LSUHSCORS PRESENTS:

Research Billing in EPIC

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Objectives

- Discuss the importance of the MCA in the context of Research Billing Compliance
- Review Linking to Research Studies in Epic
- Describe the process for Research Billing Review in Epic

Lifecycle of a Clinical Trial



Components of Research Billing in EPIC

- 1. Medicare Coverage Analysis (MCA)
- 2. Standard of Care Processes that affect Research Billing Compliance
- 3. Linking to Research Study in EPIC
- 4. Research Billing Review

What is a Medicare Coverage Analysis?

Analysis required for all clinical trials involving tests, procedures, and interventions associated with a clinical trial that are invoiced to third party payers (i.e., Sponsors) to determine what costs, if any, can be covered by Medicare.

The MCA is one of the most useful documents for building a clinical trial budget and ensuring clinical trial billing compliance.

LSUHSC CTO Training - Medicare Coverage Analysis for Clinical Research

Understanding the MCA ...and Why It Is IMPORTANT

- The Principal Investigator (PI) has the ultimate responsibility for achieving research billing compliance..... but the full support of the study team is needed to do so successfully.
- The PI has primary responsibility to understand and comply with rules for billing Medicare, Medicaid and third-party payors for services, drugs, devices, tests and procedures rendered in the clinical research context.
- Other site personnel (including patient service representatives, billers, coders, clinic administrators, etc.) are responsible for working with the Principal Investigator and study team to ensure that services for patients enrolled in research studies are <u>scheduled</u>, coded, billed and documented appropriately.

Risks Associated with Research Billing Non-Compliance

- Billing for services that are already paid by the sponsor (double billing)
- 2. Billing for services promised free in the informed consent
- 3. Billing for services that are for research-purposes only
- 4. Billing for services that are part of a non-qualifying clinical trial and do not qualify for coverage

Federal False Claims Act

- Federal False Claims Act (FCA) establishes liability for anyone who submits a false claim for payment to the government
 Specific intent not required
- False Claims Act applies to clinical research activities and failure to comply with the rules may lead to fines and penalties
- Under the False Claims Act, those who knowingly submit, or cause another person or entity to submit false claims for payment of government funds, are liable for three times the government's damages plus civil penalties of \$10,781 to \$21,563 **per** false claim.
- Study documents and MCA must be aligned to assure compliance with clinical trial billing rules and the regulations that protect human subjects



The 3 C's of Research Billing Compliance

- 1. Coordination of study information across multiple study documents
- 2. Communication of relevant study information to the billing process
- 3. Cooperation among departments and offices that may not usually work together

The 3 C's of Research Billing Compliance

- 1. Information that must be coordinated and communicated to minimize compliance risks
 - What is billable and not billable
 - Who is enrolled in a research study
 - Which services are required by the protocol
- 2. Within an academic medical setting, many different parties are involved in developing study documents that have important information for billing:
 - University/Campus
 - School of Medicine
 - Medical Center
 - Physician Offices
 - Sub-contractors/Private Physician Groups

The PI and SC should be the Protocol EXPERTS for Non-Study Staff



The MCA is our cheat sheet to WHO pays WHAT

Research Billing Terms & Definitions

- **Study related**: A service/procedure that must happen for a research study and occurs after the subject has signed the research consent.
 - Study-related services may bill to insurance (designated as **M** on the MCA)
- Routine Care Costs aka Standard of Care: A study-related service that *also* happens as part of a subject's standard medical care *and* is not promised free from the sponsor is designated as M on the MCA. M services bill to insurance.
 - These costs may include doctor visits, hospital stays, and lab and imaging tests.
- **Research Sponsored (S)**: A study-related service that *only* happens for research, <u>or</u> is promised free from the sponsor (even if it is part of a subject's standard medical care) will be designated as S on the MCA. **S services must bill to the sponsor.**
 - These costs may include the investigational intervention (such as the drug being tested), extra doctor visits, electrocardiograms or blood draws, certain lab and imaging tests, and questionnaires performed solely for research purposes.

MCAs can be simple and easy to understand

S=Paid for by study and cannot be billed to insurance

INV=Invoiceable services paid by study

M=Routine cost in a qualifying clinical trial and can be billed to Medicare

M/S=Routine cost in a qualifying clinical trial and can be billed to Medicare. If not covered by insurance, will be covered by sponsor per Non-SOC below.

X=This is a non-billable item and will not generate a charge.

NC= This is not a billable charge.

