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ELIMINATED CONSULT CODES	
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99241	99251 99252
99242 99243	99253
99244 99245	99254 99255

## An Audit of Discharge Summaries from Acute Psychiatric Settings - Content and Timing

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## Abstract

Discharge summary is an important and useful communication tool, which summarize the therapeutic events and planned intervention during inpatient stay. A clinical audit was undertaken in an acute psychiatric inpatient setting in order to assess the standards of discharge summaries against local guidelines, in context of its timing and content. Discharge summaries of 48 patients who were discharged from acute psychiatric wards were examined. It was found that only 50% of the summaries were typed within 2 weeks. Date typed, date of admission, date of discharge, medication on discharge and diagnoses were recorded in all (100%) discharge summaries. However majority of the summaries, fell short of standards in the parameters like date typed, full psychiatric history, mental state and physical examination on admission, investigations done while on the ward, risk involved and level of effective care coordination. It is apparent that the present study has identified deficiencies in the content and timing of discharge summaries. Attempts should be made to explore possible reasons for the shortcomings and address them (German J Psychiatry 2006;9:94-96).

Keywords: discharge summaries, content, timing

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## Introduction

he discharge summary aims to summarize the therapeutic and other significant events during inpatient stay. It provides concise details of reasons leading to admission, diagnosis, investigations etc and is also helpful as a record of responses to different therapeutic interventions. It is an important and useful communication tool. It can be referred to years later to provide a quick summary of an admission. It is useful for healthcare providers to effectively implement the treatment strategies planned during admission. A prompt and comprehensive discharge summary from the hospital should ensure effective continuity of care in the community. On the other hand, poor information transfer at discharge does appear to increase the likelihood of readmission (Olfson & Walkup, 1997).

The purpose of the discharge summary is particularly important in context of content and timing. It is also important to determine as to whom the summaries are addressed to and what the stated purposes are. In a survey of the views of general practitioners on psychiatric discharge summaries (Dunn & Burton, 1999), top five headings identified in terms of importance were: admission and discharge dates, diagnosis, medication on discharge, community key worker and date of follow-up. This is understandable since general practitioners are mainly concerned about implementing the post discharge care plans. On the other hand, one would expect admitting team to ask for more information about diagnostic work up and therapeutic interventions.

A clinical audit was undertaken in an acute adult psychiatric setting in order to examine contents of discharge summaries in Liverpool, and also to look at the time taken for the letters to be typed.

recognizing Current Procedural Terminology (CPT) codes for.

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Medicare covers Annual Wellness Visits (AWV) with two codes G0438, Initial AWV, and G0439, Subsequent AWV. See when to use these two codes for your patients

All the contents and articles are based on our search and taken from various resources and our knowledge in Medical billing. All the information are educational.

The above description is abbreviated. This code description may also have Includes, Excludes, Notes, Guidelines, Examples and other information.

The three "R's" of consultation codes: request, render and reply Consult codes tend to focus on advice and opinion and less on action and treatment by Tamra.

B. Policy: Effective January 1, 2010, CPT consultation codes were no longer recognized for Medicare Part B payment. As explained in CR 6740, Transmittal 1875.

Medicare Changes to 2010 CPT Inpatient Consultation Codes. Posted on 13. Nov, 2009 by jennifer.godreau in Provider News. Prevent 99251-99245 denials in 2010 with this.

Start with the CMS website at a href= target="\_blank" and you can search for many terms under "secondary payer Medicare".