

## The Chargemaster & Cardiovascular Interventional Radiology: Coding, Billing & Reimbursement

### Webinar #T2961

#### DATE AND TIME

April 28, 2015

8:30 a.m. - 10:00 a.m. CT

#### OVERVIEW

Cardiovascular Interventional Radiology (CVIR) is a significant growth area as demands continue to increase with the Baby Boomer generation. CVIR represents major coding and billing challenges. Coding is often accomplished by coding through the Chargemaster using charge entry. Modifiers must be used for a number of services in this area. The development of proper charge mechanisms is a challenge particularly with expensive implantable devices such as stents. The CPT coding structure for CVIR at the CPT level is going through significant change. Also, CMS through APCs (Ambulatory Payment Classifications) has significantly increased the bundling of certain CVIR services which has created concern about properly charging, even for services and items that will be packaged.

##### Prerequisites for Participating:

General knowledge of hospital services for the cardiovascular area and the Chargemaster design process, association coding and billing flow processes are useful.

##### Learn answers to these questions from an expert:

- Why are the codes and coding guidelines in CPT being changed for certain cardiovascular services?
- Have all the CPT changes been made?
- Have APCs and payment processes influenced the descriptions and inclusions in the CPT coding structure?
- Why have codes and coding guidance for interventional cardiovascular service changed so much since 2008?
- Will CMS continue to make significant changes for CVIR grouping under APCs?
- Who should be performing coding for interventional cardiovascular services?
- How can we assure proper charge capture for cardiovascular services?
- As the interventional cardiovascular code structures change, how can we be certain our charges are appropriate?
- How should we be handling the use and non-use of modifiers with interventional cardiovascular services?

- Will the future bring more changes for CPT coding in the cardiovascular areas?
- What challenges are there for Chargemaster Coordinators in establishing charges and pricing for CVIR services and supplies?
- Are there any special compliance concerns surrounding CVIR coding and billing.
- How should CVIR services be documented?

#### TARGET AUDIENCE

Coding personnel, billing and claims transaction personnel, CVIR personnel, Chargemaster coordinators, financial analysts, compliance personnel, auditors, cardiovascular service area staff, physicians and other interested personnel.

#### PROGRAM TOPICS

- Cardiovascular Overview
- Interventional Radiology Overview
- Coding and Coding Directive Changes
- Chargemaster Issues
- Payment Issues for CVIR Services
- Alternative Coding/Billing Flows
- Compliance Issues
- Sources for Further Information

#### OBJECTIVES

- Review coding, billing and reimbursement for cardiovascular interventional radiology services in general.
- Appreciate the extreme complexity of coding, billing and reimbursement in the cardiovascular interventional radiology area.
- Understand how the CPT coding structure and guidance
- Review several case studies to illustrate the complexities of coding and billing and the need to carefully design the charge capture interface to the Chargemaster.
- Review CPT coding and coding directive changes in the cardiovascular areas.
- Understand the multi-year changes for coding that are occurring in CPT and their impact on hospitals.



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- Discuss pricing strategies for expensive catheters and stents used for interventional radiology services for both inpatient and outpatient services.
- Review Chargemaster techniques and associated coding and billing flow.
- Appreciate how charge structures must be adjusted relative to coding inclusions in the cardiovascular area.
- Examine how APCs are being changed in the cardiovascular interventional radiology areas through increased packaging.
- Understand compliance concerns that arise with correlating physician and facility component coding.
- Appreciate that by using different documentation approaches there may be inconsistencies generated.

### FACULTY

**Duane Abbey, PhD, CFP**

Abbey & Abbey Consultants, Inc. - Ames, Iowa

Duane Abbey is a management consultant and president of Abbey & Abbey Consultants. For over 20 years, Dr. Abbey has provided health care consulting services to hospitals, physicians, and medical clinics. The focus of his consulting has been in the areas of compliance, payment and delivery systems. In addition to his consulting, Dr. Abbey is an invited presenter for hospital associations, medical societies, and other groups. He also has published both articles and books on health care topics. Dr. Abbey earned his graduate degrees from the University of Notre Dame and Iowa State University.

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