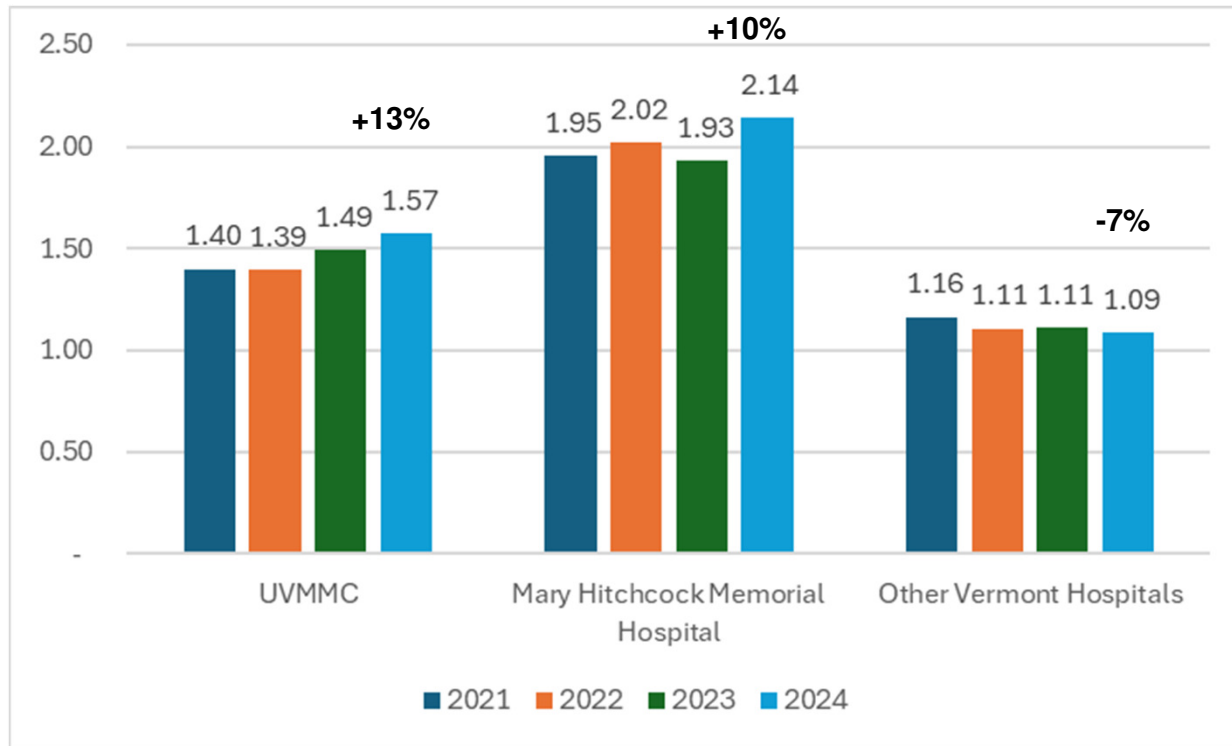# CODING INTENSITY TRENDS

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CASE MIX INDEX | COMPARISON AT HOSPITALS

CMI = A metric to measure the complexity of inpatient services using CMS DRG weights.

From 2021 to 2024, the CMI for most Vermont hospitals apart from academic medical centers was either flat or a slight decrease. At UVMMC and Dartmouth, the CMI Increased 10-13%

BCBSVT local Vermont hospitals claims incurred 1/1/2021 - 12/31/2024, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded

EVALUATION AND MANAGEMENT CODING (E/M)

Existing patient E/M CPT codes in an office or outpatient setting

- **99211** – minimal presenting problems, services lasting around 5 minutes, may not require the presence of a physician

- **99212** – requiring a medically appropriate history and/or examination, straight-forward medical decision-making and typically lasting 10-19 minutes

- **99213** – requiring a low-level of medical decision-making and typically lasting 20-29 minutes

- **99214** – requiring detailed history and detailed examination, a moderate level of medical decision-making and taking 30-39 minutes

- **99215** – medically appropriate history/exam, a high level of medical decision-making and typically lasting 40-54 minutes

