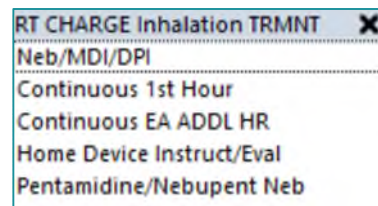**Documentation in Activity View which is linked to tasking in the Multipatient Task List (MPTL) and CareCompass has been updated to be more inclusive, allowing the Respiratory Therapist to complete documentation from the task. Several Yes responses in iView that would open a charge documentation have 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.**

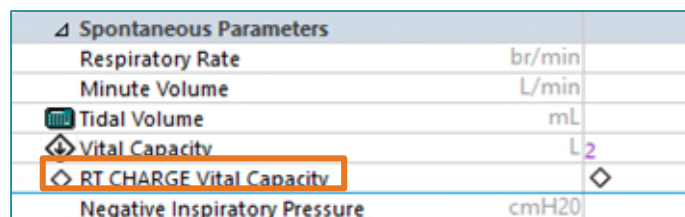## Changes to Charge Documentation

➢ 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.
  - **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** – this charge is not used by Inland.
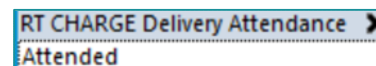
➢ RT CHARGE Breathing Exercise – NEW Charge

- Located in **Invasive Ventilation** under **Spontaneous Parameters**.

- Documentation of **Vital Capacity** will open this charge field.

➢ 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 Intubation or Assist – NEW Charge**

- Inland has been added to this charge.

- **RT CHARGE Intubation or Assist** is Endotracheal Tube dynamic group in Airway Management.

- This charge should be used if intubating or assisting with an intubation.

NOTE: **If the Emergency Department is charging for intubation, RT cannot charge for it.**

➢ **RT CHARGE Sputum Collection – Renamed & NEW Charge**

- **Induction (EMMC)** and **Collection (Mercy)** – these options have been replaced with **Yes** and **No.**

- Inland 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 NIV Inland – Replaced**

- **RT CHARGE NIV AR Gould** 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.

➢ **RT CHARGE Peakflow Meter – Updated and NEW Charge**

- **Yes** response has been removed as the Expiratory flow rate meter handheld cannot be separately reimbursed.

- Use this charge for the evaluation of bronchodilation responsiveness when spirometry is used pre and post bronchodilator.

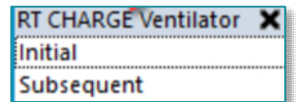➢ **RT CHARGE Chest Physiotherapy – Updated**

- **CPT Initial** is used for the first chest physiotherapy treatment.

- **CPT Subsequent** is used for additional chest physiotherapy treatments.

- **Mucous clearance device instruct** has been removed.
  - **CPT Initial** should be used for mucous clearance device charges as they are a shared charge code.

➢ **RT CHARGE Ventilator Initiate – Updated**

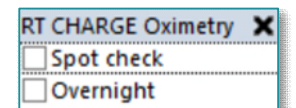- **Ventilator Charge** has been removed making this charge field in view.

- Renamed **RT CHARGE Ventilator**.

  - **Initial** – use this when setting up the ventilator.

  - **Subsequent** – use this each subsequent day the patient is on the ventilatory after the first day.
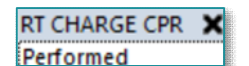
> **RT CHARGE Oximetry – Updated**

- **Spot check** is used for when a pulse oximetry reading is obtained.

- **Overnight** is used for continuous pulse oximetry.

> **RT CHARGE CPR – Updated**

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

- **Newborn Inland** has been removed as this is the same charge code as **Performed**.
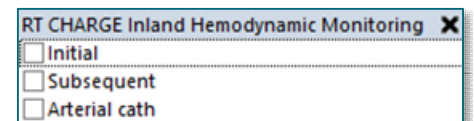
> **RT CHARGE Assessment – Removed**

- 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.

- **Eval of wheezing Mercy** renamed **Eval of wheezing** to allow Inland to document this charge.

> **RT CHARGE Inland Hemodynamic Monitoring – Removed**

- These charges have been removed as Inland Respiratory Therapists are not performing these.

> **RT CHARGE TRACH – Removed**

- This charge has been removed as Inland Respiratory Therapists do not change tracheostomies.

> **RT CHARGE Oxygen Therapy – Removed**

- Oxygen is no longer a chargeable item.

> **RT CHARGE Oxymizer – Removed**

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

> **RT CHARGE Compressed Air Inland – Removed**

- **RT CHARGE Compressed Air Inland** was removed as this is no longer a chargeable item.

- **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 Statistical Charges – Removed**

  - These documentation fields have been removed as there is no longer a report available to track these nonmonetary statistical charges. There is charge documentation available for some as indicated below.

  - **Complete PFT** could be documented in the **Pulmonary Function Note** form located in Adhoc.

  - Document **Internal Resp Transport 15 MIN** and **External Resp Transport 1 HR** in **Transportation Support Method** and **Patient Transport Units** located in the **Respiratory Therapy Time/Equipment** section.

  - Document **End Tidal CO2** in **Invasive Ventilation Measurement/Assessment** section in **Vent EndTCO2**.

  - **RT CHARGE Intubation or Assist** should be used for **Intubation or Asst No Charge** so charge capture can occur.

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.

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.