VISIT SCHEDULE	CPT Code	MODIFIER TYPE	Baseline/ Screening (-90 days)	Surgery Visit	Post Surgery/ Discharge	Week 6 ±14 days	Month 3 ±30 days	Month 6 ±30 days	Month 12 ±60 days	Month 24 ±60 days	Unschedule d	COMMENTS
PROTOCOL RELATED ITEMS & SERVICES												COMINIENTS
Informed Consent Process			S									
Eligibility Confirmation			S	S								
Demographics			S									
Medical History			S									
Physical Exam			М	M	S	S	s	5	5	S	S	Post Surgery/Discharge, per investigators discretion
Neurological Examination			S	S	S	s	S	S	S	S	S	Post Surgery/Discharge, per investigators discretion
X-ray (AP, lateral, flex/ext films)	72050		м	м	м	s	s	s	s	s	s	For Surgery Visit, Pre- and post-implant images will be collected using intro-operative fluoroscopy instead of standard x-rays. For Post Surgery/Discharge Visit, Neutral AP and Lateral X-ray only, per investigator's discretion.
Osteoporosis Assessment			S									
CT scan	72125		м		м				s	s		CT scan optional to rule out any bony abnormalities. For 12m and 24m, sagittal and coronal reconstructions are required
MRI	72156		м									MRI required for all patients, unless Inclusion #2b is determined using x- rays or CT
Surgical Procedure				м								For investigational portion of surgery, device is provided by sponsor.
Pregnancy Test	81025		м									Females of childbearing potential only.
Nicotine Intake			S			S	S	S	S	S		
VAS pain			S			S	S	S	S	S		
NDI			S			S	S	S	\$	S		
SF-12 and EQ-5D-5L			S			S	S	S	S	S		
Satisfaction Survey									S	S		
Employment Status			S			S	S	S	S	S		
Adverse event assessment				S	S	S	S	5	5	S	S	
Concomitant medications			S	S	S	S	s	S	S	S	S	

