MD Aware’s New Faculty Edition: VA and UW

"I am excited to join the hospital medicine group at the Seattle VA this year and get back to patient care after my chief resident year. My goals for my first year as an attending are to settle in to my new job, teach as much as I can, and look for new opportunities to get involved in medical education through my new position. I’m also hoping to get a lot of good use out of my Mountain Collective ski pass this year and spend some quality time with my wife, Jess, and our new dog, Max."

Luis Tulluch

“My name’s Luis and I’m delighted to be returning to the Seattle VA as a hospitalist and Infectious Disease consultant. In addition to settling in to my hybrid position, I’m creating a Tele-Infectious Disease program to serve veterans in the North Puget Sound, Olympic Peninsula, and Anchorage/Mat-Su Valley regions. My other clinical interests include managing beta-lactam allergies and introducing antimicrobial stewardship to medical students early in their training. When I’m not at work, you’ll find me playing board games or spending time with my partner, Ellen, my family, and my cats. If I wasn’t a physician, I would’ve liked to be a narrator for the History channel.”

Tom Newman

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Jesse Levin
 Billing Tip

Time-Based Billing for High-Complexity Inpatients (and Med Consults)

A time-based billing addendum for any high-complexity patients (70+ minutes for new patients or 35+ minutes for follow-up patients) takes away any ambiguity in the coders’ interpretation of your notes and ensures that the additional wRVUs for Level 3 encounters are captured. Time trumps E/M when the patient is medically complex, and the coders will assign the billing code based on the time you specify.

(Caution: Avoid under-billing for time by specifying less than 35 minutes for complex follow-up patients!)
New Faculty Edition: VA and UW

“I’m Jake Stein, originally from Durham, North Carolina, and a recent graduate of the UW residency program. I’m working nights and thrilled to be a part of the group! Every day, I’m impressed by the folks on our hospitalist team, with their intellect, collegial approach, and dedication to patient care. This year, I’m finishing up a project about sharing discharge summaries with patients, and developing a workshop on sharing digital health resources with underserved patients. In my free time, I enjoy hiking, traveling, reading, and spending time with my lovely wife, Sayaka. I also love playing music and actually have an original album out on Spotify! Once again, I am thankful to be a part of such an excellent team.”

Check out Jake’s album Onward and Upward on Spotify.

“Having completed infectious disease fellowship at UW, I am enjoying the balance of general medicine on the wards and specialty HIV care at Madison Clinic. I am also continuing work on several research projects related to tuberculosis, HIV, and non-communicable diseases. In addition, public health is important to me, and I spent part of this past summer in the Marshall Islands volunteering on an island-wide tuberculosis screening campaign. When not at work, I can usually be found climbing in the Cascades, trail running, or traveling overseas. Up next—Iceland!”

Kristina Bajema

Billing Tip Continued

Consider writing your notes the same way as usual (with a full, itemized Assessment & Plan) while also adding a brief time-based addendum specifying 35 minutes or more for any high-complexity (“Level 3”) patients.

Also to keep in mind:
-Your total time can include time spent reviewing the EHR for current/prior/OSH records, placing orders, or talking to any care providers/multidisciplinary staff about care advancement. Also do not get hung up on the word “unit” in the stock ORCA addendum if your workflow includes the use of phones or networked computers.

-When addending Housestaff notes for time, you do not need to list diagnoses again if you also stated somewhere that you “agree with Dr. _’s note.” HOWEVER, you do need to specify at least one diagnosis when addending medical student notes by time.

- The requirements for Level 2 follow-up by E/M components are minimal (1 HPI + 1 ROS / 2 exam systems + moderate MDM), so adding time-based billing for 25–30 minutes is NOT necessary, unless the base note was written by a medical student.

Recent Publications, Presentations, and Awards

Congratulations Divya Gollapudi (HMC) for becoming Co-Chair of the 2019 WA ACP Annual Meeting.

Congratulations Susan Merel (UWMC) and Divya Gollapudi (HMC) for being elected to the WA State ACP Executive Council to serve a 2-year term.

David Watkins (HMC) is lead author of “Alma-Ata at 40 years: reflections from the Lancet Commission on Investing in Health” in The Lancet.