph/diag inj sc/im
96373	Ther/proph/diag inj ia
96401	Chemo anti-neopl sq/im
96402	Chemo hormon antineopl sq/im
96405	Chemo intralesional up to 7
96416	Chemo prolong infuse w/pump
96420	Chemo ia push technique
96422	Chemo ia infusion up to 1 hr
96521	Refill/maint portable pump
96522	Refill/maint pump/resvr syst
96523	Irrig drug delivery device

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Add-on Codes

- Two basic types:
  - Doing the same thing twice or more
    - E.g., another hour of the same procedure
  - Doing the same thing with a different drug
    - E.g., another infusion of a different drug

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Same Thing Twice

Code	Description	Notes
96361	Hydration iv infusion add-on	2nd hour or with another initial
96366	Ther/proph/diag iv inf addon	2nd hour or with another initial
96368	Ther/diag concurrent inf	Only once/encounter for therapeutic infusion running at the same time as any other iv and only if in a separate bag.
96370	Sc ther infusion addl hr	2nd hour or with another initial
96371	Sc ther infusion reset pump	Additional pump setup for a new sq infusion
96376	Tx/pro/dx inj same drug addon	2nd push of the same drug (must be more than 30 minutes later)
96406	Chemo intralesional over 7	
96415	Chemo iv infusion addl hr	2nd hour
96423	Chemo ia infuse each addl hr	2nd hour

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Changing Drugs

Code	Description	Notes
96367	Tx/proph/dg addl seq iv inf	New drug or with another initial
96375	Tx/pro/dx inj new drug addon	New drug or with another initial
96411	Chemo iv push addl drug	New drug
96417	Chemo iv infus each addl seq	New drug

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Documentation for Administrations

- Nursing documentation for precise start and stop times for all administrations except injections must exist.
- Rounding of time should never happen.
- Selection of codes is best done by trained coders who stay up-to-date on rules and who are familiar with oncology. Familiarity allows coders to question clinical staff when, for example, it appears that something is missing.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Wasted Drugs

- CMS and most other payers will reimburse for drugs that were wasted if:
  - The vial is labelled as a “Single Dose Vial”
  - It was not possible to use the left over drugs because
    - The pharmacy is not compliant with applicable USP rules or
    - The pharmacy is compliant but no other patient was able to receive the drug before it expired

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Documentation of Waste

- There must be documentation in the medical record (not billing system) of the reason the drug was wasted and the amount
- For most payers, the wasted amount should be billed on a separate line with modifier “JW”. Mandatory for Medicare as of 1.3.2016
- Example: J9035 10 mg. If a 100 mg SDV is opened, 80 mg are used, no patient available for remaining 20 mg, bill 8 units of J9035 and 2 units of J9035-JW.

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Useful Web Sites

- HOPD Addendum B:
  - https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Addendum-A-and-Addendum-B-Updates.html
- Physician Fee Schedule:
  - https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-National-Payment-Amount-File.html
- ASP files:
  - https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice/2018ASPFiles.html

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com

Questions

- Any questions not addressed here may be emailed to solutions@oncologymgmt.com
- Sincere thanks to all of you for joining us today. We hope that you will keep OMC Group in mind when consulting needs arise in the future

For more than 15 years, Oncology Management Consulting Group has provided the finest professional consulting services to oncology providers across the US. Our highly knowledgeable consultants are nationally recognized specialists that assist organizations to achieve their business goals and to maximize their organizational performance. With solutions tailored to each client's very precise needs, OMC Group offers the leadership, vision, and collaboration that oncology organizations need to adapt to and to succeed in the rapidly changing healthcare industry.

- Financial and Market Analyses
- New Center Development
- Hospital/Physician Integration
- Strategic Planning
- Operational Assessments
- Revenue Cycle Reviews
- Implementation and Interim Leadership
- Performance and Financial Benchmarking

Oncology MANAGEMENT CONSULTING GROUP
610-597-9799
solutions@oncologymgmt.com