

## Part B Insider (Multispecialty) Coding Alert

### Oncology: Medicare Asks Cancer Patients To Hand Over Info - And \$26

#### Some fear patients will rebel against copayment

Physicians will have a hard time convincing patients to pay a \$26 copayment for the \$130 Medicare will pay physicians to take part in its new oncology demonstration project, providers said in a Nov. 15 conference call.

Because the demonstration project merely revolves around collecting information on nausea, fatigue and pain, it's hard to explain to patients why they should pay to provide information to Medicare, providers complained to the **Centers for Medicare & Medicaid Services**. CMS officials claimed this is a value-added service just like any other that Medicare pays for, but also alluded to the fact that the payment is intended to compensate for steep drug cuts.

But many patients may refuse to pay the \$26 for the service, which adds nothing to their well-being, providers said. Copayments should be for services that actually improve the patient's health outcomes, they contended. CMS officials responded that they may provide more educational materials to explain to physicians and patients why the demonstration is valuable.

Another provider asked whether physicians were obliged to tell patients that the physicians were participating in a strictly optional demonstration project. CMS providers said they would have an answer to this question later. Asked whether CMS might allow patients to waive the \$26 copayment, CMS officials just said they were considering all options. Physicians should point out that copayments for the drugs themselves have dropped sharply, says **Deborah Kamin**, director of cancer policy with the **American Society for Clinical Oncology**.

During the call, CMS officials also clarified that:

you can only bill once per day per patient for the "G" codes in the oncology demonstration project. CMS said it would clarify in its forthcoming billing guidelines for the project what, if any, charges you should list next to those "G" codes on your claims. Most billing systems won't allow people to submit codes with no payment amounts, noted **Connie Stevens** with **Wenatchee Valley Med Center** in Wenatchee Valley, WA.

Also, the billing guidance will explain whether the demonstration project includes drugs such as Vidaza, which are infused via subcutaneous injection. The final rule only referred to other methods of drug delivery, noted **Michelle Flowers**, reimbursement chair with **Oncology Managers of Florida** in Gainesville.

"We do not underestimate the magnitude of this change to the coding system," CMS officials said of the rash of new chemotherapy-related "G" codes. "We're taking some very significant volume codes and replacing them."