... or MCAs can be very complex

												Tre	atment																Fo	low Up				
	Screening 1@21Day	s Treatm	ent Cycle	\$1-440	içles @56	Days																					Term Safe						EOS	Comments
Informed Consent	Screening S(X)	C1D1	C1D7	C1D14	C1D28	C1D42	C1056	C2D1	C2D7	C2D14	C2D28	C2D42	C2D56'	C3D1'	C3D7	C3D14 C	3D28	C3D42	C3D56'	C4D1'	C4D7	C4D14	C4D28	C4D42	C4D56	/E Long	Ter Long	Ter Long	Tei Long 1	ei Long T	er Long T	e Long 1	e EOSA	This is not a billable item or service.
Inclusion/Exclusion Criteria Demographics and baseline disease	S(X)	-	-	-		-	-	-	-		_			-			_						-	-	-	+	-	+	-	-	-	-	-	This is not a billable item or service.
characteristics Medical History	5(X) 5(X)	-	-	-	-		-		-					_			_			-		-	-	-	-	+	-	-	-	-	-	-	-	This is not a billable item or service. This is not a billable item or service.
Prior And Concomitant Medications ECOG Performance Status	500		5(00)	5(X)	S(X)	5(00)				S(X)	S(X)	5(00)		5(00)	S(X)	S(X)	500	5(X)		\$00	S(X)	S(X)	5(00)	S(X)		50	() S()	n so	0 SIX	S(X)	500	SIX	5(X)	This is not a billable item or service. This is not a billable item or service.
Height, Weight	\$(00)	S(X) S(X)					S(X)	S(X) S(X)					S(X) S(X)	SDO					S(X)	\$00 \$00					S(X)	50 50	() S()	0 SD	() \$(X)	S(X)	S(X)	S(X)	S(X)	This is not a billable item or service.
Vital Sign Measurement	500	65(X)	-	-		-	S(X)	65(X)	-	<u> </u>	_		S(X)	65(00)			-		S(X)	6500	-	-	-	-	SDO	50	d) SD	<u>a so</u>	d sixi	S(X)	500	SIX	5(X)	This is not a billable item or service. A conventional care reference for this item could not be found following review of UpToDate and NCCN
Electrocardiogram	s	-	-	-			s	-	-		_		s	_			_		s	<u> </u>		-	_	-	s	-	_	_	-	-	-	-	s	Guidelines. Therefore, this item is considered research-related and should be paid for by the sponsor.
																																		A physical exam appears reasonable and necessary at this frequency for the clinical management of the parties in note to assess the parties of assess status, as well as to detect, monthr, and thesi side effects of 1250-000MARCE (Reg. nonces (VF-1)). The appearance of the status of the status of the status of the technologies and the status of the s
Physical Examination	M1	M1					MI	MI					M1	M1					M1	M1					MI	M	1 M	1 M	1 M1	M1	M1	MI	MI	Differentiated/Large or Small Cell Carcinomas or Unknown Primary (MS-32). Coverage at screening, during treatment, and during the first 100 days of follow-up is supported by NCD 310.1.
- E&M-EST, PATIENT-LVL IV (CPT-	MI	ML					MI	ML					MI	MI					M1	MI					ML	M	1 M		1 M1		MI			
+ EBIM-EST, PATIENT-LVL V (CPT-			-	-		-			-	-						-	-							-										
99215) Histopathology	M1 S(X)	M1					M1	M1					M1	M1					M1	M1	-		-	1	M1	M	1 M	1 M	1 M1	M1	M1	M1	M1	This is not a billable item or service.
Pregnancy Test For WOCBP	S(INV)	SUNV					SUNA	SUNV					SINV	SONV)					/	_	/	/	-	1	SUNV) S(IN	M SUN	M 504		n same) SUNV	SUM	n same	There are no known effects of the study drug on pregnant mothers or unborn children (ICF, pg. 12). Therefore, this item should be considered research-related and paid for by the sponsor.
URINE PREGNANCY TEST (CPT-																	>	_	-	/	-	/	_	7-										
+ HOG QUANTITATIVE (CPT-84702)	S(INV) S(INV)	S(INV) S(INV)					S(INV) S(INV)	S(INV)					S(INV) S(INV)	S(INV) S(INV)	-	_	-	/	-	/	/	-	/	-1-	S(INV S(INV) S(IN	(I) S(IN)	M) 50N	N) S(IN) N) S(IN)) S(INV) S(INV) S(INV	S(IN)	1 S(INV	
Adverse Event Collection	-	S(X)	500	S(X)	S(X)	500	S(X)	S(X)	500	S(X)	SDO	500	S(X)	~	-	/	_	/	/	· .	/	_	1	-1	SDO	50	d) S()	0 <u>s</u> 0	d six	S(X)	\$00	SIX	5(X)	This is not a billable item or service. 212Pb-DOTAMTATE will be provided by the sponsor (Protocol, p. 32). It should therefore be considered
212pb-DOTAMTATE (IV)		NBÍNC						NB(NC	1			/	_	/	_	~	/	· .	/	_	-	/	_	_	<u>الــــــــــــــــــــــــــــــــــــ</u>									research-related.
212ob-DOTAMTATE Administration		M1						M1			/	-	/		/	_	/	/		/	_	/	/		7_									This item is required for the provision of IV medication used in the study. Coverage is supported by NCD 310.1.
- HCIVINEUSION, THERAPY - EA		MI						-	-	· .	-	-	/	_	-	/		/	_	~	\sim	· .	/	_	7									
HC IV INFUSION, THERAPY - UP TO ONE HOUR (CPT-96365)		MI			ingD	-		ans	/	linsu	ranc	~	-	/		/	_	~	/	-	/	/	-	/	-1-									
			-			osig	nati	Dat	jent		· .	/	_	/	/	_	/	_	/	/		/	_	/	-1			+	-	-	-	-	-	This premedication is required by the protocol to be taken with the study drug to prevent infusion-related
Pre-AA Anti-emetic Medications'		M1	<u> </u>	Bill	ing	T	aill to	opa	able	01_	/	_	/	_	/	_	-	/	· .	/	/	-	/	· .	\sim	\!—		+	-	-	-	-	-	reactions (Protocol, p. 6). Coverage is supported by NCD 310.1. This premedication is required by the protocol to be taken with the study drug to minimize kidney toxicity
Amino Adids	<u> </u>	M1	-	P	_	1	Coill'	to SI	2011	·	/	_	/	/	_	/	-	/	/		/	_	/	/	_	7–	_	_	_	-	-	-	-	(Protocol, p. 6). Coverage is supported by NCD 310.1. This item is required for the provision of IV medications used in the study. Coverage is supported by NCD
AA Infusion		M1		M	/		P	Rill	aple	/	_	/		/	_	/	/		/	_	/	/	-	/	_	7-								310.1.
HCIVINFUSION, THERAPY - EA ADD'L HOUR (CPT-96366)		M1		1S	-	/	INO		_	/	_	/	_	-	-		/	_	-	/	· .	/	_	~	/	-1								
HC IV INFUSION, THERAPY - UP TO ONE HOUR (CPT-96365)		MI		1	NB	/	-				-	lure		CON	sem	dy	_	/	_	/	/		/	_	/	-								
			<u> </u>	1	-	-	100	Des	Bur	dP	ocer	toto	mec	-	hes	uur	Je	/		or	/	_	-	/	· .	/	ᢣ⊢	-		-	-	-	-	This item is for submission of a blood sample to a central lab for analysis (Protocol, p. 39). Therefore, it should be paid for by the sponsor.
PK Blood Samples"	-	59(50)	-	-	1-	npor	tITTE	Ach	1eeo	- Err	e in	1111-	for	by	VIQU	Billar		hes	pon	/	-	-	or	/	/	_	7-	+	-	-	-	-	-	This item is for submission of a urine sample to a central lab for analysis (Protocol, p. 39). Therefore, it
PK Urine Collection*		55(50)			A I	Z LE Z Z Z		Le le	No No	ed fre ed fre eable lied S charge t Part outin Send	ervice e-th t of t	he Re pe	ot Se am is asea	para pro rch ?	vider Study	afety	and	pair lot B	d for	by	a chi	arge				T								Include sealable to the Maconomic This term is provided at sources to serve as a basine and soung treatment to months for treatment. A more than the source forgitory or as a product of the MS 111.1 Assuming the first IDD does up to support of MS 111.1 Assuming to the MCN Collidere for the sources and Assumed Theorem (A-1232), CEC and source ensuming should be control based based on the source for a source and assumed to a source and assume that the sources and the source of the source of the source of the source as a source and the source and the source of the source of the source of the source of the source as a source and the source and the source of the source and the source of the source of the source and the source of the source and the source of the source of the source of the source of the source and the source and the source of the source and the source of the source and the source of the source and the source of the so
Clinical Chemistry	M1	MI		M1	M1	MAT	NR	/	TR	outin	-	_		hlei	tem				MI	M		MI		MI	MI	M								Therefore, this item should be considered research-related and paid for by the sponsor during the 6 mo - 24 mo follow-up period.
COMPREHENSIVE METABOLIC PAN 14 CMP (CPT-R0058)							SIR	C	to	end	Our	non	billa	-														-						
14 CWP (CPT-80053)	M1	M1	-	M1	M1	M1		-	1	This	is an	110		M1		MI	M1	MI	M1	M1		M1	M1	MI	M1	M	1 5	S	S	S	S	S	S	
							12/21	-		11113																								The Barn is provided at screeing to save as a basiline and during treatment to motifier for treatment- related completions such as released number of white blood cells (CP gp. 1). Coverge at Lorenze during during treatment, and and gpe for to 20 days of the blood cells (CP gp. 1). Coverge at Lorenze during during treatment, and during for the XD days of the blood cells (SP gp. 1). Society at Lorenze during treatment, and during the treatment of the blood cells (SP gp. 1). Society at Lorenze during treatment, and during the treatment of the blood cells (SP gp. 1). Society at Lorenze during the screen during at Lorenze during the cells are used (SP Lorenze). Blood cells (SP gp. 1), society during the cells are used (SP gp. 1). Society at Lorenze during the cells (SP gp. 1), society during the cells and the cells of the lorenze during the cells of the SP days (SP cells (SP cells are used to the cells of the cells of the lorenze during the cells of the SP days (SP cells (SP cells are used to the cells of the cells of the lorenze during the cells of the SP days (SP cells (SP cells (SP cells of the SP cells of the SP cells of the SP cells (SP cells of the SP cells of the SP cells (SP cells of the SP cells of the SP cells of the SP cells of the SP cells (SP cells of the SP cells o
Hematology	M1	M1		M1	M1	M1	M1	MI		M1	M1	M1	M1	м1		MI	M1	M1	M1	M1		M1	MI	M1	MI	м	1 S	s	s	s	s	s	s	Therefore, this item should be considered research-related and paid for by the sponsor during the 6 mo - 2 mo follow-up period.
Hematology - COMPLCEC W/PLT W/AUTOM DIFF (CPT-85025) Cosgulation/ - DOTHEOMENT TIME (CDT-85510)	M1 S(INV) S(INV)	MI		MI	MI	MI	MI	MI		MI	M1	M1	MI	MI		MI	M1	MI	M1	MI		MI	M1	MI	M1	м	1 5	s	s	s	S	s	s	Coverage for this item is limited by NCD 190.17. Therefore, this item should be considered research-related and paid for by the sponsor.
Virus Serology (HIV)	s																																	Coverage of this item is limited by NCD 210.7. Therefore, it should be considered research-related and paid for by the sponsor.
- HIV-L DNA QUAL BY PCR (CPT-																																		
010001																										1								Coverage of this item is limited by NCD 210.6. Therefore, it should be considered research-related and paid
Virus Serology (Hepatitis B)	S																																	for by the sponsor.

