

## Part B Insider (Multispecialty) Coding Alert

### MEDICARE ADVANTAGE : CMS Overhauls Medicare Advantage Program

#### Oversight of MA could tighten significantly.

CMS is buckling down on the Medicare Advantage program -- and it could end up meaning more scrutiny when you bill these plans.

CMS announced on March 30 that it will make significant changes to Medicare Advantage (MA). For instance, CMS will require MA organizations to ensure that all of the plans they offer in 2010 are significantly different from one another so beneficiaries can make better enrollment decisions. With fewer MA plan options on the market, CMS will be able to eliminate the low-volume plans that crowd the market, according to a March 30 CMS press release on the topic. CMS notes that 27 percent of total MA plans that have fewer than 10 enrollees.

Having more transparent information available to help people with Medicare make confident choices in their health and drug coverage is important to President Obama and CMS, said **Jonathan Blum**, acting director of CMS's Center for Drug and Health Plan Choice. By strengthening our oversight efforts, we are protecting beneficiaries and taxpayers by ensuring that the data provided by plan sponsors is reliable and correct.

**Plus:** CMS also intends to review MA cost-sharing to ensure that sicker patients will not face inflated out-of-pocket charges for services such as renal dialysis, Part B drugs, or skilled nursing, according to the March 30 press release.

**Keep in mind:** CMS intends to tighten its oversight of MA by stepping up audits of these services, CMS said.

Auditors are going to be watching the MA programs more closely, so perhaps complaints (especially when documentation shows that the beneficiary was harmed or lied to) may get further, says **Barbara J. Cobuzzi, MBA, CPC, CPC-H, CPCP, CENTC, CHCC**, senior coder and auditor for The Coding Network, and president of CRN Healthcare Solutions.

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