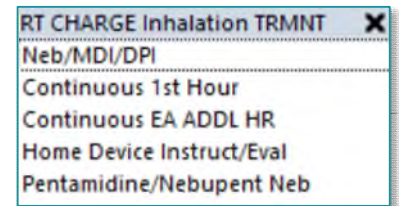


Documentation in Activity View which is linked to tasking in the Multipatient Task List (MPTL) and CareCompass has been updated to be more inclusive, allowing the Respiratory Therapist to complete documentation from the task. Several Yes responses in iView that would open a charge documentation have been removed, decreasing the clicks. Charge documentation has been updated to increase the standardization of charges between all the Member Organizations. As it is today, all the Respiratory Therapy charges are seen but this does not mean the charges are mapped on the backend to every Member Organization.

Changes to Charge Documentation

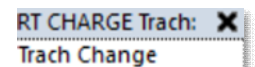
➤ RT CHARGE Inhalation TRMNT – NEW

- RT CHARGE Inhalation TRMNT replaces RT CHARGE MDI and RT CHARGE Neb.
 - Neb/MDI/DPI – use this charge when inhalation treatment is given with either of these methods.
 - They share the same charge code.
 - **Inhaler via vent** and **Inhaler via vent sub** should be charged using Neb/MDI/DPI.
 - **Continuous 1st Hour** – use this charge for the first hour of a continuous Neb.
 - **Continuous EA ADDL HR** – Medicare allows for up to four additional hours to be charged for a continuous Neb but the number of hours this is used should still be documented in the charge.
 - **Home device Instruct/Eval** – use this charge when evaluating or instructing a patient with a device that is or will be used at home.
 - **Pentamidine/Nebupent Neb** – use this charge when this medication is administered via a Nebulizer.



➤ RT CHARGE Trach - NEW Charge

- **Trach Change** – this charge has been added for EMMC.



➤ RT CHARGE Vital Capacity – NEW Charge

- Located in **Invasive Ventilation** under **Spontaneous Parameters**.
- Documentation of **Vital Capacity** will open this charge field.

Spontaneous Parameters	
Respiratory Rate	br/min
Minute Volume	L/min
Tidal Volume	mL
Vital Capacity	L2
RT CHARGE Vital Capacity	
Negative Inspiratory Pressure	cmH2O

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➤ RT CHARGE Delivery Attendance – NEW Charge

- Located in **Respiratory Therapy Time/Equipment**.
- **Attended** – Mercy has been added to this charge.
- This charge should be used if the Respiratory Therapist assists with a newborn resuscitation including CPR.

RT CHARGE Delivery Attendance	X
Attended	

➤ RT CHARGE Education 30 Min Mercy – Renamed & NEW CHARGE

- Mercy has been removed from the title to allow EMMC to use this charge.
- Located in the **Respiratory Education** section.

Respiratory Education	
RT CHARGE Education 30 Min	RT CHARGE Education 30 Min X
RT CHARGE Change Behavior Smoking	Yes

➤ RT CHARGE Oximetry – Updated and NEW Charge

- EMMC can charge for **Spot Check** and **Overnight** pulse oximetry reading.
- **Spot check** is used for when a pulse oximetry reading is obtained.
- **Overnight** is used for continuous pulse oximetry.
- **6-minute walk** has been removed from RT CHARGE Oximetry and should be charged under RT CHARGE 6 Minute Walk.

RT CHARGE Oximetry	X
<input type="checkbox"/> Spot check	
<input type="checkbox"/> Overnight	

➤ RT CHARGE Peakflow Meter – Updated

- **Yes** response has been removed as the Expiratory flow rate meter handheld cannot be separately reimbursed.
- **Eval of wheezing Mercy** renamed **Eval of wheezing** to allow EMMC to document this charge.
- Use this charge for the evaluation of bronchodilation responsiveness when spirometry is used pre and post bronchodilator.

