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3-6-2020

### Lost Revenue and Subsequent Documentation Improvement Strategy in the Department of Psychiatry

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#### Recommended Citation

Earl, David; Christopher Gaudiot; Elizabeth Richardson; Mario Cruz; Joshua Corbin; Donna Sigl; Leslie Montgomery; Ali Nakip; Kyle Foley; Shawn Hazlewood; Julia Nguyen; and Mauricio Tohen. "Lost Revenue and Subsequent Documentation Improvement Strategy in the Department of Psychiatry." (2020). [https://digitalrepository.unm.edu/hsc\\_qips/39](https://digitalrepository.unm.edu/hsc_qips/39)

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# LOST REVENUE AND SUBSEQUENT DOCUMENTATION IMPROVEMENT STRATEGY IN THE DEPARTMENT OF PSYCHIATRY

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(\*CO - CONTRIBUTED EQUALLY TO THIS WORK)

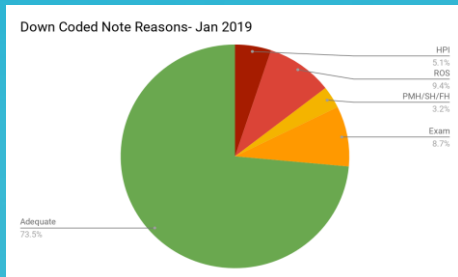
### Initial Hospital Care: Medicare Reimbursements (2019)

99221: **\$102.63**  
99222: **\$138.02**  
99223: **\$203.47**

### Subsequent Hospital Care: Medicare Reimbursements (2019)

99231: **\$39.71**  
99232: **\$73.81**  
99233: **\$104.59**

### “Down-Coded” Notes Distribution



### PROBLEM:

- ~27-29% of psychiatry notes are down-coded
- Estimated \$11,542 per month (\$138,504/year) of inpatient lost revenue

### RESPONSE:

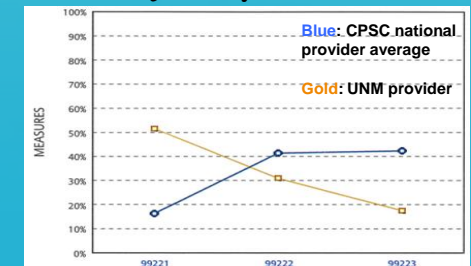
- Quality Improvement committee created to address the problem
- History of present illness (HPI), review of systems (ROS), history (PMH/SH/FH), and mental status exam (MSE) identified as most common problems. Medical decision making (MDM) also a reason.

### SOLUTION:

- Created auto-text templates for HPI, ROS, MSE, and MDM
- Department wide provider training for new auto-texts initiated February 2020.



### Initial Hospital Care January 2019



### Subsequent Hospital Care January 2019

