Improvement and Evolution of a Toxicology Consultation Billing Service

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Background:
- Consult service started January 1st, 2011.
- Single Medical Toxicologist coverage (24/7)
- Coverage by phone 50/52 weeks on-site 46/52 weeks (4-6 weeks travel). Bedside rounding 6-7 days/week.
- One primary hospital and sister hospital (>95% of cases at primary hospital)
- We have previously described reimbursement over 1 year period July, 2011 – June, 2012.
- Average monthly charges for 2011-2012 were $43,814 ($32,421 inpatient and $11,393 outpatient).

Methods:
- Review of consultation service billing records comparing previously reported 2011-12 data to 2012-13 and 2013-14 (through 2/2014).
- Monthly charges, net revenue on those charges, consult numbers and types of payer breakdown are described.

Results:
- Total encounters (using monthly averages) from the start of the consult service in 2011 to the current 2013-14 fiscal year are steadily increasing.
- Encounters increased across all service types – inpatient, outpatient, procedures, counseling, critical care, prolong svcs.
- A total of 37 different CPT codes were used in 2013-14.
- Work RVUs for 2012-13 averaged 355.1 per month and 373.4 in 2013. In July, 2013 RVUs were 597.6.
- Collection rate for 2013-14 is 88.7% (through 2/2014).
- Reimbursement rate for 2013 (through February, 2014) was 31% of all charges.
- 2013-14 average monthly charges are $62,984 (July 2013, $94,508) compared to $43,814 in 2011-12.
- 2013-14 average monthly reimbursement is $19,506 (July 2013 $20,962 and August, 2013 $22,533) compared to $13,083 in 2011-12.
- In 2013-14 Blue Choice was the most common payer overall (24% inpatient, 33% outpatient) followed by Blue Shield (13%), Medicaid (13%), Medicare (13% inpatient, 7% outpatient) and self pay (12%).

Conclusions:
- A Toxicology consult service can be supported financially with appropriate institutional and departmental support and structure.
- Reimbursement from consultation encounters can potentially generate the salary support for Toxicologist coverage after the service has become established within the institution.
- Reimbursement will vary depending upon the insurance mix and type of hospital system.
- Medical student, resident and fellow education, as well as grant support and other reimbursements were not covered in this study but are particular benefit to the hospital and medical system housing the consult service.

CPT Code Description Charge Executed allowed Medicaid Avg exept Medicaid
99202 Outpt (OD) halt (15 min) 499.00 395.99 86.92 217.86
99205 Inpt hl t (10 min) 580.00 280.69 79.55 246.87
99211 Inpt hl t (15 min) 115.00 56.00 14.57 51.62
99223 Inpt hl t (31 15 min) 235.00 146.96 37.28 126.82
99229 Crit Care (30-74 min) 780.00 319.18 83.63 277.84
99230 Crit Care (75-118 min) 780.00 319.18 83.63 277.84
99231 Crit Care (120 min or more) 780.00 319.18 83.63 277.84
99292 Prot mgmt (each 30 min) 350.00 159.70 NA 139.16
99295 Prot mgmt (1st hr) 280.00 127.22 35.56 138.41

Average monthly charges and revenue 11-12, 12-13, 13-14*
Average monthly consults (in, out and procedures) 11-12, 12-13, 13-14*

Total Charges and Reimbursements 11-12, 12-13 and 13-14*