

## **Guide to Congestive Heart Failure**

Quick Reference Guide

This short guide will help you understand how to bill for congestive heart failure, one of the most common out-of-basket codes.

### Challenge

## **DoctorCare Best Practices and Recommendations**

What is the congestive heart failure incentive?

The Congestive Heart Failure (CHF) management incentive fee code Q050A is a \$125 annual payment available to physicians for coordinating, and documenting all required elements of care for enrolled heart failure patients.

Fee Code	Description	Fee value	Paid
Q050A	Congestive heart failure management	\$125	Once every 365 days

## What are the eligible models?

FHO, FHG, FHN, CCM

# What are the common error and explanation codes?

#### M1 – Max fee allowed for these services has been reached

• The Q050A code can be billed only once per year. If you bill more than one Q050A within 365 days of a previously processed Q050A, it will be processed at \$0.

#### A36 – Claimed by other practitioner

• If you bill more than one Q050A within 365 days of a previously processed Q050A by a different physician to the same patient, it will be processed at \$0.

# What are the billing requirements?

#### Billing Requirements

- Q050A may be submitted separately or in combination with other fee schedule codes for a rostered patient.
- Must be submitted after a minimum of two rostered patient visits with the 428 diagnosis code.
- Billing Q050A requires completion of a flow sheet to be maintained in the patients record. Download our congestive heart failure flow sheet <a href="here.">here.</a>

#### Recommendations

#### **Top 3 Recommendations**

- 1. Pick a date in the year when you update your patients heart failure flow sheet and bill Q050A.
- 2. Generate a list of heart failure patients to assist you when billing your Q050A.
- 3. Set up a reminder in your EMR for patients who are overdue for Q050A billing.