Part B Insider (Multispecialty) Coding Alert

Consolidated Billing: Don't Bill Your Carrier For Services You Know Are Bundled

You don't have to obtain a denial from Medicare Part B for a service that you know is included in the consolidated billing program for skilled nursing facilities, the **Centers for Medicare & Medicaid Services** recently clarified.

CMS has already released instructions, clearly stating that the technical component of physician components are the SNF's responsibility, so there's no need to bill your carrier and receive a denial before billing the SNF, officials said at the Aug. 30 **Practicing Physicians Advisory Committee** meeting.

In response to physician complaints that the SNF prospective payment system doesn't include enough reimbursement for physicians' technical services, CMS officials said CMS continues to conduct research on ensuring "adequate payment for non-therapy ancillary services." But this research doesn't specifically focus on payments for physician services or incident-to services, which are legislatively mandated and would require Congressional action to change.

Educating SNFs May Be The Key

CMS is attempting to educate skilled nursing facilities on their responsibilities to pay for physicians' professional expenses under the consolidated billing system. CMS has developed 10 educational articles on consolidated billing to be posted on the Medlearn Matters site as well as a separate consolidated billing site.

Separately, CMS is preparing a form, similar to the Advance Beneficiary Notice, which would notify physicians that the SNF may be responsible for services associated with a consultation "unless specifically prohibited in advance of referral." These "program sample notices" are undergoing internal review, and should be posted on the CMS Web site within a month, and SNFs will be able to use them to notify physicians about consolidated billing.

Separately, doctors asked that hospitals that accept payment for physician reimbursement as well as hospital costs should be required to pay the doctors within a set period. CMS officials said they don't have the authority to make that change, but they do encourage hospitals to pay in a timely fashion.