

6 TIPS

for Workers' Compensation Billing Success

We get it. Just getting reimbursed accurately is a lot harder than it used to be.

We understand that payment disruptions due to billing issues can wreak havoc on your cash flow and cause a lot of extra work. Pinnacol Assurance is here to help. We have certified coders on staff who can help you navigate the unique aspects of workers' compensation billing.

1 Autographs, please.

Don't forget that physicians must sign the encounter notes. (Physician signatures are accepted in both print and electronic forms.)

2 Time is on your side.

For all time-based CPT codes, document your time on the medical records.

3 Do the minimum.

Ensure you meet the minimum requirements for all CPT codes, including therapeutic procedures.

6 It's all about time.

Time-based coding for E&M codes is determined by the total time on the date of the visit. It includes both the face-to-face and non-face-to-face time the provider spends on the day of the visit. See DOWC [Rule 18 Exhibit 1](#) for details.

5 The rule of three.

Colorado's Division of Workers' Compensation (DOWC) has adopted CMS guidelines for evaluation and management (E&M) coding. Calculating E&M levels based on medical decision-making involves the problems addressed, data reviewed and analyzed and risk of complications. See DOWC [Rule 18 Exhibit 1](#) for details.

4 It's time for therapy.

Document and submit your time for each therapeutic procedure. Fifteen minute codes require documentation of at least eight minutes to bill one unit.

We can help. Ask us at billingsuccess@pinnacol.com.

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