

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: AMA Calls On Congress To Avert 5-Percent Cut Before It's Too Late

AMA has developed 151 quality measures for doctors

The **American Medical Association** (AMA) kept up its end of the bargain--and now it's time for Congress to hold up its end, the AMA says.

The AMA promised Congress it would develop 140 physician quality measures this year, working with its **Physician Consortium for Performance Improvement**. Instead, the AMA has come up with 151 quality measures. The Consortium includes more than 100 national and state specialty societies, as well as other organizations.

Working together has allowed the specialty societies to come up with measures that are valid across different specialties that treat the same diseases and avoids conflicting standards. The Consortium's measures focus on the high-cost diseases that account for 85 percent of Medicare spending, such as chronic artery disease or chronic obstructive pulmonary disease.

The AMA also approved the creation of Category II codes to track quality, and now updates them three times a year instead of twice a year.

After all this progress, Congress should reward physicians by doing away with the 5 percent cut that's scheduled to take effect in January, the AMA writes to Rep. **Charles Rangel** (D-NY), soon-to-be **Ways and Means Committee** chair, and other legislators. -The physician community has not shied away from developing new quality measures per our agreement with Congressional leaders, and we hope Congress does not miss the opportunity to address the cuts facing physicians and their patients,- writes AMA CEO **Michael Maves**.

In other news:

- The Recovery Audit Contractors (RACs) examining claims in New York, California and Florida recovered \$303.5 million in improper payments in their first year--including \$17.9 million from physicians, according to a status report from the **Centers for Medicare & Medicaid Services**. The RACs found \$10.5 million in underpayments, but these all came from hospitals, not physicians. Three quarters of overpayments (77 percent) came from hospitals.

- Medicare may grant you an extended repayment schedule (ERS) for overpayments if you qualify as suffering from -hardship,- meaning the overpayments account for 10 percent or more of your total Medicare payments. Also, if you qualify as suffering from -extreme hardship,- according to a complex formula, then you can have a longer-term ERS, lasting up to 60 months, according to a proposed rule in the Nov. 27 Federal Register (Vol. 71, No. 227, pp. 68519-68524).