

AUDIT SHEET - Nursing Facility

Provider Name _____	Provider E&M _____	Analyst E&M _____
Patient Name _____	Provider Dx _____	Analyst Dx _____
MRN # _____	_____	_____
DOS _____	_____	_____

CC		Problem Focused	Exp. Prob. Focused	Detailed	Comprehensive
HISTORY	HPI : History of Present Illness ___ Location ___ Severity ___ Timing ___ Modifying factors ___ Quality ___ Duration ___ Context ___ Associated signs and symptoms	Brief (1-3)	Brief (1-3)	Extended (4+)	Extended (4+)
	HPI : Status of Chronic Conditions ___ 3 conditions 1) _____ 2) _____ 3) _____	None	None	3 Chronic and Status of each	3 Chronic and Status of each
	ROS: Review of Systems ___ Const ___ ENMT ___ GI ___ Integumentary ___ Endo ___ Eyes ___ Cardiovascular ___ GU ___ Hem/Lymph ___ Allergies/Imm ___ Resp ___ Musculo ___ Neuro ___ "All others reviewed & negative" ___ Psych	None	Pertinent to problem (1 system)	Extended (2-9 systems)	Complete (10+ or some systems w/ statement "all others reviewed and negative")
	PFSH (past med, family, social hx): ___ Past history ___ Family history ___ Social history	None	None	Pertinent (1)	Complete New Patient & Consult (3) Est Pt (2)

EXAM	Body Areas:	95 Guidelines			
	___ Head/Face ___ Chest, Breasts, Axillae ___ Abdomen ___ Back, incl. spine ___ Each extremity ___ Neck ___ Genitalia, groin, buttocks	1 body area or system	2 - 7 body areas/systems	2 - 7 body areas/systems (1 detailed)	8 or more body areas/systems NGS Medicare specifies systems only
	Organ Systems:	97 Guidelines			
	___ Const ___ ENMT ___ Resp ___ Musculo ___ Psych ___ Eyes ___ Cardiovascular ___ GU ___ Neuro ___ Hem/Lymph/Imm	1-5 bullets (1 or more body areas or systems)	6 bullets (1 or more body areas or system)	12 bullets in 2 or more body areas/sys or 2 bullets in 6 or more body areas/systems	2 bullets in 9 or more body areas/systems or a complete single organ system

E & M TYPES / LEVELS	99304 99305 99306 New Patient - Initial Nursing Facility Care				
	___ detailed ___ comp ___ comp ___ detailed ___ comp ___ comp ___ straight/ low ___ mod ___ high ___ 25 min ___ 35 min ___ 45 min	___ detailed ___ comp ___ detailed ___ comp ___ straight ___ low ___ 10 min ___ 15 min	___ detailed ___ comp ___ detailed ___ comp ___ mod ___ high ___ 25 min ___ 35 min	___ comp ___ comp ___ high ___ 45 min	History Exam MDM
	99307 99308 99309 99310 Established Patient - Subsequent Nursing Facility Care				
	___ prob focused ___ expanded ___ detailed ___ comp ___ prob focused ___ expanded ___ detailed ___ comp ___ straight ___ low ___ mod ___ high ___ 10 min ___ 15 min ___ 25 min ___ 35 min	___ prob focused ___ expanded ___ detailed ___ comp ___ prob focused ___ expanded ___ detailed ___ comp ___ straight ___ low ___ mod ___ high ___ 10 min ___ 15 min ___ 25 min ___ 35 min	___ prob focused ___ expanded ___ detailed ___ comp ___ prob focused ___ expanded ___ detailed ___ comp ___ straight ___ low ___ mod ___ high ___ 10 min ___ 15 min ___ 25 min ___ 35 min	___ prob focused ___ expanded ___ detailed ___ comp ___ prob focused ___ expanded ___ detailed ___ comp ___ straight ___ low ___ mod ___ high ___ 10 min ___ 15 min ___ 25 min ___ 35 min	History Exam MDM } 2 of 3 key components to meet or exceed and ONE MUST be MDM
	Time based : MUST ANSWER YES TO ALL 3 Does doc include total time ? ___ Yes ___ No Does doc describe content of "counseling & coordination of care?" ___ Yes ___ No Does doc include > 50% time spent "counseling/coordination of care?" ___ Yes ___ No				

DISCHARGE	Code	Description	Assessment
		99315	Nursing Facility discharge < 30 minutes
	99316	Nursing Facility discharge > 30 minutes	
	* 99318	Annual Nursing Facility Assessment	___ Detailed History ___ Comp Exam ___ Low-Mod MDM ___ 30 min * NOTE: Do not report 99318 on the same date of service as nursing facility services codes 99304 - 99316

