



Novel Perspectives to Optimize Practice Management

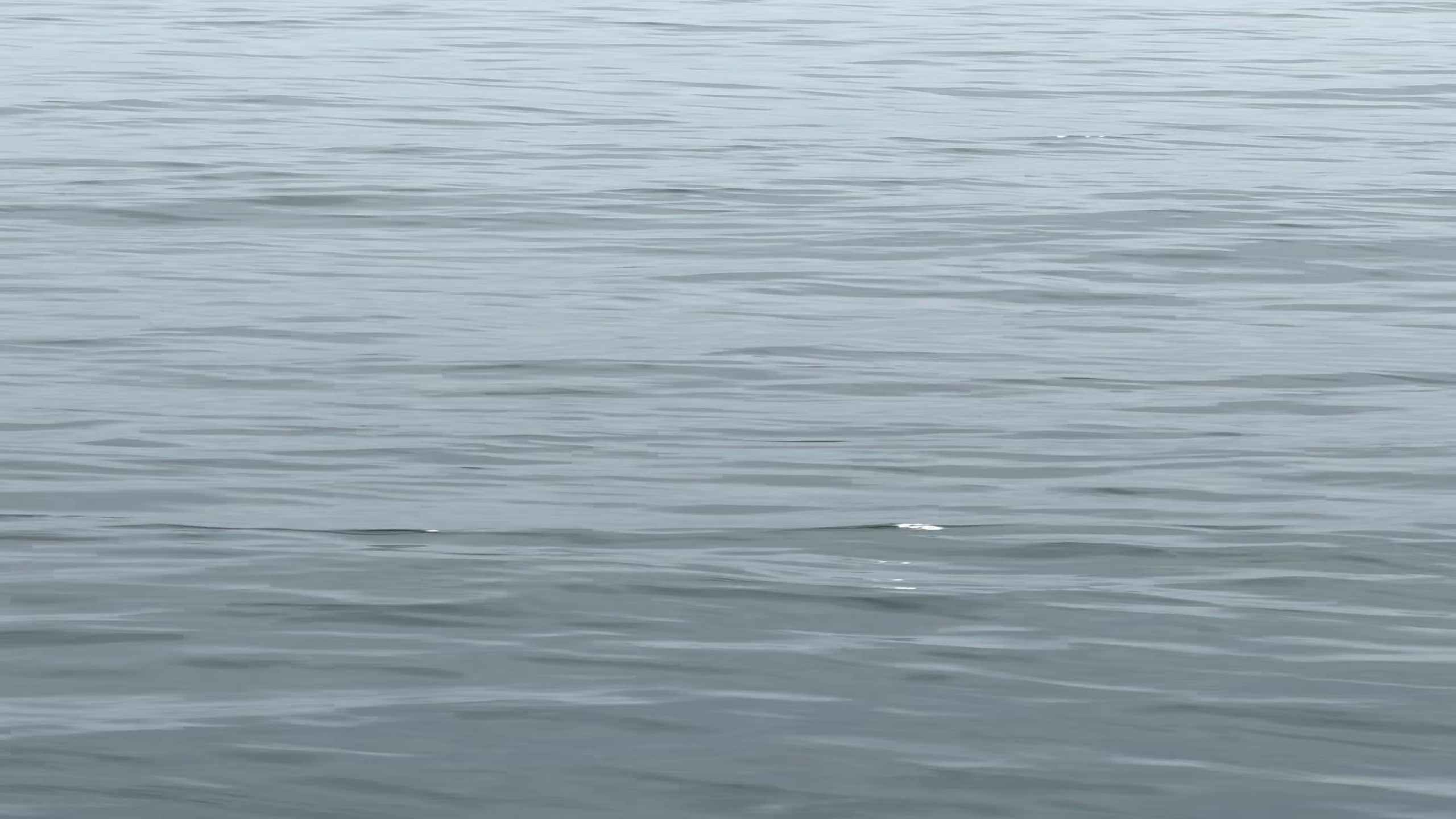
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Learning Objective

Upon completion of this activity, participants should be able to identify opportunities for growth in their practices and formulate a plan to implement 1 those those opportunities.





How to Optimize Workflow?

- Build the website and integrate flow
 - Calendar appts linking to the software
 - Link to fill out paperwork
 - EMR connection for paperwork
 - Insurance Listing for patients and insurance input to verify in advance
 - Text messaging for reminders/confirmation of appts.