Lessons Learned

Never assume that RESEARCH means that everything required by the protocol is FREE

Let the normal processes that are currently in place for nonresearch patients continue to function for your research patients (i.e. prior authorizations, scheduling, etc.)

Utilize the current workflows of the clinic/hospital/support staff to implement the clinical trial.

How do we IDENTIFY Patients in EPIC as Enrolled in Research?

Linking Patient to the Research Study

y Mainten	ance 🏠 P	atient Station	∎ Patient Lists	🔎 My Reports 🛛 🛱 Appt	s 🔣 Snapboard	Resear	ch Billing F	Review 🌜 Tele	phone Call 🍕	• Encounter	📑 ED Track Board	💽 Media M	1	🚱 Research Studies
(Ctrl+1)×												-	_
$\leftarrow \rightarrow$	SnapShot	Chart Review	v Order Inquiry	y Review Flowsheets	Results Review	Allergies	History	Problem List	Demograph	ics Letters	Research Studies			
Resea	rch Stu	dies												
Tulane	Asthma S	tudy 🕂 Ad	J 3											
Recei	nt													
Tulan	e Asthma S	Study [10012]												

- 1. Click on the Research Studies button in the main toolbar.
- 2. Search for and select your patient to open their chart.
- 3. Within the Research Studies activity, search for the study in the Add study search field.

