

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Bush Calls For Info Gathering, Doesn't Cover Costs

You may have to provide pricing data to the government next year

As promised, **President Bush** signed an executive order calling on government agencies to track health care quality and costs. But the order didn't spell out how the government will reimburse you for the costs of providing this information.

Rather, the order asks the **Department of Health and Human Services** and three other agencies to collect information on the quality and costs of health care they provide. The agencies should share that data with each other, Bush directed, according to the Washington Post.

HHS and the other agencies will work with the private sector and other government agencies to develop programs to measure quality of care. They'll also try to identify practices that lead to high-quality care. In addition, the order calls for the agencies to use interoperable health records wherever possible and to compile information on the prices they pay for common services.

Bush said the order sends a message to providers: -In order to do business with the federal government, you've got to show us your prices.- But doctors warned that forcing them to be transparent about prices might not work because the government and health plans set prices for doctors. The agencies must have the programs in place by Jan. 1, 2007.

In other news:

- The requirement for physicians to see patients face-to-face before prescribing power mobility devices (PMDs) such as wheelchairs doesn't apply to cases where the doctor is only prescribing wheelchair accessories, the **Centers for Medicare & Medicaid Services** says in Transmittal 156, dated Aug. 18. Also, the doctor doesn't have to see the patient face-to-face before prescribing a replacement wheelchair. The doctor must submit a written prescription for the PMD to the supplier within 45 days after seeing the patient, CMS says.
- Medicare will give physicians some extra leeway in the Competitive Acquisition Program for Part B drugs, according to MLN Matters Article SE0657. Some physicians used the -J2- restocking modifier when they faced enrollment delays in the CAP, but faced denials because their situation didn't meet the guidelines for the -J2- modifier. You can resubmit those claims with the -J2- modifier and receive payment prior to Sept. 30, CMS says.
- This year's -Dear Doctor- letter will arrive in the form of a CD-Rom, CMS says in Transmittal 1035, dated Aug. 18. This letter explains the Medicare program, including the process of signing up as a participating provider under Medicare. As usual, the Medicare enrollment period for participating providers runs from Nov. 15 to Dec. 31.