

Part B Insider (Multispecialty) Coding Alert

CONSULTS: CMS May Soon Untangle Consult Confusion

It's not a consult if the requesting physician 'doesn't give a rip'

Good news: Your cries for clarification of what constitutes a consult may have been answered.

Some physicians have worried that nothing would count as a consult any longer, ever since the **Centers for Medicare & Medicaid Services** issued Transmittal 788 last December. The transmittal clarified various consult questions, but also included a new definition of -transfer of care- that would make it much harder to bill for a consult.

The new definition reads: -A transfer of care occurs when a physician or qualified NPP requests that another physician or qualified NPP take over the responsibility for managing the patients- complete care for the condition and does not expect to continue treating or caring for the patient for that condition.-

Example: Doctor A sends a patient to Doctor B for a consult on the patient's heart condition. Doctor B reports back to Doctor A, but also takes over treatment of the patient's heart problems. According to the new definition, this might be a lower-paying transfer of care, not a consult.

-We're aware of the problems that some are having with the transmittal,- says **William Rogers**, head of the **Physician Regulatory Issues Team** within CMS. The PRIT, along with the **Infectious Disease Society of America**, the **American College of Physicians**, the **American Medical Association** and several specialty societies, has been working to hone the transfer definition language.

The examples of consults in the transmittals -all very much reflect what all of us have conceptualized as being a consult,- Rogers notes.

At first glance, Transmittal 788 did appear to be -getting rid of consults,- says attorney **David Glaser** with **Fredrickson & Byron** in Minneapolis, MN. -But based on the examples, nothing had changed.-

Glaser hopes CMS goes back to the old definition of transfer of care: It's a transfer if the referring physician isn't going to be involved in any way with the patient's treatment afterward. -If the person who's requesting the opinion doesn't give a rip- about the patient's ongoing care, then it's a transfer of care, clarifies Glaser. In that situation, the requesting physician is -washing his hands- of the patient.

Note: Transmittal 788 did clarify one tricky issue, according to Glaser.

Suppose a patient goes to an Emergency Department physician for ankle strain and is told to visit an orthopedist later in the week. Is the patient's visit to the orthopedist a consult? CMS says no because the ED physician doesn't care what the orthopedist says about the patient's problem.