RT CHARGE Peakflow Meter	X
<input type="checkbox"/> Eval of wheezing	

➤ RT CHARGE Sputum Collection – Renamed RT CHARGE Sputum Induction

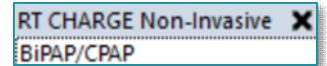
- **Induction (EMMC)** and **Collection (Mercy)** –have been replaced with **Yes** and **No**.
- EMMC will use **Yes** to charge for a sputum collection obtained through aerosol therapy.
- Respiratory Therapy can only charge for a sputum collection if it is induced.

RT CHARGE Sputum Induction	X
Yes	
No	

➤ RT CHARGE NIV EMMC – Replaced

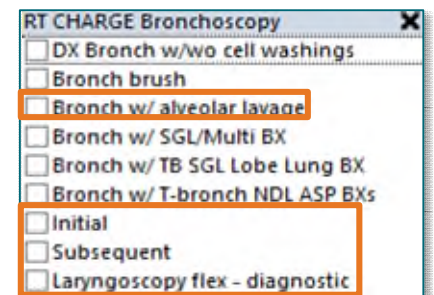
- RT CHARGE NIV EMMC has been replaced with **RT CHARGE Non-Invasive**.
 - **BiPAP** and **CPAP Initial** and **Subsequent** share the same charge code.
-

- Select **BiPAP/CPAP** when the patient has been placed on BiPAP or CPAP.
- Use BiPAP or CPAP for **Bubble Initial** and **Subsequent** as they share the same charge code.
- **Specialty NICU Pillows** and **Total Face Mask** have been removed as these are no longer chargeable items.



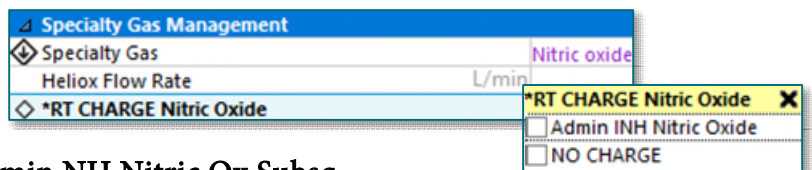
➤ **RT CHARGE Bronchoscopy – Updated**

- **Initial** and **Subsequent** are used by EMMC.
- EMMC can also use **Laryngoscopy flex – diagnostic** and **Bronch w/alveolar lavage**.
 - **Laryngoscopy flex- diagnostic** can be used for a diagnostic exam of voice box using a flexible endoscope.
- The following Bronchoscopy charges were **removed** due to non-use:
 - Bronch w/Bx
 - Bronch Diagnostic
 - Bronch/Needle aspiration
 - Bronch EBUS sampling ½ node
 - Bronch lung Bx each FAC
 - Bronch w trans needle ASP
 - Bronch w trans BX



➤ **RT CHARGE Nitric Oxide – Updated**

- **Admin INH Nitric Oxide** replaces **Admin INH Nitric Oxide 1 hour**.
- **Admin INH Nitric Ox Initial Day**, **Admin NH Nitric Ox Subsq Day**, and **Nitric Ox Resp standby stat** have been removed.
 - The charge code for Nitric Oxide is not for a specific time frame.
 - Use this charge for **any patient** receiving **Nitric Oxide** regardless of location.
 - **Nitric Oxide** can be charged once per day (24 hours).



➤ **RT CHARGE Ventilators EMMC – Updated**

- Renamed **RT CHARGE Ventilator** to allow all Member Organizations to use this charge field.

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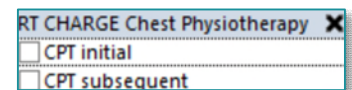
- **Initial** – use this when setting up the ventilator.
- **Subsequent** – use this each subsequent day the patient is on the ventilatory after the first day.

NOTE: Long Term Ventilator, Pediatric, Neonatal, Oscillating vent, and Long Term vent/day have been removed as they all have the same charge code as Initial and Subsequent.

