

Part B Insider (Multispecialty) Coding Alert

Physician Notes: CMS Adds CRNAs to Telehealth List

Plus: CMS beats its goal of tying 30 percent of payments to quality of care.

Practices that are eager to use the Medicare telehealth benefit just gained another ally—certified registered nurse anesthetists (CRNAs).

On March 11, CMS released a MLN Matters article outlining a few changes to the telehealth benefit, one of which is that CRNAs can now collect for the service. CRNAs must meet all of the following requirements to report telehealth services, according to MLN Matters article MM9428:

- The service must be on the list of Medicare telehealth services
- It must be furnished via an interactive telecommunications system
- The service must be furnished by a physician or authorized practitioner
- It must be furnished to an eligible telehealth individual, and
- The person receiving the service must be located in a telehealth originating site.

The implementation date for the new changes is April 11. To read more about CMS's update to telehealth services, visit www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9428.pdf.

In other news...

When CMS announced last year that it intended to shift Medicare payments from quantity to quality of care, many people believed the agency would never be able to meet its goal of tying 30 percent of reimbursement to alternative payment models by the end of this year—but CMS has proven the naysayers wrong.

On March 3, the Department of Health and Human Services announced that 30 percent of Medicare payments are already linked to alternative payment models that pay for quality of care rather than how many services the doctor performs. Thus, the agency is ahead of its original schedule.

"We reached this goal in partnership with the thousands of providers who collaborated with us in innovation," said **Dr. Patrick Conway**, Deputy Administrator for Innovation & Quality and CMS Chief Medical Officer. "It's in our common interest — as patients, providers, businesses, health plans, taxpayers - to build a health care delivery system that delivers better care; spends health care dollars more wisely; and makes individuals and communities healthier."

Resource: To read more about the shift, visit <http://www.hhs.gov/about/news/2016/03/03/hhs-reaches-goal-tying-30-percent-medicare-payments-quality-ahead-schedule.html#>.