Billing for Pharmacy Cognitive Services in the Inpatient Setting

FSHP Best Practices Award
Kristin Morse, PharmD
Julia Nickerson-Troy, PharmD, MS, BCACP

Objectives
• Describe opportunities and successes in billing for inpatient pharmacist clinical services
• Discuss challenges that occurred during implementation of the inpatient billing procedure

Background
• Asante Rogue Regional Medical Center described billing for inpatient pharmacy cognitive services
• E&M codes (99211-99215)

<table>
<thead>
<tr>
<th>Level Billed</th>
<th>Consult Type</th>
<th>Billed amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2</td>
<td>Medication reconciliation, medication review, IV to PO</td>
<td></td>
</tr>
<tr>
<td>2-3</td>
<td>Patient education, warfarin, kinetics, parenteral nutrition (PN)</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Pharmacotherapy consult, recommend new treatment</td>
<td></td>
</tr>
</tbody>
</table>


Disclosure
• The following individuals do not have (nor does any immediate family member have) a vested interest in or affiliation with any corporate organization offering financial support or grant monies for this continuing education activity or any affiliation with an organization whose philosophy could potentially bias this presentation:
  • Kristin Morse, PharmD
  • Julia Nickerson-Troy, PharmD, MS, BCACP

Background
• Evolving role of pharmacists
• Lack of provider status
• Billing options
  • Evaluation and management (E&M)
  • Medication therapy management (MTM)

MTM codes
• Face-to-face (FTF) with patient
• Assessment and Intervention if provided
• Medicare does not reimburse for Part D inpatient billing
• Consider adding reimbursement in the future

CPT code | Criteria                                                                 | Billed amount  |
---------|---------------------------------------------------------------------------|----------------|
99605    | Initial 15 minutes, new patient                                           | $130 (2018)    |
99606    | Initial 15 minutes, established patient                                   | $136 (2019)    |
99607    | Each additional 15 minutes                                                 |                |

AdventHealth Celebration
- 227 bed community hospital
- Inpatient dispensing pharmacy
- Inpatient clinical pharmacy services
- Outpatient dispensing pharmacy
- Outpatient clinical pharmacy services (CPS)

Timeline
- 2015
  • Initial approval sought from revenue department
  • Idea put on hold due to system billing software rollout
- 2017
  • Discussions between revenue department and CPS
  • Revenue department passes MM billing
  • Discussions between CPS and inpatient pharmacists
  • Billing eligibility criteria developed and pharmacist workflow adjusted
- 2018
  • February billing first initiated

Patient Eligibility
- Pharmacy services consulted by physician
  - Glycemic management
  - TPN
  - Pharmacokinetics
- FTF with pharmacist
  - FTF with physician and pharmacist rounding
  - Adjustment in pharmacist workflow

Workflow
- Inpatient pharmacist completes consult
- Inpatient pharmacist determines FTF time
- Inpatient pharmacist documents on internal billing database
- Outpatient pharmacist bills Medicare part A

Data Collection Table
<table>
<thead>
<tr>
<th>Consult Type</th>
<th>FTF Time (min)</th>
<th>Non-FTF Time (min)</th>
<th>Documented in Chart</th>
<th>Clinical Notes</th>
<th># of FY18</th>
<th># of FY19</th>
<th># of FY20</th>
<th>Billed Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vancomycin</td>
<td>0</td>
<td>15</td>
<td>Y</td>
<td>FTF out of room for procedure</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>$138</td>
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<tr>
<td>Glycemic</td>
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<td>1</td>
<td>1</td>
<td>1</td>
<td>$276</td>
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<tr>
<td>Vancomycin</td>
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<td>15</td>
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<td>2</td>
<td>2</td>
<td>2</td>
<td>$414</td>
</tr>
</tbody>
</table>

Endpoints
- Primary
  • Total amount billed in dollars
- Secondary
  • Total number of consults
  • Average amount billed per consult
  • Average time per consult
  • Number of consults by type
Primary Endpoint

$149,754 billed to insurance

Secondary Endpoints

- 560 total consultations billed
- Average $267.42 billed per consult
- Average 25 minutes per consult

Challenges

- Adjusting clinical pharmacist workflow
- Inconsistent documentation
- Billed amount changed in 2019
- Lack of Medicare reimbursement
- Reimbursement difficult to track

Discussion

- Billing for pharmacy services is innovative in any setting
- Pharmacists may bill incident to a physician
  - Level at which pharmacist may bill may be capped
- Hospital outpatient pharmacists may be as a facility
  - Bills for use of hospital space
- Inpatient pharmacists are consulted for many services

Conclusion

- Billing for inpatient cognitive services is possible
- Only minor change in pharmacist workflow is needed
- Potential for expansion immense
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