Linking Patient to the Research Study

lesearch Studies	⑦ ~
Study List	
Tulane Asthma Study	
Participant Details Status Status Effective Date Enrolled: Other I1/18/2024 Active Start Date Active End Date I1/18/2024 Participant ID I1234567 Patient-Specific Coordinators Comments B D D D D 2 + Insert SmartText + Participant IC + → = C	Study Details Study Type Study Code IRB# NCT# Interventional 10012 102 00704495 Description Tulane Medical Center is participating in a study of the efficacy of asthma treatment and control in patients currently being treated with a leukotriene modulator and/or sympathonimetic agents but are not using inhaled steroids. Patients in this study may be receiving a study medication or a placebo. If you have any patient care concerns potentially related to study, please contact the study team at x5- S555. We Minvestigator Research, MD Principal Investigator Patient-Facing Area of Research Lungs & Breathing Links Clinical Trial Info ●

- 4. Search for and select an active association status, such as In Screening, Consented, or one of the Enrolled options. Once selected, the Status Effective Date will auto populate with today's date. If you need to back chart (chart for events that happened in the past), change the Status Effective Date and the Active Start Date will automatically adjust.
- 5. Enter a participant ID if the patient's name is not used in the study and only an ID number.
- 6. Click Accept to save your changes.

Research Association Status Definitions

Pre-Consent

- Identified subject is identified as meeting prescreening criteria but has not been approached
- Interested subject has been approached to participate but has not signed consent form
- **Declined** *subject is not interested in participating*

After Consent

- In Screening subject has consented to participate but has not completed screening phase
- **Consented** subject has consented to participate but has not started treatment
- Enrolled Treatment Phase subject is on active treatment
- Enrolled Follow Up Phase subject is still on trial but has completed treatment phase and in follow up
- Withdrawn
- Completed subject has completed all study visits and is no longer enrolled in trial

Linking Patient to the Research Study

Monique-RC Bell Female. 43 y.o., 1/17/1981	Snapshot Chart Review Order Inquiry Review Flowsheets Results Review Allergies History Problem List Demographics Letters Research Studies	• • •
MRN: 20032978 Language: English Code: Not on file (has ACP docs) Search COVID-19 Vaccine: Unknown Solation: None & Research Participant Care Team: No PCP	Participant Details Additional Info Past Updates Status Status	Op Study Details Study Type Study Code IRB# NCT# Interventional 10012 102 00704495 Description Tulane Medical Center is participating in a study of the efficacy of asthma treatment and control in patients currently being treated with a leukotiene modulator and/or sympathonimetic agents but are not using inhaled sterolics. Patients in this study may be receiving a study medication or a placebo. If you have any patient care concerns potentially related to study, please contact the study team at x5-5555.
Primary Cvg: None Allergies: Pollen Extracts Temp: 98.8 °F (37.1 °C) >1 day	台 Study Calendar No study visits	MR Md Investigator Research, MD Principal Investigator Patient-Facing Area of Research Lunos & Breathing
Weight - Scale: 90.7 kg (200 lb) >7 days BMI: — P: 128/78 >1 day Pulse: 79 >1 day LAST 3YR A: Internal Med (2)		Links Clinical Trial Info @ ^ Documentation

- 7. Notice a Research Participant banner will appear on the Storyboard. This will alert every provider that views the chart of the patient's participation in a research study.
- 8. You will be able to click on Participant Details hyperlink to view the study report, which will display study details, linked encounters and linked orders

Link Encounter to Study When in an Encounter

- 1. Click on the Research Studies button in the main toolbar.
- 2. Search for and select your patient to open their chart.
- 3. Within the Research Studies activity, search for the study in the Add study search field.



Link Upcoming Visits to Studies via Appointment Desk

- 1. Click **Appts** on your main toolbar.
- 2. Look up your patient and click Accept.
- 3. Right-click the upcoming appointment.
- 4. Select **Link to Research Study** to confirm association or to link the appointment to the research study.
- Click ★ Close when all updates for the encounter are complete.

Link Upcoming Visits to Studies via Appointment Desk

Epic - Chart Review & Suc	dy Maintenance 🛁 Patient S Alas, Nate		inte 🔎	My Reports Apple	Papboa	rd. 💮 Research Billing Revie	w 🤇 Telophone	Call 9, Encount	ir 📲 ED TrackBoard	🕒 Necha Manager 💮 Res	earch Stud
	Appt Desk Appointment De										
Nate-RC Alas Male, 68 y.o., 04/17/1955	to Book it ∳ One Cick		Beques	st + 📳 Reports + 🛔 Patie	nt Optiog	gs • 🖶 Printing • 🗎 Form i	Reprints				_
608-555-7972 MRN: 20032654	Alas, Nate-RC	and the second		OB (17/1955		Registration Status Ver	Mob	la .	E-ma	4	
Pt Ver Status: Ver PRIVATE: None	2880 Madrid Dr Verona WI 53593		15	SN 59-24-1237 ogal Name		Preferred Language English Needs Interpreter?	Hom 608- Wor	555-7972	Prov	entive Care	
OVID-19 Vaccine: Unknown				las, Nate-RC		No	8477				
Research Participant		101 h / 10	-	Check in							-
My LCMC Health: Inactive	Guarantor Accourt	nts		Check Out							
Diana McQueenie, MD PCP - General	Account Name Alas,Nate-Rc	New	/er Stal	Reschedule Cance//Reschedule		Serv Area SBO	Type P/F	Fin Class SELF	Balance 0.00	Acct Status	
OVERAGE & FINANCIAL INFO	PayonPlan	CABA	er Stat	Change Appointment	per						
Guarantor: P/F - Self (+1) Self-Pay Bal Due: \$0.00	Account Name	Acct \	/er Stal	Cancel Check In Edit Appointment Notes	F	Serv Area	Туре	Fin Class	Balance	Acct Status	- 1
0 SHOWS 0% All departments	Euture East CSN	Encounter Date	Time	Edit Appointment Info Copy into Book II		Provider	Appointment	Department	Appt Notes	ORD R. Rill Proce	dure
CCN Insurance: None	3 ⁰⁰⁵⁸³⁶	1/9/2024 Tue	9.00	Order Entry Order Review	т	Nurse Family Medicine [E400000]	UMCNO ME	D CLN ACB	annual exam		
				Link Requests Link Research Study	4						
				Expand Reg Appointment Contact	1						
				Message							

