

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Brace Yourself For More Audits Of Debridement Services

60 percent of doctors could scale back on Medicare next year

Red alert: Nearly two-thirds of surgical debridement services didn't meet Medicare requirements in 2004. This cost the program approximately \$64 million in improper payments, according to a new report from the **HHS Office of Inspector General**.

Problems: Practices billed four out of 10 debridements using a code or modifier that didn't accurately reflect the service the physician provided, the OIG says. And 29 percent of services had either no documentation or not enough documentation to figure out whether the services were medically necessary or properly coded.

Also, only about half of the Part B carriers had performed any audits or reviews of debridement services, the OIG complained.

The good news: Higher-cost debridement services were more likely to follow Medicare rules than less-expensive ones, the OIG says. Also, only 1 percent of all surgical debridement services weren't medically necessary for sure.

The **Centers for Medicare & Medicaid Services** (CMS) should put out a national coverage determination (NCD) on debridement services, or else encourage the carriers to have more standard requirements, the OIG insists. Either way, Medicare should give you more guidance about what qualifies as surgical debridement, and how to code and document it.

The carriers should audit more debridement services, focusing on claims that show common coding errors or unusual billing patterns, the OIG adds.

In other news:

- You'll soon have 10 new quality measures to help you improve your performance. The **Physician Consortium for Performance Improvement**, convened by the **American Medical Association** (AMA), approved the measures, which are online at www.physicianconsortium.org.

- Six out of 10 physicians will have to limit the number of new Medicare patients they see if a 10-percent cut hits their Medicare payments next year, according to a new survey from the AMA.

- The **American College of Physicians** endorsed the High-Need Physician Workforce Incentives Act of 2007, which would create incentives for doctors to come into primary care and other generalist fields. The bill would create a scholarship program for generalist physicians in high-need areas of the country and offer a -loan repayment program- for primary-care docs serving in high-need facilities.

- **Scammer of the week: Stanley Cannella** billed for nine brain surgeries performed on himself, his wife and his two sons, and his business partner billed for the same number of brain surgeries on herself, her husband and her daughter, prosecutors told the New York Daily News.