EVALUATION AND MANAGEMENT CODING SHIFTS

All providers Existing Patient E/M Distribution 2019 - 2024 YTD
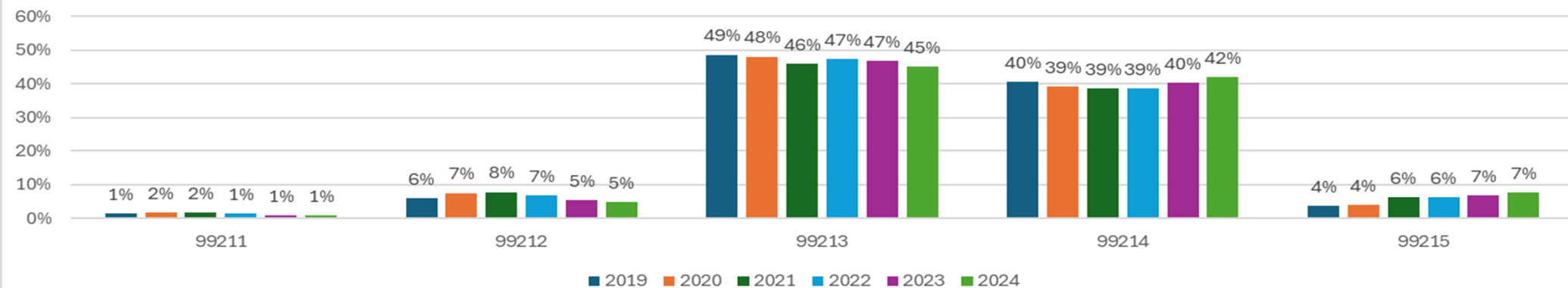
- Approximately 700,000 patient encounters per year
- 99213 and 99214 are the most commonly billed E/M codes, but there has been a noticeable shift over time in their usage
- Growth in 99215 the code for the most complexity and time
- Similar shifts across other CPT code groupings (new patient E/M)

BCBSVT local claims incurred 1/1/2019 - 8/31/2024, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded, 2024 is a partial year

EVALUATION AND MANAGEMENT CODING SHIFTS

UVMMC & Dartmouth Existing Patient E/M Distribution 2019 - 2024 YTD
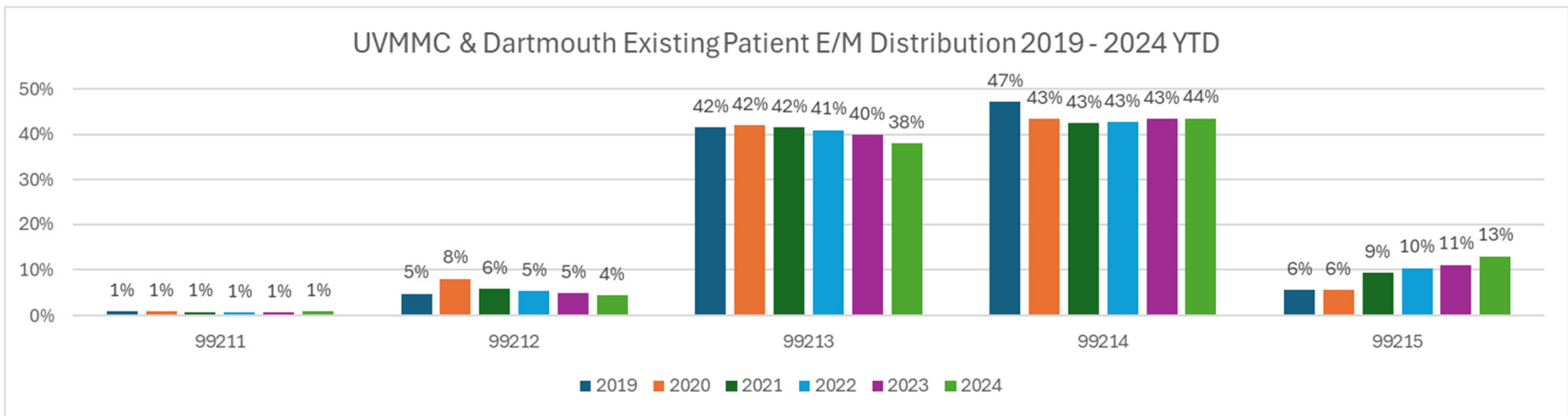
- This trend is similar across all hospitals, but largest shifts occurring at the two academic medical centers where the shift to 99215 is more pronounced

