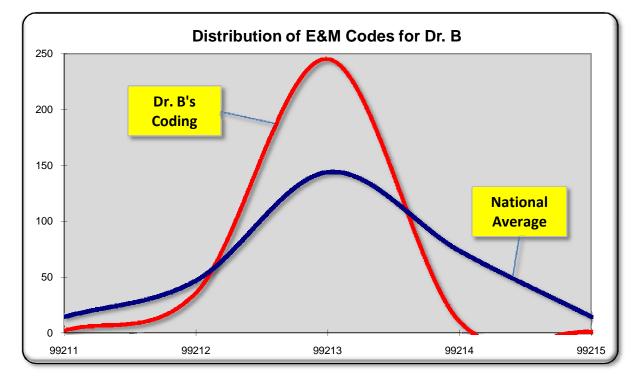
## Our Medical Practice **CPT Code Analysis**

## CPT Code Distribution for Dr. B

This table and bell curve show the distribution of Evaluation and Management (E&M) codes for the physician as compared to the National Average for the specialty. Do not base your coding on this utilization data or adjust codes to match national averages. Coding should be based on reasonable and necessary medical services supported by accurate documentation. This bell curve is a tool you can use to flag possible inappropriate coding patterns in your practice for further scrutiny. Use this tool to audit provider coding and documentation practices to ensure you are billing appropriately. Note that excessive use of higher level codes, 99214 and 99215, may trigger audits by insurance companies. Over use of lower level codes, 99212 and 99213, may result in lost revenue to the practice. Code properly.

Evaluation & Management CPT Code Distribution Table						
	99211	99212	99213	99214	99215	VISITS
PHYSICIAN	2	36	245	10	1	294
TOTAL	0.7%	12.2%	83.3%	3.4%	0.3%	100.0%
NATIONAL	15	47	144	74	15	294
AVERAGE*	5.0%	16.0%	49.0%	25.0%	5.0%	100.0%
VARIANCE	-13	-11	101	-64	-14	
VARIANCE	-4.3%	-3.8%	34.3%	-21.6%	-4.7%	



Blue Line = \*Utilization percentages from the Medical Group Management Association (MGMA) Red Line = Actual Coding

Physicians tend to undercode. This report shows the undercoding which leads to loss of revenue. By identifying individual provider coding patterns, Capture can then assist in training on proper chart documentation. This will allow the provider to feel more confident in correctly coding higher levels.