

Part B Insider (Multispecialty) Coding Alert

INDUSTRY NOTES: Earn CMEs for Quality Improvement

Physicians have one more incentive to get involved with the **Centers for Medicare & Medicaid Services'** healthcare quality improvement initiatives.

CMS on April 2 announced that doctors can earn continuing medical education credits for participating in QI projects with Medicare quality improvement organizations. "This initiative is an important step to help ensure the quality of healthcare for millions of Americans," says CMS chief **Tom Scully**. "The program provides an opportunity for physicians to build their quality improvement capacity while earning CME credit for their efforts to improve care."

Under the program, physicians can earn up to 10 CME credits per year in each of three clinical areas: diabetes, influenza/pneumococcal immunizations, and breast cancer screening. New clinical areas may be added in the future.

Physicians can enroll in the program with their local QIO. Participating doctors will have to modify their office practice to improve clinical performance on designated quality indicators.

1. **A long-running probe of a Missouri medical practice** ended with a whimper March 28, with the practice's ex-vice president pleading guilty to a misdemeanor charge of misappropriating money from Medicare. Meanwhile, fraud charges that had been brought against two of the practice's physicians and one physician assistant were dropped altogether.

According to U.S. Attorney **Todd Graves**, former **MedClinic** VP and administrator **Mark Tighe** admitted to mishandling Medicare billings in connection with lab visits and adding dictations to medical charts in response to additional development requests. Tighe acknowledged that that resulted in the clinic getting paid between \$5,000 and \$10,000 it didn't deserve.

Charges against MedClinic's Dr. **Raghavendra Adiga**, Dr. **Juanito Villahermosa** and **Joseph Nadeau** were dropped, although the three will have to report the facts giving rise to the prosecution to state licensing authorities.

While the individuals charged in the case got off without steep penalties, the probe was quite costly for the practice: MedClinic last year paid nearly \$450,000 in a civil settlement connected with the investigation.

2. **CMS revised the Medicare Carriers Manual to specify** that Medicare will cover ambulatory blood pressure monitoring as long as a physician is required to perform the interpretation of the data. There are no requirements as to the setting in which the interpretation is performed, CMS clarified in its national coverage decision, published in Transmittal 168 on March 28.
3. **The full House Ways & Means Committee has passed legislation** calling for Medicare regulatory and appeals reform. The bill, passed by the House Commerce & Energy Committee on March 26, has enjoyed widespread bipartisan support. But only Republicans supported the bill in Ways and Means, which voted along party lines April 2 to pass the bill, which includes a host of regulatory changes from shortening appeal response times to moving administrative law judges from the **Social Security Administration** to the **Department of Health and Human Services**.