Reports for Linking Upcoming Visits to Studies

	Ż		LCMC ES Appt Search for Research Coordinators Workbench Template 100935		coming Appoint Expand Appts @ Resea			-		÷				
Description Reports created from this template search for appointments matching the criteria specified. For example, it may be used to find all appointments for patients enrolled in a particular research study.					Petal List Explore Filter Ha:									
				L	inked Participant ID	Visit Date Time	LinI Department Apr	Prov/Res	Appt Status	Visit Type	Linked Study Code	Linked Start Date		
	☆ * *		LCMC ES Appt Search for Research Coordinators	— [EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, CHAIR 3	Sch	INFUSION TX				
J	и 🗱		LONG ES Appl Search for Research Coordinators				EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, FAST TRACK CHAIR 2	Sch	INFUSION TX				
	\$ r	,	Upcoming Appointments				EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, FAST TRACK CHAIR 1	Sch	ONCOLOGY LAB				
	* 70	,	Upcoming Appointments (ALPHAMEDIX)				EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, FAST TRACK CHAIR 2	Sch	INFUSION TX				
	* 7.	,	Upcoming Appointments (CAMURUS)				EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, INFUSION BED 2	Sch	CALCULATED	ALPHAMEDIX-02	11/08/23		
	* 7	,	Upcoming Appointments (CRINETICS)				EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, INFUSION BED 1	Sch	CALCULATED INFUSION 1	ALPHAMEDIX-02	01/08/24		
	* 7	,	Upcoming Appointments (FUSE)				EJGH OP ONCOLOGY	EJGH OP ONCOLOGY, INFUSION BED 2	Sch	CALCULATED INFUSION 1	ALPHAMEDIX-02	01/22/24		
	* 7	,	Upcoming Appointments (Neulasta)											
	* 7		Upcoming Appointments (REFINE)											

- Search in Reporting Workbench for LCMC ES Appt Search for Research Coodinators.
- Modify report with Study Code and Save Report as Favorite.
- Select visits to be linked and Click Link to Research Study.
- Can be used to link Past or Upcoming Appointments Reach out to me if you need additional guidance on setting these up.

Linking Orders to Research Study When in an Encounter

Orders Visit Checklist This Visit	Op <u>t</u> ions ▼	Q
⊘ D _X Association 💉 Edit Multiple 💿 Estimate Options ▾ 🖓	R Providers	
	CC Results	
① This patient has active treatment/therapy plans. []	👌 New Interactions	
🖹 Signed This Visit 🛛 🗧	🔆 Create Panel	
🟠 Unsigned – Outpatient Orders (Incl Rx)	Routing	
CBC with Differential - Please order CBC unless diff clinically indicated ^O o ■ Expected: 4/30/2024, Expires: 4/30/2025, Lab Collect, STAT, When auto diff is abnormal, we will refere to order Manual Differential	د الله المعالم	
Comprehensive Metabolic Panel 9. Expected: 4/30/2024 Approximate, Expires: 4/30/2025, Lab Collect, STAT	Research Association	
CT Abdomen Pelvis w wo Contrast 📎 🔳 Expected: 5/11/2024, Expires: 4/30/2025, Routine, Ancillary Performed, Reason for Exam:	2 Show signed orders in orders cart	vis
Metastatic disease evaluation		
CT Chest with Contrast ⊘ ■ Expected: 5/11/2024, Expires: 4/30/2025, Routine, Ancillary Performed, Reason for Exam: Metastatic Disease Evaluation	Associate R	es

- 1. At the top of the Orders Panel, select Options.
- 2. Then Click Research Association.
- 3. In pop up, Select the check box next to the Order to Associate under the applicable study.

