

Part B Insider (Multispecialty) Coding Alert

MEDICARE ERRORS: Occupational Therapists, Neurosurgeons Need to Tighten Coding

Anesthesiologists, interventional radiologists, and ASCs come out looking good in latest CERT report.

CMS outlined the results of its latest comprehensive error rate testing (CERT) report, and the outcome could affect your bottom line down the road.

In the report, which discusses Medicare coding errors that occurred between Sept. 2006 and Sept. 2007, CMS indicates that it intends to use the CERT results to focus future claim reviews on this reports errors.

CMS will use the error rate findings described in this report to determine underlying reasons for claim errors and to adjust its action plans to improve compliance in payment, documentation, and provider billing practices, the CERT report notes. The tracking and reporting of error rates also helps CMS identify emerging trends and implement corrective actions designed to accurately manage all Medicare FFS contractors performance.

To get a glimpse into what CMS sees as potential areas for review, check out these highlights from the recent CERT report:

" **OT:** Private practice occupational therapists have the highest error rates of the specialties at 21.2 percent.

" **Infectious disease:** Infectious disease specialists come in second in errors with a 16.4 percent error rate, and neurosurgery isnt far behind with 15.3 percent error rate.

" **IR, ASC:** Despite the fact that CMS found over \$3 billion paid improperly among the specialties, the agency found startlingly low error rates in the specialties of interventional radiology and ASCs.

" **Anesthesia:** CMS found that certified registered nurse anesthetists (CRNAs) logged just a 0.3 percent error rate, and anesthesiologists had only a 1.1 percent error rate.

" **Radiology:** CMS revealed this example of a payment recoupment in the CERT report: A carrier paid \$744.57 for a myocardial perfusion imaging (SPECT) scan. Multiple attempts were made to obtain the documentation. Documentation received consisted of an EKG and a cardiolyte stress test only. As a result, the CERT Contractor counted the claim line in error and recouped the entire amount. **Outcome:** The practice may have performed the SPECT scan -- but without documentation to prove it, they were out \$744.57.

" **E/M:** CMS warns that the OIG and CMS have noted problems with certain procedure codes for the past several years. These problematic codes include CPT codes 99214, 99232, and 99233.

To read the complete CERT results, visit the CMS Web site at www.cms.hhs.gov/apps/er_report/preview_er_report.asp?from=public&which=long&reportID=9&tab=4.