

## Part B Insider (Multispecialty) Coding Alert

### **PART B PAYMENTS: Lock in New Ways to Improve Your Practice's Bottom Line**

Tap these resources to optimize payment during Medicare's period of indecision.

With Medicare payments precariously hanging on repeated 30-day extensions, most practices can't afford not to squeeze every penny out of their reimbursement. For most practices, now is the time to take a long hard look at whether you've overlooked a few common areas where you can optimize reimbursement.

Following are three methods you may not have considered that can help you improve your practice's income, submitted by **Creta Corrigan, CPC** of Gulfcoast Billing & Professional Services in Venice, Fla.

1. **Collect Deductibles at the Time of Service.** You should be able to verify the patient's deductible amount before the patient arrives for his visit. When you make the patient reminder call, tell him approximately how much he'll owe you when he arrives. That way you don't have to chase down the money later.
2. **Open Your Practice on Saturdays.** Keeping your practice open an extra day can mean more convenience for your patients, as well as 14 percent more overall income if you're open for six days a week rather than five.
3. **Charge No-Show Fees.** Medicare used to frown upon no-show billing. However, in Oct. 2007 CMS changed the policy and since then you've been able to charge Medicare patients if they miss an appointment -- with one major stipulation: Your no-show charge policy needs to apply to both your Medicare and non-Medicare patients. You cannot discriminate against Medicare patients by only charging them and not your other patients who miss appointments.

"Make sure you have a financial policy explaining the no-show fee," says **Barbara J. Cobuzzi, MBA, CPC, CPC-H, CPC-P, CENTC, CHCC**, president of CRN Healthcare Solutions. "The patient should sign it and receive a copy of it."

**Remember:** You need to bill the patient -- and not Medicare -- for the missed appointment fee.