BCBSVT local UVMMC & Dartmouth claims incurred 1/1/2019 - 8/31/2024, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded, 2024 is a partial year
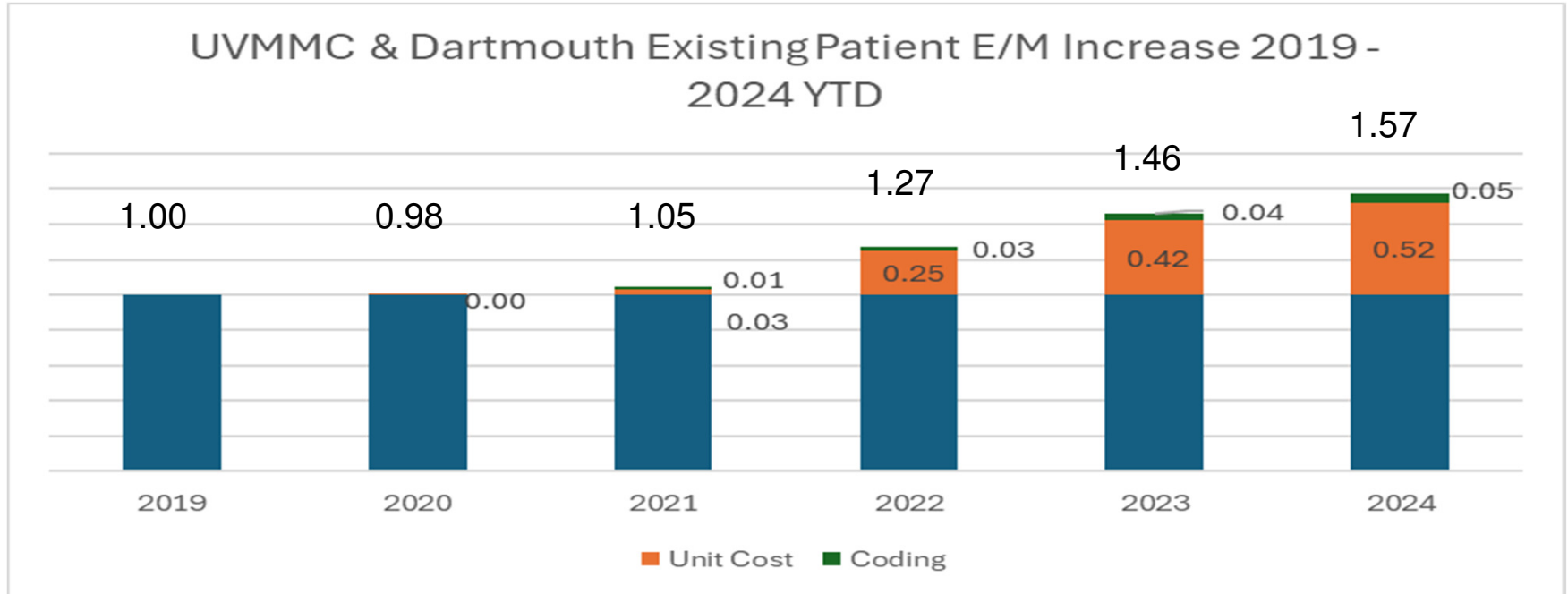
EVALUATION AND MANAGEMENT CODE PRICE INCREASES

- At these two academic medical centers the individual unit costs for these codes increased 28% to 48% from 2019 to 2023

	2019	2020	2021	Allowed/Visit 2022	2023	2024	% Change
99211	0.26	0.24	0.26	0.30	0.33	0.33	28.2%
99212	0.49	0.49	0.51	0.63	0.72	0.76	54.0%
99213	0.79	0.80	0.82	0.99	1.13	1.20	51.2%
99214	1.17	1.17	1.21	1.44	1.63	1.74	48.4%
99215	1.66	1.65	1.71	2.06	2.34	2.46	48.1%
Weighted Average	**1.00**	**0.98**	**1.05**	**1.27**	**1.46**	**1.57**	**57.0%**

BCBSVT local UVMMC & Dartmouth claims incurred 1/1/2019 - 8/31/2024, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded

UNIT COST AND INTENSITY RESULTS IN HIGHER COSTS

- Since 2019 , unit costs have contributed to a 52% per visit increase (orange) and coding intensity has contributed to a 5% per visit increase (green)
- Combining the unit cost and impacts of switching to more intensive services results in a 57% increase in office visit cost

UVMMC & Dartmouth Existing Patient E/M Increase 2019 - 2024 YTD

Year	Total	Unit Cost	Coding
2019	1.00		
2020	0.98	0.00	
2021	1.05	0.03	0.01
2022	1.27	0.25	0.03
2023	1.46	0.42	0.04
2024	1.57	0.52	0.05

