

Patient ID: 1	Patient Name: User, Intelicode	Sex: M	DOB: 2/28/1970	Visit Date: 2/25/2014	Audit Date: 2/28/2014
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Provider: Attending Provider, Intelicode	Specialty: Family Practice		
Service Category: Office or Other Outpatient	Sub Category: Initial Visit		
Requester:	Reviewer: Auditor, A		
Fee Schedule: (2014Q1) INDIANA - STATEWIDE	Conv. Factor: 100%	Status: New	
Face to Face: 0 Minutes	Counseling: 0 Minutes	Psychotherapy Face to Face: 0 Minutes	Prolonged Face to Face: 0 Minutes
Provider Code: 99205	Reviewer Code: 99201		
Provider RVU: 5.78	Reviewer RVU: 1.21	Points: 100	
Provider Fee: \$146.92	Reviewer Fee: \$30.64	Over Billed: \$116.28	Variance: 4

Provider Code 99205	Reviewer Code 99201
Provider Diagnosis 1 789.00 ABDMNAL PAIN UNSPCF SITE	Reviewer Diagnosis 1 789.00 ABDMNAL PAIN UNSPCF SITE

History **Detailed**

Chief Complaint Documented: Abdominal Pain at work

History of Present Illness (HPI) **Extended**
 Duration, Location, Quality, Severity

Review of Systems (ROS) **Extended**
 Constitutional Symptoms, Gastrointestinal, Genitourinary, Neurological

Past, Family & Social History (PFSH) **Pertinent**

- PAST:** Current Medications
- FAMILY:**
- SOCIAL:** Occupational History, Current Employment

Examination **Focused (97)**

General Multi System Exam (97)
 Cardiovascular - Auscultation of heart with notation of abnormal sounds and murmurs
 Gastrointestinal - Examination of abdomen

Medical Decision **Moderate Complexity**

Diagnosis or Management Options
 I New Problem - Additional work-up planned

Amount/Complexity of Data
 - Review and/or order of clinical lab tests (CPT codes in the 80000 series)

Risk MODERATE

Presenting Problem
 - Undiagnosed New Problem with Uncertain Prognosis

Encounter Notes

Not enough elements in the History, Exam, and/or Decision on documentation to bill a 99205.
 Diagnosis Variation (I) - The documentation for this encounter reflects a diagnosis coding variation from what was listed on the HCFA 1500 or superbill.