At the Office

- Check in Kiosk/Ipad
- Precheck insurance verification
- Separate check in and check out desk
- Staffing- Prior auth/messages/ideal staffing number
- Training –one on one and then running it with the team





- Create paperwork with insurance and prior auths in mind.
- Failed meds – circle the ones you’ve failed in categories
- QOL measures- ACT, UAS 7, POEM/EASI, etc.
- Biologic/immunodeficiency/H AE sheets with prompts printed.
- Make the patient a partner-
 - Have patients bring in the med lists from the pharmacy.
 - Have patients journal or do an app to capture flare data

Paper

EMR

- Partner with the vendor to work on workflow and minimize clicks
- Look for partnerships for an immunotherapy module
- Work with vendors working on utilizing A/I
- Multiple ways to use A/I – smart prompts, sound and dictation technology, prior authorization optimization
- Use the EMR to message and reach out to specific patient populations
- Program via smart phrases, macros and order sets as much as possible.

Know your Billing and Coding

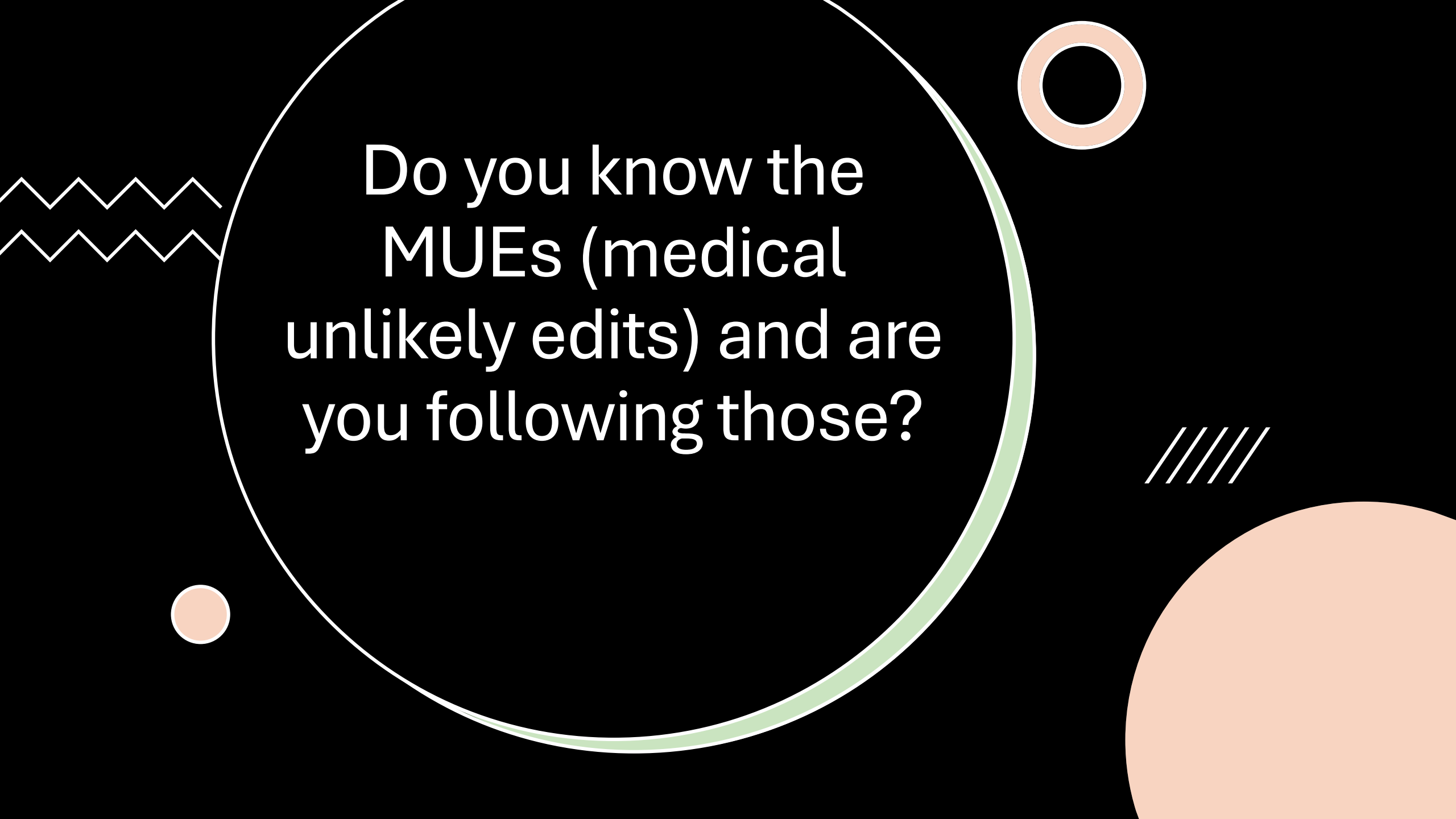
If employed- Learn about RVUs (relative value units)- what RVUs are covered by the institution you work at and who gets credit for those.

How many RVUs are expected in your position and what is the RVU dollar per unit?