Legend: ■ Unit Cost ■ Coding

BCBSVT local UVMMC & Dartmouth claims incurred 1/1/2019 - 8/31/2024, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded, note 2024 is a partial year, established patient E/M 99211-99215

CARDIAC MONITORING

Ambulatory cardiac monitoring involves wearing a portable device to record the electrical activity of the heart and allows the provider to monitor cardiac symptoms

MB0

- Zio Patch – small adhesive wire-free ECG monitor for up to 14 days

- Holter Monitor – wearable device (necklace) with wires that records the heart's rhythm for 1-2 days
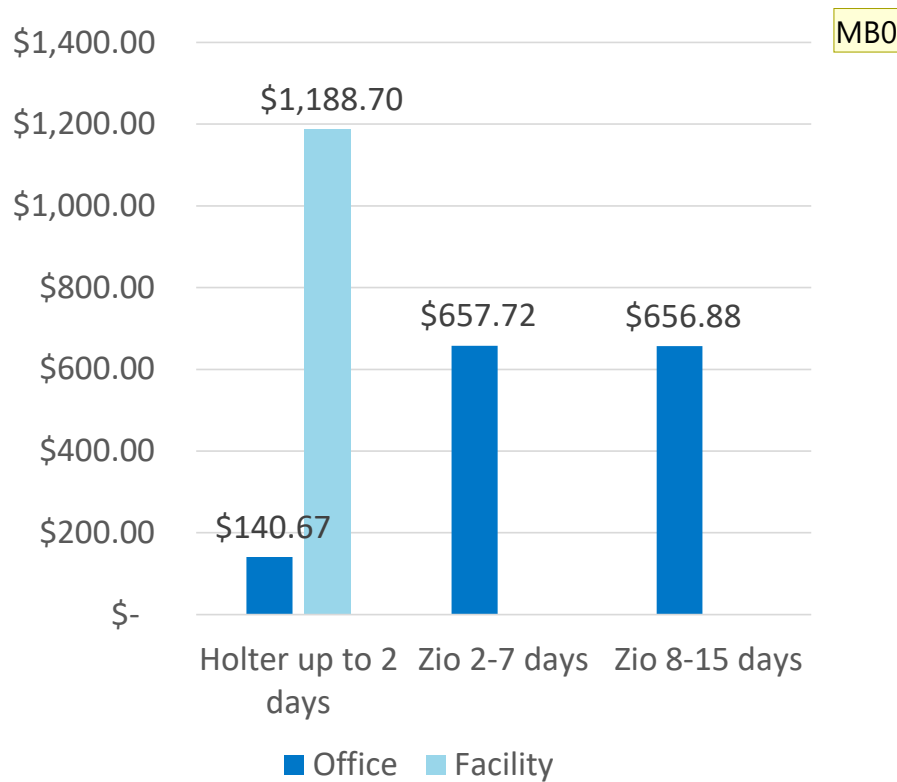
- In 2022 Blue Cross VT paid $1.2 million for 3,510 units
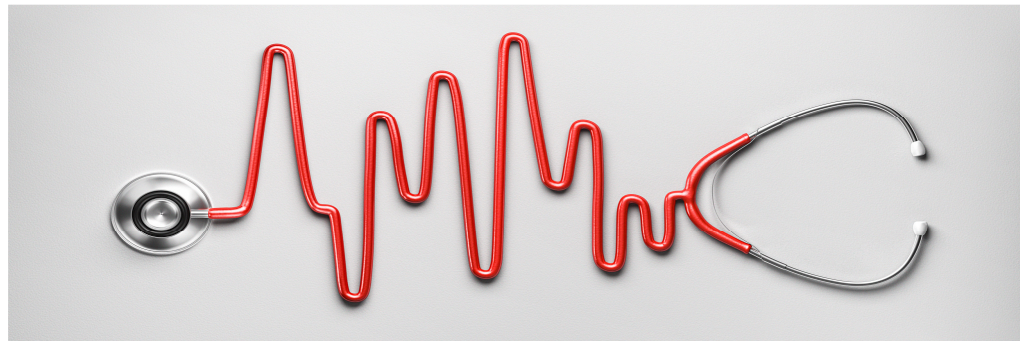
MB0   What happens to this data? Is this so that the provider knows? Just thinking we might want to add a "why" to this first sentence

Martine Brisson-Lemieux, 2025-03-19T13:24:02.044

CARDIAC MONITORING AVERAGE COST

- Incurred in 2022. A 14-day span from the triggering service date was used to identify related services.

