



Starting your Own Practice from Scratch: Medicare Part B, G-Codes, PQRS and ICD-10

PT Caroline Joy Yumul Co

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The primary goal of this course is to provide you with a step-by-step guide to build your very own practice from scratch. From beginning to end, its content will give you step-by-step guidelines. If you put your heart and mind to the task, then you will surely succeed in establishing your own health facility. Physical therapy is one of the most challenging fields in the health care industry to run. In an ever-changing and fast-paced healthcare industry, rules and regulations about coding and billing affect physical therapy practice. Over the years, patients who are the primary payers of health care have become more meticulous in scrutinizing the manner in which care is provided for them (Forbes, 2014). Such attitude has risen among patients because of cases where there have been overpayments of medical bills where a request for refund has to be made when a case of overpayment is detected. The focus of this book is to enhance the skills of the physical therapist in practically solving challenges associated with coding and billing in order to make a profit from the care rendered to patients (American Physical Therapy Association, 2014). While it is positive that physical therapy services can be billed separately, problems usually arise when patients pay through various modes such as their HMOs (health maintenance organizations), Medicare, Medicaid and other pre-paid health insurance service. Commonly, physical therapists are underpaid, receive late payments or, in worse cases, are not even paid for the services they rendered. With this problem in the forefront, Medicare Part B steps in to give a solution, albeit a challenging one. The challenging part of this solution lies in the fact that billers need to have operating knowledge of codes and coding guidelines, types of health care insurance coverage plans and providers and their respective guidelines, record management systems, and other technical and non-technical concepts related to physical therapy service provision. This book discusses documentation and billing strategies that can help physical therapists understand Medicare standards for outpatient programs. Appropriate billing and documentation should be present in the medical record, because Medicare is increasingly reviewing therapy claims to ensure that the therapy provided did require the skills of a therapist. The book explains establishing medical necessity, providing safety, and supervising assistive personnel, along with denial and appeal management, regulatory guidelines for insurers, and improving cash flow with denial management strategies. The extensive overview of CPT codes and ICD-10 codes provided, as well as a description of the PQRS and functional limitation guidelines implemented by Medicare, will help the physical therapist provide Medicare patients with the most thorough documentation to support the need for services rendered. Proper coding and documentation ensure that facilities will keep their money upon a postpayment medical record audit. The information provided here in no way represents a guarantee of payment. Benefits for all claims will be based on the patient's eligibility, provisions of the law, and regulations and instructions from the Centers for Medicare & Medicaid Services (CMS). It is the responsibility of each provider or practitioner submitting claims to become familiar with Medicare coverage and its requirements. Topics such as choosing the right business structure, defining your specialty, and determining if your business would be viable are written for quick and easy comprehension while conveying numerous applicable instructions and related guidelines. Surely, this book will be helpful once you decide to found your very own healthcare establishment. Take advantage of this book's guidance and instructions, and make your dreams of owning your own healthcare facility a reality!

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