

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Beware--Your Carrier Doesn't Provide Enough Information On Corrective Action Plans

More scrutiny of your carrier may lead to more pressure on you

Your carrier may be helping you to improve your billing and coding--but it's impossible to say for sure.

That's what the **HHS Office of the Inspector General** says in a new report about carriers' progressive corrective action plans. Your carrier has a system for tracking how well these corrective action plans are helping you, but it doesn't provide enough information, the OIG says.

The **Centers for Medicare & Medicaid Services** doesn't look at the outcomes of the carrier's corrective plans, the OIG complains. So the OIG couldn't figure out whether the corrective action strategies actually reduce your error rates and/or improve your behavior. (Read the report at www.oig.hhs.gov/oei/reports/oei-02-03-00300.pdf.)

In other news:

- You can soon quit worrying about providing too many smoking cessation counseling sessions to patients. CMS plans to help you avoid exceeding limitations on the number of services you provide, according to a Medlearn Matters article.

Starting April 1, 2006, you can access the Common Working File and view the number of counseling sessions a Medicare beneficiary has received. You need to enter the beneficiary's health insurance claim number (HICN) to access this file through the CWF, CMS says. This can help you determine whether your patient has coverage available for counseling sessions. (Read the article at www.cms.hhs.gov/medlearn/matters/mmarticles/2006/MM4104.pdf.)

- You have 30 days to comment if you think CMS should add code 790.4 (Nonspecific elevation of levels of transaminase or lactic acid dehydrogenase (LDH)) to the covered indication code list for the Hepatitis Panel/Acute Hepatitis Panel coverage decision.

• Your patients' social security numbers may no longer appear on Medicare cards and documents starting next year. Sen. **Rick Durbin** (D-IL) announced Oct. 25 that his amendment to require Medicare to replace SSNs as identifiers on documents received an "overwhelming 98-0 vote" in the Senate. The amendment comes in response to a boom in identity theft in recent years, with seniors as the prime targets for fraud. An SSN is an especially useful tool for identity thieves to open bank accounts and obtain credit cards, Durbin notes.

- You can't bill for chronic renal failure using ICD9 Codes 585 without a fourth digit, starting Oct. 1, according to Transmittal 725, dated Oct. 21. You should use 585.1 through 585.9 to specify the type of chronic kidney disease.