Associate Research Studies	×
العر	EIGH Crinetics
CBC with Differential - Please order CBC unles	
Comprehensive Metabolic Panel	
CT Abdomen Pelvis w wo Contrast	
CT Chest with Contrast	
✓ <u>A</u> ccept	× <u>C</u> ancel
✓ <u>A</u> ccept	× <u>C</u> ancel

Linking Patient to the Research Study

R	esearch St	udie	25			
	☐ ⊻iew Study L	ist				
EJ	GH ALPHAM	1EDI)	(-02			_
	🛊 Participan	t Deta	ils 🖉 8		Additional Info	Past Updates
	Status Enrolled: Trea	atmen	Status Effective Date t Phase 11/14/2023			
	Active Start Da 11/9/2023	ate A	ctive End Date			
	Participant ID					
	Patient-Specif	ic Coo	rdinators			
	CR Con	nie Ro	maine, RN BV Brianne Voros			
	Comments					
	🛗 Study Cale	endar				Hide Past
	Date	Enco	unter Type	Dept	Provider	
	Past					
	11/10/2023	9	HOV - HOV - Completed	EJGH OP ULTRASOUND	EJGH US OP 3	: •
	11/10/2023	9	HOV - HOV - Completed	EJGH CARD TESTING	LCMC CV EJGH CARD TEST ECG	: •
	11/13/2023		CT CHEST WITH CONTRAST Visit - Canceled	EJGH OP CT SCAN	EJGH CT OP 1	÷ •
	11/13/2023		CT ABDOMEN PELVIS WOW CONTRAST Visit - Canceled	EJGH OP CT SCAN	EJGH CT OP 1	: •
	11/13/2023		Rare Cancer Established Patient Visit - Completed	ZZZEJGH YEN RARE CANCR	Mary Alice Hobbs-Maluccio, MD	÷
	11/13/2023	9	HOV - HOV - Completed	EJGH MRI	EJGH MRI 3T	÷ •
	11/14/2023	÷.	Research Initial Evaluation Visit - Completed	ZZZEJGH YEN RARE CANCR	Mary Alice Hobbs-Maluccio, MD	÷ •
	11/14/2023		Infusion, 90 Minutes Visit - Completed	EJGH OP ONCOLOGY	Sherry Sherwood, RN	: •

Once linking begins, you will be able to click on the **Participant Details** hyperlink to view the study report, which will display study details, linked encounters and linked orders in the Study Calendar.

Professional Billing Charges

- Currently, Professional Billing Charges are billed outside of Epic through ACS (in most cases)
- Therefore, these charges are not captured in Epic. Because these charges may be reimbursed by the sponsor, some important safeguards are required to flag research patients when the billing report is sent to ACS.

This can be accomplished with the diagnosis code **Z00.6**: Examination of participant in clinical trial

This will FLAG the patient as enrolled in a clinical trial and prompt ACS to reach out to the Study Coordinator.

CMS – Z00.6 and Q0/Q1 Modifiers

CMS requires that the following diagnosis code be used on Medicare research claims to identify Medicare patients who are participating in a **Qualifying Trial**:

• Diagnosis code **200.6: Examination of participant in clinical trial**

In addition, the claims must include one of the following modifiers to differentiate between routine and investigational clinical services:

- **Q0** Investigational clinical service provided in a clinical research study that is in an approved clinical research study.
- **Q1** Routine clinical service provided in a clinical research study that is in an approved clinical research study.

Coding Office Visits with Modifiers

Wrap-Up	(?
🙀 Images 🔊 Benefits Inguiry 🤚 Dictations 👻 🛹 Open Orders 🎆 Care Teams 🖾 Links 👻 🔊 Preview/Print AVS 🔠 FC Checklist More 🗸	
Patient Instructions Follow-up Communications Review Visit Diagnoses LOS Charge Capture	s.
ම Level of Service	
NEW1 NEW2 NEW3 NEW4 NEW5	2
New1 New2 New3 RET1 RET2 RET3 RET4	0-
IPREV18 IPREV40 IPREV65+ PPREV18 PPREV40	
PPREV65+ TCM 14 Day TCM 7 Day No Fee	
LOS: PR OFFICE OUTPATIENT NEW 45 MINUTES [99204]	4
Modifiers: +	
Additional E/M codes: Click to Add	
Billing area:	

- Q0 Investigational clinical service provided in a clinical research study that is in an approved clinical research study.
- Q1 Routine clinical service provided in a clinical research study that is in an approved clinical research study.

Best Practice

	BestPractice Advisory -	
🗓 🛛 DID YOU ADI	D Z00.6 TO YOUR VISIT DIAGNOSES?	
	 This patient is enrolled in a clinical trial. Please consider: 1. Linking patient to research study 2. Ensuring that all orders are linked to the research study before signing view 	isit.
Click HERE to provide	-	
Remove	Keep Check with your Study Coordinator © Expires: 5/9/2020, Routine, Lab Collect	
Acknowledge Reas	011	
		✓ Accept

Putting it ALL together

Research Billing Review Process

All charges linked to patients enrolled in a research study in Epic are flagged and reviewed to make sure they're billed appropriately through the Research Billing Review Process.

Each charge associated with a research patient falls into one of three buckets:

- **Non-research related**. These charges are billed to the patient or their insurance.
- **Research-related, bill to the study**. These are research charges that will be billed to the study or study sponsor.
- **Research-related, bill to the patient**. These are research-related charges that are billed to and paid by the patient or their insurance.

