# OB billing – Epidural billing

 Multiple claims for 16.91G on the *same day* will not pay on the *same encounter*

• Epidural Monitoring (16.91G) is billed in 5 minute units. Generally these units **must be aggregated** for each patient of the course of an OB shift and then **submitted together in one encounter.**  Reduce your rejections and improve your reimbursement



# OB billing – Epidural billing

- Examples:
- Epidural monitoring at different times over a shift – with no call back
- Epidural monitoring with call back for a new encounter<sup>1</sup> and surcharge



**No Call Back** 



### Example: Epidural monitoring – No call back

Example:

08:00-09:00 Sarah Smith – Epidural monitoring (16.91G x 12) 09:00-09:30 Julia Jones – Caesarean Section (86.9C) Resume monitoring – but no call back 09:30-10:00 Sarah Smith – Epidural Monitoring (16.91 G x 6)

#### • Epidural should be billed as follows: 16.91G x 18 Calls

#### Correct



16.91G : Insertion of anaesthetic into spinal canal for analgesia
Insertion of anaesthetic into spinal canal for analgesia
Modifiers

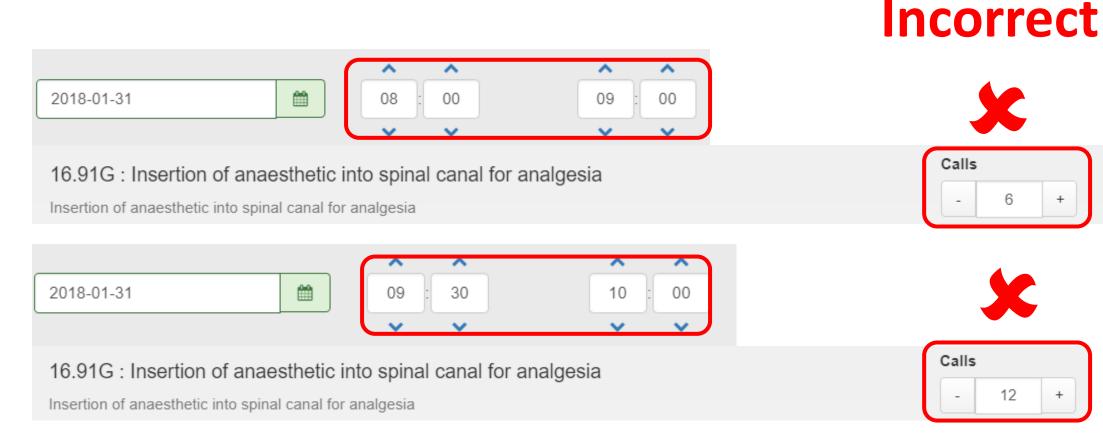
**Diagnostic Codes** 

 This would be billed differently if you are called back to see the patient and wish to bill a new encounter and a surcharge

## Example: Epidural monitoring – No call back

Example: 08:00-09:00 Sarah Smith – Epidural monitoring (16.91G x 12) 09:00-09:30 Julia Jones – Caesarean Section (86.9C) Resume monitoring – but no call back 09:30-10:00 Sarah Smith – Epidural Monitoring (16.91 G x 6)

• Do not submit as below or the claim will be **refused**:



#### What about the time?

Your time is **NOT SENT** to Alberta Health and is for your records. So you can either:

1. Enter an all inclusive time and make a note:



Your Notes

For internal purposes only - this text will not be sent to AHCIP. To enter text in support of your claim please use the 'Supporting Text' box located directly under the claim code

#### 2. Or **Skip Time** (consider keeping a record of your time elsewhere):

Service Date					
	2018-01-31	<b>#</b>			

### Epidural monitoring – You are called back

Correct

• 16.91G allows **one surcharge** per patient if you are **called back** for a new encounter.



