

Part B Insider (Multispecialty) Coding Alert

Medicare payment: CMS Reps Outline Impact of PPACA on 2011 Fee Schedule

Plus: Medicare enrollment Web site adds additional resource files.

The ink is barely dry on the proposed 2011 Fee Schedule, but most practices are already eager to hear details of how the document will help their bottom lines.

CMS published the proposed [fee schedule](#) for next year in the July 13 Federal Register, and comments on the document are due on August 24 (see Part B Insider, Vol. 11, No. 24 for more information). The proposed rule offers many benefits to primary care practices, thanks to legislation passed in March as part of the Patient Protection and Affordable Care Act (PPACA).

For instance, the PPACA eliminates beneficiary cost-sharing for certain preventive services, such as the Welcome to Medicare exam and the new annual wellness exam, "as well as individual services that are currently covered by Medicare or any added in the future that have a rating of A or B in terms of evidence by the U.S. Preventive Services Task Force," said CMS's **Carol Bazell, MD** on a July 14 CMS open door forum. You can find a listing of these services, for which the deductible and coinsurance will be waived, in the 2011 proposed rule.

CMS Adds New PECOS Files

Practices looking for other practitioners' information using the online PECOS listing of ordering/referring physicians now have a new resource to check out, CMS reps noted. "CMS has just updated the ordering/referring files that are found on our Web site; the ordering and referring files show those individuals (physicians and non-physician practitioners) that have an enrollment record in our PECOS system," said CMS's **Jim Bossenmeyer** during the call. "In addition, we've added two new files recently that provide information regarding pending applications for physicians or non-physician practitioners."

You can find the reports at www.cms.gov/medicareprovidersupenroll, then click on the "Ordering Referring Report" on the left. The reports should be updated twice per week, Bossenmeyer noted.

Going forward, MACs will be sending letters to "physicians who participate in Medicare and are billing the Medicare program but have not updated their enrollment information in more than six years," Bossenmeyer said. Those physicians will be encouraged to update their information either via internetbased PECOS system.

CMS Seeking Outpatient Therapy Study Participants In an effort to develop alternatives to CMS's financial cap on outpatient therapy services, CMS is seeking Part B therapy providers, such as physical therapists, occupational therapists, and speech-language pathologists, to participate in a study collecting information for about six months, said CMS's **Ann Meadow** during the call. "Providers would simply fill out the assessment forms and mail them to the study center, there's no key data entry needed," Meadow said. "Some of the information will be filled out directly by the patient."

To see a prototype of the data collection form or to inquire about participating in the project, visit <http://optherapy.rti.org>.