

Internal Medicine Coding Alert

Clip-and-Save Checklist: 9 Tips for Recouping Your Substitute Physician Pay

Avoid unnecessary stress this holiday season if you report reciprocal billing arrangements or locum tenens services for your internist. Keep this clip-and-save checklist handy as a quick reference tool for appending modifiers -Q5 and -Q6.

- 1.** Remember that reciprocal billing allows a physician to submit claims and receive Medicare payments when he has arranged for a substitute physician to provide services on an occasional, reciprocal basis.
- 2.** To appropriately report services performed under a reciprocal billing agreement, use modifier -Q5 (Service furnished by a substitute physician under a reciprocal billing arrangement).
- 3.** Locum tenens also allows the internist to receive payment for services another physician performs. But a locum tenens physician cannot work for another practice, and your physician cannot restrict the locum's services to your office.
- 4.** The regular physician pays a locum on a per-diem or fee-for-time basis.
- 5.** When reporting locum tenens physician services, attach modifier -Q6 (Service furnished by a locum tenens physician) to the appropriate code.
- 6.** Medicare will not pay for reciprocal billing or locum tenens services for more than 60 continuous days.
- 7.** To use both -Q5 and -Q6, your internist must be unavailable to provide services. This means that your physician should be out of the office while the substitute physician provides services.
- 8.** The Medicare patient must have arranged to receive your physician's services.
- 9.** You cannot report either -Q5 or -Q6 if your internist bills for services under a practice group number. But you may use the modifiers if your internist works for a group practice but bills as an independent physician.