

Part B Insider (Multispecialty) Coding Alert

Looking Ahead: What You Can Expect in 2013

Rumors of ICD-10's death have been greatly exaggerated.

It isn't even 2012 yet, but the CPT® Editorial Committee is already looking ahead to 2013. The group is examining which codes to revise, delete, and introduce in the future, and we've got a taste of what 2013 could hold for you from both a CPT® and an ICD-10 standpoint.

The CPT® Editorial Committee will continue to monitor which code sections require revisions, but intends to offer special focus to psychiatry services, molecular pathology, and moderate sedation in 2013, said **Peter A. Hollmann, MD**, chair of the CPT® Editorial Panel, during the CPT® 2012 Annual Symposium in Chicago on Nov. 16.

CMS reps shed some light on potential payment opportunities for molecular pathology services during the meeting, when the agency's **Marc Hartstein** said that Medicare's contractors are currently pricing over 100 codes describing molecular pathology services, which are genetic tests. Although CMS decided not to price new molecular pathology codes under the current Clinical Laboratory Fee Schedule or the Physician Fee Schedule, the agency does intend to establish payment for them in 2013, Hartstein said.

ICD-10: As all coders should be aware, Oct. 1, 2013 will mark the beginning of CMS's requirement that all practices switch to the ICD-10 system. However, the AMA has taken a stand against the new diagnosis coding system, Hollmann noted. "There's a lot of anxiety and a lot of stress" about ICD-10, he said, which led the AMA's House of Delegates to formally request a repeal to ICD-10 during the group's Nov. 15 meeting.

Keep in mind: This does not mean that ICD-10 won't go into effect, but it does mean that the AMA is trying to find a workaround to avoid the resources that each practice will have to put into the ICD-10 migration. A formal ICD-10 repeal could only take place following governmental intervention.

CMS's response: During a Nov. 17 "ICD-10 Implementation" call, CMS's **Denise Buening** responded to a question about whether ICD-10 will actually be delayed or eliminated. "There is no truth to the rumor, there is no pushback--the date for ICD-10 remains Oct. 1, 2013," she said.

Beyond 2013: CMS reps also illuminated one major change that could be coming up the pike for practices in the future. In 2015, CMS will begin to phase in the use of a value-based modifier that gives a "differential payment to a physician or group of physicians based on the quality of care compared to cost," said CMS's **Kenneth Simon, MD**, during the meeting. In other words, physicians whose patients have better outcomes will get paid more. The initial payments, which will be issued under the 2015 fee schedule, will be based on performance in 2013.