

## **Optometry Coding & Billing Alert**

## **Corneal Pachymetry Payments Stay Solid**

## Calculate Fees Differently in 2009

Here's how the BNA adjustment and the new conver-sion factor will change your reimbursement in 2009:

2008 way: In 2008, Medicare payers multiplied a procedure's work RVUs by the BNA, 0.8806, and rounded the result to two decimal places. They would then multiply that amount by a geographic practice cost index (GPCI). The payers would then multiply both the practice expense (PE) RVUs and the malpractice RVUs by the GCPI, and add all three adjusted RVU amounts together. Multiplying that by the 2008 conversion factor showed the payment for that service.

**Example:** Here's how Medicare computed the fee for 76511 in 2008 (assuming a GPCI of "1"):

0.94 work RVUs x 0.8806 BNA (rounded) = 0.83

 $0.83 \times 1 \text{ GPCI} = 0.83$ 

 $1.89 \text{ PE RVUs } \times 1 \text{ GPCI} = 1.89$ 

0.1 malpractice RVUs x 1 GPCI = 0.1

0.83 + 1.89 + 0.1 = 2.82

 $2.82 \times 38.0870 = $107.41.$ 

2009 way: In 2009, Medicare payers will no longer apply the BNA adjustment to only the work RVUs. CMS is applying the BNA directly to the conversion factor, which is one reason it's down to 36.0666. Payers will simply adjust the work, PE, and malpractice RVUs for GPCI, add the results together, and multiply that sum by the conversion factor to arrive at the payment for a procedure.

**Example:** Again, assuming a GPCI of "1," here's the fee for 76511 in 2009:

0.94 work RVUs x 1 GPCI = 0.94

 $1.63 \text{ PE RVUs } \times 1 \text{ GPCI} = 1.63$ 

0.1 malpractice RVUs x 1 GPCI = 0.1

0.94 + 1.63 + 0.1 = 2.67

 $6.00 \times 36.0666 = $96.30.$