Research Billing Review Process

🖪 Calculated Infusion 1 Visit									
04/30/24 Study-Related Radiation/Oncology Series DNB (DNB									
04/30/24	Study-Relat	tea		Error)	lation/Uncology	Series DINB (DINB		Marila	✓
				BLUE CROSS - BLUE CROSS POS				Mark as	Reviewed
A Charges 🖓 Encounters								🚽 Acco	unt Activities
C 🛞 Research				Group by: Revenue Code CPT®/	HCPCS Code S	ovc Date Encounter	Review Status	Protocol Day	None Other -
Study-Related -	Bill to Study								
[®] Research Correct All [■] Select All [■] Deselect All [■] [®]									
	Svc Date	Post Date	Code	Procedure	Study Src		Rsh Amount	Qty	Amount
	04/30/2024	04/30/2024	36415	30000030-HC VENIPUNCTURE	study src		29.50	Qiy 1	59.00
	04/30/2024	04/30/2024	86316	30280015-HC LABCORP IMMUNOASSAY TUMOR ANTIGEN QUANT			89.50	1	179.00
			00510		···· 🖬		05.50		115.00
Study-Related - Bill to Insurance/Patient									
🛞 Researc	h Correct All 📃	Select All 📃 D	eselect All						
	h Correct All	Select All 📄 D Post Date	eselect All Code	Procedure	Study Src			Qty	Amount
				Procedure ONDANSETRON HCL (PF) 4 MG/2 ML SOLN	Study Src			Qty 16	Amount 14.75
Study R.	Svc Date	Post Date	Code		-				
Study R	Svc Date 04/30/2024	Post Date 04/30/2024	Code 2500000	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN				16	14.75
Study R	Svc Date 04/30/2024 04/30/2024 04/30/2024	Post Date 04/30/2024 04/30/2024	Code 2500000 2500002	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN	Ê			16	14.75 8.75
Study R	Svc Date 04/30/2024 04/30/2024 04/30/2024 rges	Post Date 04/30/2024 04/30/2024 Pending	Code 2500000 2500002 2500003	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN	Ê			16	14.75 8.75
Study R	. Svc Date 04/30/2024 04/30/2024 04/30/2024 rges h Correct All	Post Date 04/30/2024 04/30/2024 Pending	Code 2500000 2500002 2500003 eselect All	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN arginine-lysine-sterile water 25-25 mg/mL Soln				16 10 1	14.75 8.75 1,489.75
Study R	Svc Date 04/30/2024 04/30/2024 04/30/2024 rges h Correct All	Post Date 04/30/2024 04/30/2024 Pending Select All	Code 2500000 2500002 2500003 eselect All Code	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN arginine-lysine-sterile water 25-25 mg/mL Soln Procedure	E E Study Src			16	14.75 8.75 1,489.75 Amount
Study R	Svc Date 04/30/2024 04/30/2024 04/30/2024 rges h Correct All	Post Date 04/30/2024 04/30/2024 Pending Select All Post Date 04/30/2024	Code 2500000 2500003 2500003 eselect All Code 96375	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN arginine-lysine-sterile water 25-25 mg/mL Soln Procedure 26000010-HC INJECTION INTRAVENOUS THERAPEUTIC/PROPHYLA	E Study Src A			16 10 1	14.75 8.75 1,489.75 Amount 500.00
Study R		Post Date 04/30/2024 04/30/2024 Pending Select All Post Date 04/30/2024 04/30/2024	Code 250000 2500002 2500003 eselect All Code 96375 96365	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN arginine-lysine-sterile water 25-25 mg/mL Soln Procedure 26000010-HC INJECTION INTRAVENOUS THERAPEUTIC/PROPHYLA 26000014-HC INTRAVENOUS INFUSION THERAPEUTIC/PROPHYLA	E Study Src A			16 10 1 2 1	14.75 8.75 1,489.75 Amount 500.00 666.00
Study R	Svc Date 04/30/2024 04/30/2024 04/30/2024 rges h Correct All	Post Date 04/30/2024 04/30/2024 Pending Select All Post Date 04/30/2024	Code 2500000 2500003 2500003 eselect All Code 96375	ONDANSETRON HCL (PF) 4 MG/2 ML SOLN DEXAMETHASONE SODIUM PHOS 10 MG/ML SOLN arginine-lysine-sterile water 25-25 mg/mL Soln Procedure 26000010-HC INJECTION INTRAVENOUS THERAPEUTIC/PROPHYLA	E Study Src A			16 10 1	14.75 8.75 1,489.75 Amount 500.00

Important Takeaways

- 1. Understanding the MCA is the foundation of ensuring compliant research billing
- 2. Linking Patients, Orders, and Encounters on the front end saves a headache on the backend
- 3. Communication with all involved is KEY
- 4. Add Z00.6 diagnosis code with Q0/Q1 modifiers
- 5. Research Billing Non-Compliance jeopardizes our ability to continue doing research. We must work together to ensure that it is done correctly!

Resources

- LSUHSC CTO Training Medicare Coverage Analysis for Clinical Research
- <u>CITI Training Clinical Trial Billing Compliance</u>
- <u>CMS.gov National Coverage Determination (NCD) Routine Costs in Clinical Trials</u>
- HCPCS Modifiers when Billing for Patient Care in Clinical Research Studies

