



ENCOUNTER SUBMISSIONS



Did you know that....

According to the Annals of Family Medicine, Family Practice practitioners reported managing an average of 3.05 problems per encounter, recorded 2.82 in the chart and only 1.97 on the bill. The average number of problems per visit increases to 4.6 for diabetics patients.

How does Gateway know that you are providing high quality care to your Gateway patients?

The answer is we don't unless a practitioner bills for each encounter and includes all procedure and diagnosis codes on each claim. The claim tells the story of what happened during the encounter with your patient.

By not reporting all encounters, diagnosis codes and procedures your practice as well as your Gateway patients can be negatively affected.

- 1) Members lose the opportunity to receive additional disease management interventions by Gateway.
- 2) Practice understates burden of illness as well as the amount of work necessary to care for Gateway patients which in the future may result in rate reductions.
- 3) Information reported to regulators such as CMS and DPW will be inaccurate which could result in a reduction of future funding.
- 4) Gateway is not able to assist you in identifying, assessing and developing a care plan for at-risk members.
- 5) Negatively affects Gateway to Physician ExcellenceSM indicators.
- 6) PCP Dashboard Report will not portray an accurate picture of those members in need of preventive care services.

Gateway, CMS, and DPW are looking at all diagnosis codes and procedure codes billed, not just those that result in a fee for service payment to the practice.

Tips in the coordination of care

- Schedule patients for annual physicals to review all of their needs.
- Schedule follow-up appointments before patients leave the office.
- Have a reminder system. Let patients know by mail or phone of an upcoming appointment to help minimize "no shows."
- Arrange for patients with chronic conditions to have blood work drawn a week before their next appointment. This allows the doctor to have more information at the time of the visit and reduces the amount of required follow-up communication.
- Make use of in-office testing (e.g., HbA1c), a reimbursed service by Gateway.