

Part B Insider (Multispecialty) Coding Alert

CMS Should Make Physicians Attend To DME Claims, OIG Says

The **Centers for Medicare & Medicaid Services** should do more to help physicians help their patients avoid unnecessary medical equipment and suppliers.

That's just one of the recommendations in the 2005 Orange Book, a list of the **HHS Office of Inspector General's** recommendations that CMS hasn't yet implemented.

Medicare spent \$414 million on inappropriate medical equipment, according to an OIG survey. Separately, the OIG said CMS needs to make sure physician identifier numbers are correct on DME claims.

CMS also should crack down on unnecessary hyperbaric oxygen therapy (HBO2), in the wake of findings that Medicare paid \$19.1 million to physicians and outpatient hospitals for unnecessary or excessive treatments. Another \$11.1 million went for treatments with "questioned quality." CMS said it's working with its contractors to deny non-covered HBO2 services, and has tightened criteria in the outpatient prospective payment system for covering HBO2.

In addition, the OIG said Medicare is inappropriately paying around \$200 million for mental health services with poor documentation or lack of medical necessity, and CMS said it's working to educate providers.