- Codes 93226, 93225 or 93224 required for valid Holter Monitor

- Bundle and 93241, 93243, 93245 or 93247 required for a valid ambulatory cardiac bundle (Zio Patch)

BCBSVT claims incurred 1/1/2022 - 12/31/2022, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded

MB0   Can we round the numbers?

Martine Brisson-Lemieux, 2025-03-19T13:16:06.820

THE PLACE OF SERVICE, NOT THE DEVICE, IMPACTS COST

- We expected to see that the Zio Patch is a more expensive device than the Holter Monitor

- In the office setting, the Holter Monitor is less expensive than the Zio Patch

- **However, place of service** is a more significant driver of cost than the technology for cardiac monitoring

- **Cardiac monitoring services in office** rather than in a hospital setting reduces cost

- The **Zio Patch is less expensive than** the Holter Monitor in the facility because it is billed as office rather than facility.
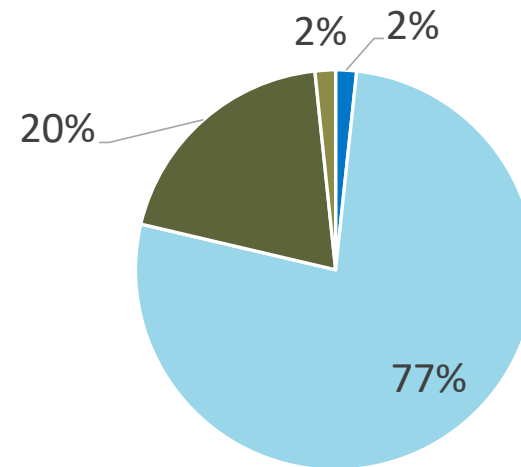
CARDIAC MONITORING

Percent of Services

- 1%
- 28%
- 11%
- 60%
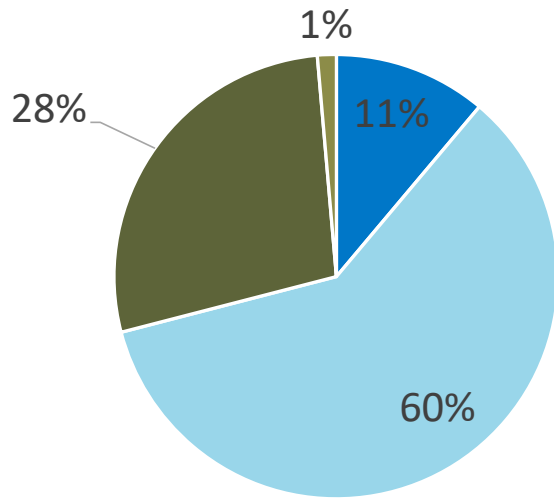
- ■ Holter in Office
- ■ Holter in Facility
- ■ Zio in Office
- ■ Zio in Facility

Percent of Cost

- 2%
- 2%
- 20%
- 77%

- ■ Holter in Office
- ■ Holter in Facility
- ■ Zio in Office
- ■ Zio in Facility

"Service" reflects relevant codes for one member in 14-day span

BCBSVT claims incurred 1/1/2022 - 12/31/2022, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded

RADIOLOGY

CPT	Description	Units		
		2022	2023	2024
71045	Radiologic Examination Chest; Single View	399	295	200
71046	Radiologic Examination Chest; 2 Views	1273	1708	1736
71047	Radiologic Examination Chest; 3 Views			

- CPT 71045-71047 are chest radiological exams that help providers diagnose pneumonia, cancers and other conditions
- Of these codes 71045 is the least expensive and 71047 is the most expensive
- Most current utilization is 71045 and 71046
- Between 2022 and 2023 we started to see a shift toward 71046
- We are continuing to monitor these services and is 71047 starts to emerge

BCBSVT, major VT hospital , claims incurred 1/1/2022 - 9/30/2024, excludes FEP, Medicare Advantage, Medicare Primary, Host, adjustments & denials excluded

MB0   We need text here to provide context

Martine Brisson-Lemieux, 2025-03-19T13:12:29.414

ET0 0   Yes! I will add some placeholder text here. It is currently for UVMMC but I want to expand to all hospitals if we have time

Ella Thodal, 2025-03-19T13:14:13.190