Vent Transport, Vent Circuit, and Vent Weaning have been removed because they were either statistical charges, had been inactivated, or there is no CPT code (charge code) for the activity.

➤ **RT CHARGE Chest Physiotherapy – Updated**

- CPT **Initial** is used for the first chest physiotherapy treatment.
- CPT **Subsequent** is used for additional chest physiotherapy treatments.
- **Mucous clearance device** has been removed (inactive).
- **Cough assist initial EMMC** and **Cough assist subsequent EMMC** have been removed as it is a non-chargeable item.

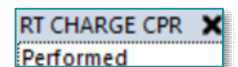


➤ **RT CHARGE Trach Supplies – Updated**

- The following options have been **removed** as they are inactivated charges or items that are no longer charged:
 - Trach Shiley w/cannula (BHH)
 - Ambu bag (inactive)
 - Tracheostomy plug (non-chargeable item)
 - Specialty trach tube (non-chargeable item)
- **Passy Muir Valve** – EMMC can use this charge.

➤ **RT CHARGE CPR – Updated**

- **Performed** is selected if the Respiratory Therapy participates in CPR.



➤ **RT CHARGE Oxymizer – Removed**

- **RT CHARGE Oxymizer** was removed as this is no longer chargeable.

➤ **RT CHARGE MDI and RT CHARGE Neb – Removed**

- The charges located under **RT CHARGE MDI** and **RT CHARGE Neb** either shared a charge code, did not have a charge code associated with them, or were nonchargeable items.
 - **RT CHARGE Inhalation TRMNT** replaces both these charges.
-

➤ **RT CHARGE Assessment – Removed**

- This charge has been **removed** from the **Respiratory Description/Assessment** section as it was linked to a charge for evaluation of patient use of an inhaler, and this is charged elsewhere.
- A charge code is not available for a Respiratory Assessment.

➤ **RT CHARGE Incentive Spirometry – Removed**

- This charge has been removed as it is no longer a chargeable item.

➤ **RT Statistical Charges**

- These documentation fields have been removed as there is no longer a report available to track these nonmonetary statistical charges.
 - **ABG puncture** and **POC ABG analysis** should be documented in the **ABG Draw** form in Adhoc.
- The following items should be documented in the **Respiratory Therapy iView band**:
 - **BiPAP** and **CPAP** should be documented in the **Non-Invasive Ventilation** section.
 - **Vent Management** should be documented in the **Invasive Ventilation** section.
 - **Extubation** should be documented in the **Endotracheal Tube** dynamic group located in the **Airway Management** section.
 - Inactivate the dynamic group after documenting.
 - Nitric Oxide should be documented in Specialty Gas Management section.
 - **Oxygen Titration** should be documented in the **O2 Therapy/Titration** section.
 - **Ped aerosol therapy** should be documented in the **Inhaled Medication Therapy** section.
 - **Patient Assessment** should be documented in the **Respiratory Assessment** section.
 - **Respiratory Therapy transport** should be documented in the **Respiratory Therapy Time/Equipment** section.
 - **Sputum Collection** should be documented in the **Cough/Suction** section.

RT/Pulmonary Charges

- The **RT/Pulmonary Charges** form has had charges removed that are no longer chargeable items, have been inactivated due to non-use, or are being charged in a different location.
- **RT CHARGE Oximetry** should be charged in the **Respiratory Therapy iView band** in the **O2 Therapy/Titration** section.

➤ **NEW CHARGE – RT CHARGE Bronchospasm Provocation**

Bronchospasm
Provocation

Activity View Updates

- Documenting a task from Respiratory Therapy **Multipatient Task List (MPTL)** or **CareCompass** opens **Activity View**.
- The documentation available in Activity View has been carefully reviewed by RT Managers/Directors and updated to include what should be all the information needed to complete the documentation for the task without the need to also go to the Respiratory Therapy iView band to complete it.
- The section order of the documentation has been updated to match the Respiratory Therapy band in iView.
- Some documentation field names in iView have been updated to match what is in Activity View.