

Optometry Coding & Billing Alert

Avoid Double Trouble by Squelching Duplicate Billing

Repeatedly billing until you're paid may work for private payers, but CMS could brand you a troublemaker

If an insurance carrier hasn't paid your claim within 30 days, you may be accustomed to submitting more bills until you get paid. If you try that with Medicare, however, you could be rewarded with anything from a denied claim to a fraud investigation.

A Medlearn Matters article clarifies Medicare's stance on the matter. -If you submit more than one claim for the same item or service, you can expect your duplicate claims to be denied,- says the April 2005 article, titled -Reminder to Stop Duplicate Billings.- In addition, duplicate claims:

- may delay payment;
- could cause Medicare to identify you as an abusive biller; and
- may generate an investigation for fraud, if CMS identifies a pattern of duplicate billing.

-Unlike other health insurance payers where it is customary to bill until paid, multiple or repetitive billing to Medicare for a particular item or service is improper,- the article says.

Medicare identifies a -duplicate claim- as -a claim submitted to one or more Medicare contractors from the same provider for the:

- same beneficiary; for the
- same item or service; for the
- same date of service.-

What to do: Make sure your billing complies with Medicare claims filing rules. If you have not received payment after 30 days and are concerned about your payment, -contact your carrier or DMERC [durable medical equipment regional carrier] via the toll-free lines they have to check on claims status,- or check your claims status online, the article says.

You can find a list of Medicare carrier toll-free numbers at www.cms.hhs.gov/medlearn/tollnums.asp.

Read the Medlearn Matters article at www.cms.hhs.gov/medlearn/matters/mmarticles/2004/SE0415.pdf.