UC RIVERSIDE
School of Medicine
COMPLIANCE ADVISORY SERVICES

THE ADVISOR

News & Updates
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2021 Evaluation & Management – Reporting Based on Time vs MDM

There is still uncertainty on how to appropriately use time to select the level of office outpatient E&M visits. So, we need to answer some questions:

- Whose time is counted?
- What work can be included in the time counted?
- Do start and stop times need to be documented?
- When should time be used instead of medical decision making (MDM)?

AMA CPT guidelines for outpatient services (99202-99215) states that:

"For coding purposes, time for these services is the total time on the date of the encounter. It includes both the face-to-face and non-face-to face time personally spent by the physician and/or other qualified healthcare professional(s) on the day of the encounter (includes time in activities that require the physician or other qualified healthcare professional and does not include time in activities normally performed by clinical staff").

The definition answers the 1st and 2nd questions. **Whose time?** Only the time of the physician or other QHP(s) (individuals who perform and independently report a professional service within his/her scope of practice) on the day of the encounter is used to select a level of E&M. It also states that the time does not include the activities performed by clinic staff. **What work is included?** The activities include both face-to-face and non-face-to-face time performed on the day of the encounter. So, if test results were reviewed the following day or the medical note was completed the next day, the time performing these activities is NOT counted.   Note too that if some time was spent in the performance of a billable procedure – e.g. ultrasound, biopsy, that time must NOT be part of the E&M time. Refer to the 2021 E&M outpatient reference guide for a complete list of activities included.

How about start and stop times? AMA or Medicare does not require the use of stop and start times to support the use of time for 99202-99215. Both guidelines only require total time. However, some insurance carriers may require the stop and stop times along with a description of the work performed. In any case, documentation and medical necessity must support the total time reported.

When should time be used instead of MDM? If no time is documented or if time does not meet the threshold of 15 minutes for a new patient and 10 minutes for an established patient, then use the MDM that is driven by the presenting problems and the complexity of the visit. If time is stated but the MDM supports a lower level than the time, then report using time.   The type of conditions, injuries or problems and the work provided to the patient will help determine which visit is best reported with time and which is best reported by MDM.

Whichever way you choose, please refer to the "2021 E&M Outpatient Services Guide" for more specific requirements. (Click here to open file or hyperlink-EM Outpatient code)

Remember that "more than 50% counseling and/or coordination of care" is no longer the dominating factor for time-based coding for outpatient visits 99202-99215, but the total time of both face-to-face and non-face-to-face spent by the physician/QHP. The new E&M guidelines however, do not apply to other E&M services such as consultations (99241-99255), hospital observation (99218-99220) and hospital inpatient care (99221-99233.)

Get to Know APM671

The University's rules surrounding academic appointments are contained in the Academic Personnel Manual. These rules include those involving appointment and promotion, recruitment, salary administration, and benefits.

APM Section 671 addresses the rules relating to Conflicts of Commitment for those faculty members participating in the UCR School of Medicine's Health Sciences Compensation Plan. The policy sets limitations on the time that faculty may spend performing outside professional activities (21-days per year, including weekends) and sets an earnings threshold for outside professional income. According to the annual earnings threshold, faculty may keep all outside income up to $40,000. or 40% of their fiscal year base salary scale, whichever is greater. All amounts above that must be turned into the University and will be subject to an overhead assessment.

APM 671 also sets approval and reporting requirements for outside professional activities, which are broken into 3 categories, as follows:

Category I Activities
These are activities that are the most likely to cause a conflict with a faculty member's commitment to the University. These activities require *advanced* approval from the Chancellor. Some examples include:
- Teaching or performing research outside of the University (such at another institution)
- Founding or co-founding a company
- Employment in one's field outside of the University
- Assuming and executive or managerial position outside of the University.

Category I activities need to be reported in OATS.

Category II Activities
Category II activities present a lower risk for conflict. They do not require advanced approval but must be reported in OATS. Examples include:
- Consulting
- Presenting a workshop for industry
- Testifying as an expert witness
- Serving on a board of directors

Category III Activities
Category III activities present the least potential for conflict. For this reason, they do not require approval and are not required to be reported. Examples include:
- Serving on a government panel
- Developing scholarly or creative works
- Reviewing manuscripts or serving in an editorial capacity

When in doubt of what category a proposed outside professional opportunity falls within, please reach out to the Academic Affairs Department or to Compliance Advisory Services.

Policies & Procedures

The Compliance staff work collaboratively with stakeholders in the development of the School of Medicine's Policies and Procedures, ensuring compliance with State and Federal requirements as well as alignment with UCR and UCOP policy. Below is the list of new or updated policies recently reviewed and approved by the Compliance Committee.

- 950-02-004 - Grievance Reporting and Resolution
- 950-03-032 – Chaperones
- 950-09-004 – Moonlighting
- 950-02-020 – Compliance Auditing and Monitoring

IT Procurement Update

As you may know, the UC has mandated security requirements in the purchase of goods and/or services due to vendors representing a significant source of risk. To better assess the risk of these goods and/or services, Office of Information Technology will be asking purchasers to submit a new Security Intake Form and potentially engage members of IT/Security for consult. As a purchaser, you may be expected to provide additional information and be responsible for implementing security controls.

Two-Step Verification

Two-step verification (AKA 2FA) is one of the best steps you can take to secure any account. 2FA is when both a password and code sent to or generated by your mobile device are needed. This process ensures that even if a cyber attacker gets your password, they still can't get into your accounts. Please exercise best judgement when approving and report suspicious or unexpected prompts.

On the Horizon…BYOD Policy

Employees who telecommute use a variety of devices such as desktop and laptop computers, smartphones, and tablets- for reading and sending email, accessing websites, reviewing and editing documents, etc. The use of personally owned devices creates added risk, including that of data loss. For this reason, a relevant policy requiring appropriate technical safeguards in order to access institutional information from personally owned devices is under development. Highlights of the new policy will be featured in a future edition of *The Advisor*.