

## Part B Insider (Multispecialty) Coding Alert

## Physician Notes: CCI 11.3 Adds 2,000+ Non-Mutually Exclusive Edits

## Only 164 edits deleted in latest update

Prepare yourself for one last round of Correct Coding Initiative edits for 2005.

The **Centers for Medicare & Medicaid Services** and **Adminastar Federal** have released CCI version 11.3, which takes effect Oct. 1. The latest update includes 2,542 non-mutually exclusive edits and one mutually exclusive edit.

But the newest CCI update only deletes 164 previous edits. Next week's issue of PBI will provide in-depth coverage of these latest edits.

## In other news:

• Now that Medicare has done away with the Certificate of Medical Necessity for power wheelchairs and power scooters, you'll have to provide the wheelchair supplier with proof of medical necessity from your own files.

A prescription for power operated vehicles (POVs) should include the date the physician examined the patient face to face, the diagnosis the vehicle is expected to help, a description of the vehicle, the length of need, and a date and signature, CMS officials said at a Sept. 13 open door forum on the new POV coverage policy.

Suppliers can work with you to come up with a standard form, but the suppliers can't provide you with a form that they created themselves, CMS officials said.

• The national provider identifier (NPI) project is off to a slow start, CMS officials told a Sept. 12 town hall meeting for providers. So far, only 135,000 providers have registered for an NPI, but officials expect registrations to pick up steam soon.

Even though Medicare will start requiring NPIs on May 23, 2007, small health plans have another year to keep using the old numbers. So if you work with some small managed care plans, you may need to keep the ability to use the old numbers a little longer. Medicare will try to work smoothly with Medigap insurers and other insurers that keep using the old numbers for crossover claims, officials said.

CMS won't make the new NPIs available to everyone, so it will be up to individual providers to provide their new NPI to referral sources and people they work with, officials said.

• The changeover from carriers and fiscal intermediaries to Medicare Administrative Contractors (MACs) doesn't mean the Program Safeguard Contractors (PSCs) won't keep looking at your claims. CMS officials told the Sept. 12 town hall meeting that the PSCs will still have a separate mission to work on integrity, audits and medical review. Each MAC will have a single set of local coverage determinations for its area, and the MAC medical directors will work with local providers to set uniform policies.