Number of Diagnoses or Treatment Options					Risk of Complications and/or Morbidity or Mortality				
A	B	X	C	=	D	Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s) Ordered	Management Options Selected
Problems to Exam Physician	Number	Points	Result						
Self-limited or minor (stable, improved or worsening)	Max=2	1				MINIMAL	*One self-limited or minor problem, e.g. cold, insect bite, tinea corporis	*Lab tests requiring venipuncture *Chest x-rays *EKG/EEG *Urinalysis *Ultrasound, e.g. echo *KOH prep	*Rest *Gargles *Elastic bandages *Superficial dressings
Est. problem (to examiner); stable, improved		1							
Est. problem (to examiner); worsening		2							
New problem (to examiner); no addl workup planned	Max=1	3							
New problem (to examiner); addl workup planned		4							
TOTAL									
Amount and/or Complexity of Data to Be Reviewed						LOW	*Two or more self-limited or minor problems *One stable chronic illness, e.g. well-controlled HTN or DM, cataract, BPH *Acute uncomplicated illness or injury, e.g. cystitis, sprain, allergic rhinitis	*Physiologic tests not under stress, e.g. pulmonary function tests *Non-cardiovascular imaging studies with contrast, e.g. barium enema *Superficial needle biopsies *Skin biopsies	*Over-the-counter drugs *Minor surgery with no identified risk factors *Physical therapy *Occupational therapy *IV fluids without additives
Data to Be Reviewed					Points				
Review and/or order of clinical lab tests					1				
Review and/or order of tests in the radiology section of CPT					1				
Review and/or order of tests in the medicine section of CPT					1				
Discussion of test results with performing physician					1				
Decision to obtain old records and/or obtain history from someone other than patient					1				
Review and summarization of old records and/or obtaining history from someone other than patient and/or discussion of case with another health care provider					2				
Independent visualization of image, tracing, or specimen itself (not simply review of report)					2				
TOTAL									
Final Result for MEDICAL DECISION MAKING						MODERATE	*One or more chronic illnesses with mild exacerbation, progression, or side effects of treatment *Two or more stable chronic illnesses *Undiagnosed new problem with uncertain prognosis, e.g. lump in breast *Acute illness with systemic symptoms, e.g. pneumonitis, colitis, pyelonephritis *Acute complicated injury, e.g. injury with brief loss of consciousness	*Physiologic tests under stress, e.g. cardiac stress test, fetal contraction stress test *Diagnostic endoscopies with no identified risk factors *Deep needle or incisional biopsy *CV imaging studies with contrast and no identified risk factors, e.g. arteriogram, cardiac cath *Obtain fluid from body cavity, e.g. lumbar puncture, thoracentesis	*Minor surgery with identified risk factors *Elective major surgery (open, percutaneous, or endoscopic) with no identified risk factors *Prescription drug management *Therapeutic nuclear medicine *IV fluids with additives *Closed treatment of fracture or dislocation without manipulation
A Number diagnoses or management options	≤ 1 Minimal	2 Limited	3 Multiple	≥ 4 Extensive					
B Highest risk	Minimal	Low	Moderate	High					
C Amount and complexity of data	≤ 1 Minimal or low	2 Limited	3 Moderate	≥ 4 Extensive					
Type of decision making	Straight-forward	Low Complex.	Moderate Complex.	High Complex.					
Draw a line down any column with 2 or 3 circles to identify the type of decision making in that column. Otherwise, draw a line down the column with the 2nd circle from the left.						HIGH	*One or more chronic illnesses with severe exacerbation, progression, or side effects of treatment *Acute or chronic illnesses or injuries that may pose a threat to life or bodily function, e.g. multiple trauma, acute MI, pulmonary embolus, severe respiratory distress, psychiatric illness w/ potential threat to self or others, peritonitis, acute renal failure *An abrupt change in neurologic status, e.g. seizure, TIA, weakness, sensory loss	*Cardiovascular imaging studies with contrast with identified risk factors *Cardiac electrophysiological tests *Diagnostic endoscopies with identified risk factors *Discography	*Elective major surgery (open, percutaneous, or endoscopic) with identified risk factors *Emergency major surgery (open, percutaneous, or endoscopic) *Parenteral controlled substances *Drug therapy requiring intensive monitoring for toxicity *Decision not to resuscitate or to de-escalate care due to poor prognosis

References:

Current Procedural Terminology, American Medical Association
 Evaluation and Management Services Guide: http://www.cms.gov/MLNProducts/downloads/eval_mgmt_serv_guide-ICN006764.pdf
 Evaluation & Management Services: 1995 Documentation Guidelines: <http://www.cms.hhs.gov/mlnproducts/downloads/1995dg.pdf>
 Evaluation & Management Services: 1997 Documentation Guidelines: <http://www.cms.hhs.gov/mlnproducts/downloads/master1.pdf>