



January 9, 2023

Proper Claims Submission

Dear Provider,

Kern Health Systems (KHS) periodically conducts retrospective claim reviews and has noticed some billing patterns that could result in a medical record request, audit, or claim payment recoupment. Some key examples of incorrect billing are listed below:

Advance Practice Practitioner

The individual performing/rendering the medical service **must** be reported in box 24J on a CMS1500 claims form. Supervising physician should not bill on behalf of the rendering provider.

Telehealth Services

Any services performed via telephonic, or telehealth must be billed with the CPT code representing the nature of the visit along with the Place of Service (POS) 02 and modifier 95. Although Medicare has different billing requirements, Medi-Cal requires the correct CPT code to be billed with the above POS and modifier.

For example, if an established patient is seen via telehealth CPT code 99212-99215 (level billed will vary based on documentation) would be billed with the modifier 95 and POS would be equal to 02.

Abnormal amount of evaluation and management codes

The deviation of the standard quantity of visits billed based on established time frames for the codes billed.

For example, a provider bills 20 unique visits on a given day using CPT code 99215. CPT code 99215 equates to a 40–54-minute visit. 20 visits x 40 minutes = over 13 hours in one workday (just for KHS members).

Billing appropriate level of care for each new or established visit: 99202-99205 or 99212 – 99215

Please ensure you are billing the appropriate level of care for each visit based on time spent with patient and or complexity of the visit and supported in medical record documentation of the visit.

For reference, the allowable timeframe for 2023 is indicated below:

99202: 15-29 min	99212: 10-19 min
99203: 30-44 min	99213: 20-29 min
99204: 45-59 min	99214: 30-39 min
99205: 60-74 min	99215: 40-54 min

PROVIDER Bulletin



KERN HEALTH SYSTEMS

For additional information, please visit:

<https://www.ama-assn.org/system/files/2023-e-m-descriptors-guidelines.pdf>

****Please ensure your medical record documents support all diagnoses and all services billed.**

If you identify any claims billed incorrectly, please contact your Provider Relations Representative at 1-800-391-2000 to discuss corrective action.

KHS posts all bulletins on the KHS website, www.kernfamilyhealthcare.com, choose Provider, then Bulletins.

Sincerely,

Melissa McGuire
Kern Health Systems