CPT Code	Description	2023 RVUs	2023 National Payment Amt. (CF of \$33.8872)	Percent Change 2023 to 2024	2024 RVUs	2024 National Payment Amt. (CF of \$32.7442)
95004	Percutaneous allergy skin tests	0.12	\$4.07	-11.43%	0.11	\$3.60
95012	Nitric oxide expired gas determination	0.56	\$18.98	-1.65%	0.57	\$18.66
95017	Venom testing; percutaneous and intradermal	0.26	\$8.81	-3.37%	0.26	\$8.51
95018	Drug/biological testing; percutaneous and intradermal	0.60	\$20.33	-3.37%	0.60	\$19.65
95024	Allergy test, intradermal	0.24	\$8.13	-3.37%	0.24	\$7.86
95027	Allergy test, intradermal for airborne	0.15	\$5.08	-3.37%	0.15	\$4.91
95070	Inhalation bronchial challenge testing	1.03	\$34.90	-1.50%	1.05	\$34.38
95076	Ingestion challenge test; first 120 minutes	3.60	\$121.99	-0.69%	3.70	\$121.15
95079	Ingestion challenge test; each additional hour	2.51	\$85.06	-1.45%	2.56	\$83.83
95115	Immunotherapy, one injection	0.30	\$10.17	-0.15%	0.31	\$10.15
95117	Immunotherapy, two or more injections	0.35	\$11.86	2.15%	0.37	\$12.12

CPT Code	Description	2023 RVUs	2023 National Payment Amt. (CF of \$33.8872)	Percent Change 2023 to 2024	2024 RVUs	2024 National Payment Amt. (CF of \$32.7442)		
95147	Antigen therapy services (3 venoms)	1.70	\$57.04	7.00%	1.95	\$63.83		
95148	Antigen therapy services (4 venoms)	2.60	\$88.11	7.78%	2.90	\$94.96		
95149	Antigen therapy services (5 venoms)	3.44	\$116.57	8.42%	3.86	\$126.39		
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses)	0.45	\$15.25	-5.52%	0.44	\$14.41		
95170	other arthropod (specify number of doses)	0.34	\$11.52	-6.21%	0.33	\$10.81		
95180	rapid desensitization procedure, each hour	4.07	\$137.92	-1.47%	4.15	\$135.89		
94010	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation	0.80	\$27.11	-0.96%	0.82	\$26.85		
94014	patient-initiated spirometry recording per 30-day; includes education, transmission of spirometric tracing, data capture, analysis of transmitted data, periodic recalibration and review and interpretation	1.64	\$55.58	-1.02%	1.68	\$55.01		
94060	Bronchodilation responsiveness, spirometry pre and post bronchodilator admin.	1.15	\$38.97	-1.69%	1.17	\$38.31		

CPT Code	Description	2023 RVUs	2023 National Payment Amt. (CF of \$33.8872)	Percent Change 2023 to 2024	2024 RVUs	2024 National Payment Amt. (CF of \$33.8872)
94070	Bronchospasm provocation eval. multiple spirometric determinations, with administered agents	1.82	\$61.67	0.34%	1.89	\$64.14
96401	Anti-neoplastic injection	2.17	\$73.54	-4.26%	2.15	\$70.06
96372	Therapeutic injection	0.42	\$14.23	-1.07%	0.43	\$14.00
99202	Office/outpatient visit new	2.15	\$72.86	-2.47%	2.17	\$70.88
99203	Office/outpatient visit new	3.33	\$112.84	-2.79%	3.35	\$109.85
99204	Office/outpatient visit new	4.94	\$167.40	-1.81%	5.02	\$164.22
99205	Office/outpatient visit new	6.52	\$220.94	-1.89%	6.62	\$216.52
99211	Office/outpatient visit est	0.69	\$23.38	-1.97%	0.70	\$22.94
99212	Office/outpatient visit est	1.68	\$56.93	-2.22%	1.70	\$55.52
99213	Office/outpatient visit est	2.68	\$90.82	-1.57%	2.73	\$88.62
99214	Office/outpatient visit est	3.79	\$128.43	-1.84%	3.85	\$125.72
99215	Office/outpatient visit est	5.31	\$179.94	-1.37%	5.42	\$176.82



Do you know the
MUEs (medical
unlikely edits) and are
you following those?

CODE	DESCRIPTION	MEDICARE AND MEDICAID MUE (PER DATE OF SERVICE)
95004	Percutaneous tests (scratch, puncture, prick)	80
95012	Expired Nitric Oxide	2
95017	Venom skin testing	27
95018	Skin testing for drugs and biologicals	19
95024	Intracutaneous tests/allergenic extracts	40
95027	Intracutaneous sequential and incremental	90
95028	Intracutaneous/allergenic extracts/delayed reaction	30
95044	Patch test	80
95180	Rapid desensitization/each hour	6

95076	Ingestion challenge/initial 120 minutes	1
95079	Ingestion challenge/each additional hour	2
95144	Allergy immunotherapy /single dose vials	30
95145	Venom immunotherapy/1 venom	10
95146	Venom immunotherapy/2 venoms	10
95147	Venom immunotherapy/3 venoms	10
95148	Venom immunotherapy/4 venoms	10
95149	Venom immunotherapy/5 venoms	10
95165	Allergen immunotherapy/multi-dose vials	30
95170	Allergen immunotherapy/whole body extract	10



Case 1

- 31-year-old commercially insured patient comes to the clinic for an amoxicillin drug challenge. She had a history of hives and shortness of breath 6 years ago along amoxicillin in the past that required epinephrine use.

