**Documentation Tips for:** Accurate Physician hospital admission billing is based on complete documentation of the three main parts of an H&P: the history, the exam, and the assessment & plan. The level of complexity that is documented will support the level of billing and reimbursement. The portion of documentation that is most missed - and responsible for lost revenue - is the history section. This portion consists of the history of present illness; the review of systems; and past, family and social history.

Elements of the history of present illness include: location, quality, severity, duration, timing, context, modifying factors, associated signs and symptoms. For the lowest level of documentation, 1 to 3 elements are needed, for more complete histories, 4 or more are needed.

“The patient has been bleeding from every orifice since being bitten by a Boomslang earlier in the day. Patient also complains of headache and nausea.”

A complete review of systems mentions 10 systems or there is a statement of some systems with a statement “aside from these, a complete review of systems was asked and all others were negative”. For the lowest level of billing one system or none are documented. A middle level charge requires 2 to 9 systems. ROS consists of Constitutional, Eyes, Respiratory, Allergy/Immunology, Cardio-vascular, Psychological, GI, GU, Musculo-skeletal, Neurology, Endocrinology, Hem/lymph, Integumentary (skin, breast), Ears/nose/mouth/throat.

“Aside from bleeding from every orifice, headache and nausea, a complete review of systems was asked and all others were negative.” or “Because of the patient’s altered mental status, a reliable, complete review of systems was not possible to be attained.” or “The patient complains of breathing problems, palpitations, penile discharge, nausea, headache, red eyes, breast masses, diabetes, myasthenia gravis, body aches, and clotting difficulties.”

For middle level billing, one history area is adequate, otherwise two or more of past, family and social histories must be documented.

“The patient is a herpetologist who admits to marijuana use, as well as 2 cases of beer per day. His past medical history is notable for diabetic neuropathy and myasthenia gravis. His mother died of breast cancer at the age of 48 and his father of some sort of ‘heart problems’ at 49.”

Clinical Documentation Improvement Team 352.265.0680 ext 44130 or 48769