Part B Insider (Multispecialty) Coding Alert

PART B PAYMENT: CMS Will Offer Modifier to Denote Admitting Physician on Claims

With the changes to consult coding, it will be more important than ever to report hospital visits properly.

Practices across the country are abuzz with the news that Medicare will stop covering consultations effective Jan. 1 -- but there are a few things every coder should know before that deadline hits.

Important: Although Medicare will no longer pay for consults (99241-99255), not all payers will necessarily follow suit.

"The consult codes have not been removed from CPT -- the AMA still printed them in the 2010 manual," notes **Barbara J. Cobuzzi, MBA, CPC, CENTC, CPC-H, CPC-P, CPC-I, CHCC,** president of CRN Healthcare Solutions. "At this point, we don't know what other payers are going to do."

Inpatient change: In the past, only the admitting physician reported initial hospital care codes (99221- 99223), and specialists who saw the patient separately often billed inpatient consult codes. With the no-pay policy on consult codes, CMS is poised to allow specialists to bill initial hospital care for their first visit with a patient.

Modifier addition: Because multiple physicians may end up billing the initial hospital care codes during a patient's visit, CMS will release a new modifier in 2010 that will signify which physician admits a patient to the hospital, says **Melissa Briggs, CPC,** with Stormont-Vail HealthCare in Topeka, Kan.

In black and white: "Because of an existing CPT coding rule and current Medicare payment policy regarding the admitting physician, we will create a modifier to identify the admitting physician of record for hospital inpatient and nursing facility admissions," the CMS Physician Fee Schedule Final Rule indicates.

"For operational purposes, this modifier will distinguish the admitting physician of record who oversees the patient's care from other physicians who may be furnishing specialty care."

Each physician will be able to bill from the 99221-99223 code range only once, after which they'll report subsequent hospital care codes (99231-99233). Keep an eye on the Insider, where we'll update you on the information about the new modifier as soon as CMS releases it.