Do we...

Do an office visit the same day as the challenge?

Do drug skin testing the same day as the challenge?

If testing, do we bill for the controls- histamine and saline?



What did we do?

- We decided to skin test the patient via prick-histamine, saline, amoxicillin and pre-pen. They were negative.
- We then did intradermals to saline, amoxicillin and pre-pen which were also negative.
- We then proceeded to do a 2 step drug challenge which started at 9:12 AM and ended at 10:50 AM.
- An office follow up visit was not completed.
- What codes do we use to bill this patient?



Time Based Coding

- 99202 15-29 minutes of total time is spent on the date of the encounter.
- 99203 30-44 minutes
- 99204 45-59 minutes
- 99205 60-74 minutes
- For services 75 minutes or longer, see Prolonged Services

- 99212 10-19 minutes
- 99213 20-29 minutes
- 99214 30-39 minutes
- 99215 40-54 minutes
- For services 55 minutes or longer, see Prolonged Services



Time Based Coding Considerations

- Reviewing notes
- Talking to consultants
- Reviewing procedures- skin tests, spirometries, etc
- Reviewing labs
- Counseling family members
- Other care coordination

Code	Level of MDM (Based on 2 out of 3 Elements of MDM)	Elements of Medical Decision Making		
		Number and Complexity of Problems Addressed	Amount and/or Complexity of Data to be Reviewed and Analyzed <i>*Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below.</i>	Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straightforward	Minimal • 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low • 2 or more self-limited or minor problems or • 1 stable chronic illness or • 1 acute, uncomplicated illness or injury	Limited <i>(Must meet the requirements of at least 1 of the 2 categories)</i> Category 1: Tests and documents Any combination of 2 from the following: • Review of prior external note(s) from each unique source* • Review of the result(s) of each unique test* • Ordering of each unique test* or Category 2: Assessment requiring independent historian(s) <i>(For the categories of independent interpretation of tests and discussion of management or test interpretation, see moderate or high)</i>	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment or • 2 or more stable chronic illnesses or • 1 undiagnosed new problem with uncertain prognosis or • 1 acute illness with systemic symptoms or • 1 acute complicated injury	Moderate <i>(Must meet the requirements of at least 1 out of 3 categories)</i> Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: • Review of prior external note(s) from each unique source* • Review of the result(s) of each unique test* • Ordering of each unique test* or Category 2: Independent interpretation of tests • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported) or Category 3: Discussion of management or test interpretation • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment <i>Examples only:</i> • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
99205 99215	High	High • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	Extensive <i>(Must meet the requirements of at least 2 out of 3 categories)</i> Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring independent historian(s) or Category 2: Independent interpretation of tests • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported)	High risk of morbidity from additional diagnostic testing or treatment <i>Examples only:</i> • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to de-escalate care because of poor prognosis

Case 2

- Pediatric patient presents with a history of anaphylaxis to peanuts, asthma and allergic rhinitis. Patient's parents are divorced and mom advises you that data needs to be communicated to dad as well.
- Skin testing was done via prick to 16 antigens.
- Spirometry pre-post was done using patient's own inhaler for rescue
- FENO was completed as well.
- Patient was counseled about diseases and medications taught including rescue and maintenance inhaler.
- Skin testing took 30 minutes for application and interpretation.
- Visit was 65 minutes in addition to that.



How would we code
this visit?



Are you coding for everything you are
doing in the clinic?






Case 3

- Patient wishes to start allergy shots. Your first build that you mix through the green, blue and yellow bottles is 27 Units for the pollen bottle and 27 units for the Dust Mite bottle.

How can I mix those bottles properly for billing?



What if I had another bottle with 27 Units of Cat?



Create opportunities to be the expert and expand your practice!

- Social media is a great resource. Use it to expand your brand and educate
 - <https://youtu.be/wD6PRsqbia8>
 - <https://www.tiktok.com/@allergygalmd/video/7008900869982899462>
 - Have fun!

Expand your product line

- OIT
- Remote patient monitoring
- Patch Testing
- Clinical Research
- Nasal Endoscopy
- Food and Drug Challenges
- Cluster and Rapid Desensitization Immunotherapy
- Biologics (Biologic Contract)

Plan, Practice, Execute