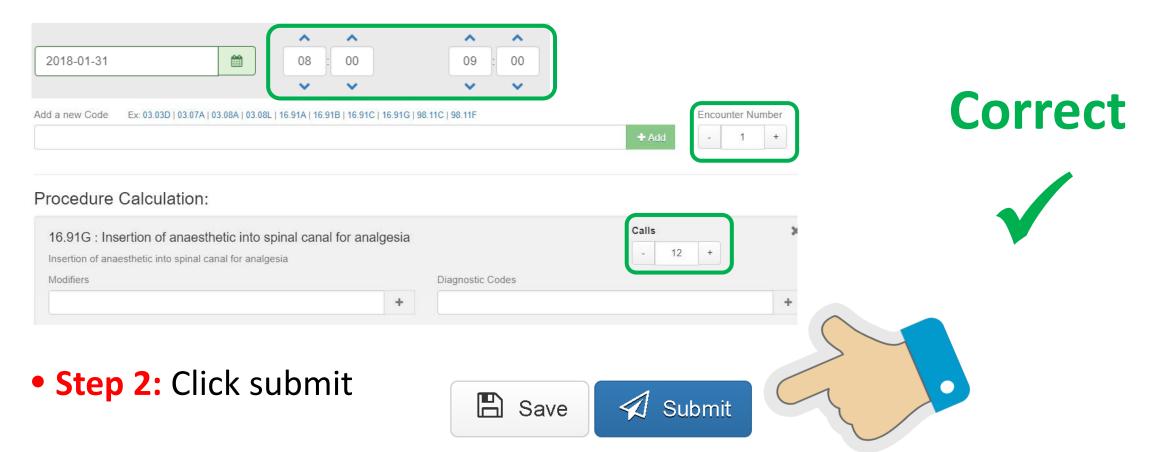
• If you billing more than one surcharge per patient on 16.91G the claim will be refused.



### Example: Epidural monitoring – Called back

Example:08:00-09:00 Sarah Smith – Epidural monitoring (16.91G x 12 + TWK x 04)(Weekend)09:00-09:30 Julia Jones – Caesarean Section (86.9C + TWK 02)Called back for new encounter at 09:3009:30-10:00 Sarah Smith – Epidural Monitoring (WK 16.91 G x 6 +TWK 02)

#### • Step 1: Enter 08:00-09:00 16.91G x 12 and TWK x 04



## Example: Epidural monitoring – Called back

• Step 3: Click New Claim and enter patient information



### • Step 4: Enter 09:30-10:00 WK 16.91G x 6 + TWK x 02

2018-01-31	: 30 10 • •	: 00			
dd a new Code Ex: 03.03D   03.07A   05.08A   05.	00E   16.91A   10.91B   16.91C	10.916 196.11C 198.11F	+ Add - 2 +		
rocedure Calculation:					
16.91G : Insertion of anaesthetic into Insertion of anaesthetic into spinal canal for an	56 6	gesia	Calls 1	• Step 5:	5
Modifiers		Diagnostic Codes	+	• Step 5: Submit	m
wк <b>–</b>		Popular Codes: General Sympt - 780 349.8   Orthopedics -781   Urology 7	9 (Gen Surg/Gyn/Plastics/ENT/Other)   Neurosurg/Spine 88.9   Blood Patch 349.0		
				🖺 Save 🛛 🖈 S	Submit

## Example: Epidural monitoring – Called back

#### • Once submitted:

#### Correct

Name	PHN	Code	Description	Status	Enc	Date/Time	Total
C Sarah, Smith	19	03.01AA [TWK02] 16.91G [WK] x 6	Diagnostic interview Insertion of anaesth	submitted submitted		2018-01-31 9:30 - 10:00	\$192.14
🖸 Sarah, Smith	19	03.01AA [TWK04] 16.91G x 12	Diagnostic interview Insertion of anaesth	submitted submitted		2018-01-31 8:00 - 9:00	\$286.88



#### Encounter numbers 1 and 2 visible



Contact us: Website: <u>www.statgo.ca</u> Email: <u>support@statgo.ca</u> Phone: 1.800.516.0818